

The Effect of Life Skills Training on Mental Health of Persons Referred to Counseling Psychology Centers in Rasht

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Abstract: The aim of this study was to evaluate the impact of research on mental health education of trained person's life skills. Materials and methods: This study is based on pre-test and post-test design with a control group. Sample is included 42 visitors of counseling centers that were randomly divided into control and experimental groups. Present study was used 28 questions form of Goldberg's mental health. Changes were analyzed by Paired t and independent t statistics. Changes in mental health intervention for the experimental group was significant with compared to before the intervention. Also, there was a statistically significant difference in terms of Mental Health between control and experimental groups after the intervention. Finally the Results of this study showed that teaching of life skills have improved patients' mental health.

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1. Introduction

Due to the complex and changing nature of today's society, people are continuing to struggle with many problems. Stresses of modern life, the existence of psychic phenomena such as anxiety, depression, drug abuse, delinquency, academic failure, motiveless and other mental health issues have difficult the peer pressure and lack of knowledge on the communication skills of daily work commitments, financial and social pressures, loosening family and social commitments. Ways to cope with short-term problems, may affect the ability of in long run (Adib, 2003, Taromyan et al, 1999). Today this is marked that the root of many physical and emotional problems is mental and social issues which shows the impact of the three dimensions of physical, mental and psychological on together and on humans health (Aghazadeh, 2000). Health is quality of life that is difficult to define and it is almost impossible to measure accurately. Mental Health according to the Mental Health Organization is a state of complete physical wellbeing, not just the absence of disease or psychosocial disability (Kaplan et al., 1996). Mental health has the overall concept with multiple definitions. Mental health also has several definitions, some authors believe that mental health is a positive perception of the events and circumstances of life and some believe that mental health and satisfaction with life are considered synonymous with happiness (Khoda Rahimi, 1995). Humans are different from view of mental health and How to control and handle problems and different levels of society, especially children and young people in the face of changes and social changes

are experiencing a variety of problems. What is involved in creating a healthy lifestyle is health promotion. The purpose of health promotion is a process that enables people to make capability and expand their activities to improve their health. Promote healthy behaviors required to perform. When a person Exposure to stress and life challenges, bring to a pattern of social, behavior adaptive on the result of providing for one's own problems. Heavy cost and time-consuming treatment of mental disorders in secondary and tertiary prevention services has led scholars Health Mental world revolves around his attempt to prevent the main focus on the first level. The World Health Organization' main goal is life skills education as part of a mental health organization has established. The main goal Organization Global health is a life skills training program in various communities around the world to spread, deployment and evaluation of the program Life skills training that focuses on the development of mental abilities (Such as problem solving - dealing with emotions - self awareness - communication skills - creative thinking criticism and stress management), the Children and younger (Aghajani, 2002). Life skills training increase their strength and psychic abilities wagon maker faced with difficulties in their social and mental health and expand the life of which Maple life skills training to enable a person of knowledge, values and attitudes to actual ability To become a leading motivation and behavior is normal. Also, the individual sense of self and others are effective and the prevention of mental illness and behavioral problems are effective. Useful life skills

training (interpersonal relationships, solving the problem, anger management, assertiveness) to female high school students in improving their mental health showed that after training, the students participated in this program had a significant reduction in symptoms of depression, anxiety, somatic complaints, social functioning experience. (Moradi, 2002, Taromiyan et al, 1999). Programs of life skills training have great importance and have effect on positive social behaviors, enhancing the ability of solving problem, Self Loss, anger, anxiety, depression, low Supernatant and crisis (Sanitioso, 2004). This study examines the impact of life skills education on mental health patients tested before and after the training and hypothesis were tested mental health and life skills training (test group against the control group).

2. Methodology

The experimental is done based on method with pre-test and post-test control group. Participants of study were referrers to psychological counseling centers of Rasht. Random sampling was performed. First of among the psychological counseling centers, two centers were randomly selected and 50 of the sampling method were elected. Subjects were randomly 25 patients in the experimental group and 25th Patients in the control group were placed. Ranges between 20-40 years age and their level of education are between the license and diploma. None of the subjects had a history of psychiatric hospitalization and medication and use not nervous drugs. For measuring the mental health, form with 28-item of Goldberg's general health and Hiller (1979) is used. This questionnaire contains four scales, each scale has 7 questions. The questionnaire aimed to achieve a specific diagnosis of mental illness in the hierarchy is not the main purpose of making a distinction between mental illness and health. In fact, this form has the advantage that it is designed for all members of society. The questionnaire can be a useful tool to determine the likelihood of a person's mental disorder. Four General Health Questionnaire scales include physical symptoms, Anxiety and insomnia, social dysfunction and depression in action. A general score is calculated from the sum of score. Scoring is as (0, 0, 1 and 1), i.e. options A and B are zero and C and D score are one grade. Maximum score will be assessed 28. The test score is closer to 28 indicate more disorder and the score is closer to zero is the mental health of the individual. About the general Health Questionnaire reliability, studies have been done. In a study, the reliability of the survey questionnaire with three back-half and Cronbach's alpha, respectively, 70%, 96% And 90% Has been reported (Taghavi, 2001). Goldberg reported a research study regarding the test-retest reliability and Cronbach's alpha was performed to

calculate the amount accepted high reliability (Bafandeh Qara Maleki, 2000). Reliability of 28 form of General Health Questionnaire by Plahang and Shah Mohammedi and Baraheni is calculated 0.91. The questionnaire based on Likert method by Hooman in Teacher Training College has standardized the raw scores and standardized internal consistency coefficient alpha is estimated respectively on 0.84 and 0.83 (Otadi, 2001). First samples that initially agreed to participate in the study, informed consent was caught and units of study participants withdrew from the study at any stage of the study were free and Maintain confidentiality of all information obtained and used it as a whole to ensure that conclusions were given to them. With mental health questionnaire people first pretest implementation and the independent variable (training Life Skills) for subjects with the randomly the alternative tests were performed and after running the test (fill in the questionnaire and psychological health) information. They seek not the data before and after The independent variables in the experimental group and the experimental group, seek not a data The control group after Using descriptive statistics such as mean and Standard deviation, graphs and tables, The use of software SPSS And Pair t Test (Paired T-test) and Independent t were examined.

3. Results

The study was conducted on 50 patients due to sample loss, eventually decreased to 42 Patients (23 patients in the experimental group and 19 in control group).

About aim of research, the results are given in Table 1 show the mean scores the test group of life skills training (post test score) decreased compared to the pre-test and Changes in the experimental group test t Pairs was significant ($p < 0.0001$ and $t = 41.42$). So it can be said that with 99% confidence, life skills training program has improved the mental health.

Table 1: Comparison of the psychological health before and after life skill training in test group

Group	Mean	St. Error	t Test	Score	Significance
Pre-test	24.26	2.39	41.42	22	0.0001
Post-test	6.04	2.26			

About the research' hypothesis, first condition of heteroscedasticity with the same variance was evaluated and as we can in Table 2, there are no statistically significant difference between the variances ($F = 0.002$ and $P = 0.967$). The condition of homogeneity of variance is consistent

Table 2: Compares of the mean and standard error of Mental health in both control and experimental groups after training in life skills

Group	Mean	St. Error	F Test	F significance	t Test	Score	Significance
Pre-test	16.4	2.26	0.02	0.967	10.32	40	0.0001
Post-test	23.00	2.05					

According to Table 2, the differences between control and experimental groups with t test has been independently statistically significant ($P < 0.0001$ and $t = 10.32$). It can be claimed that with 99% confidence, life skills training program is positive effect on mental health.

Figure 1: Comparison the mean of mental health before and after of life skills training with the separation of control and experimental groups

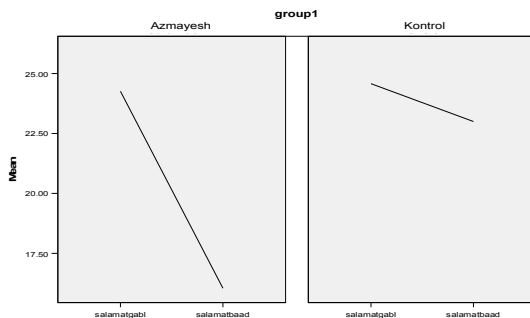


Figure 1 shows the comparison the mean of mental health before and after of life skills training with the separation of control and experimental groups and it is clear from the diagram, mean of mental health score in the experimental group training is reduced. But in the controls group they are not training, mental health score was not significantly reduced.

4. Conclusions

In the present study the effect of life skills training on mental health of persons referred to counseling psychology centers in Rasht has been investigated. Findings of this research showed that life skills trainings is improved the mental health. According to research Sharifi et al., (1993), problem solving skills training can reduce specific symptoms of depression cure depression in adolescents and influence them and Increases in the quality of their personal and interpersonal relationships with peers is his ability. In another study entitled "Effects of life skills education on adolescent mental health and locus of control" that was conducted on 30 students, study subjects showed improvement in mental health receiving life skills training (Aghajani, 2002). On the other hand,

Taromyan (1993) increased physical and mental health education on life skills such as confidence, dealing with environmental and psychological stress, anxiety and depression, suicidal ideation decreased realistic, reduce wastage, promote healthy behaviors and effective communication, interpersonal and social reduction of drug abuse prevention and mental health problems, behavioral and social impact have seen. well as the usefulness of research on teaching life skills (interpersonal relationships, problem solving, anger management, assertiveness) to female high school students in improving mental health status, the results obtained after the training, the students participating in these programs, a significant reduction in symptoms of depression, anxiety, somatic complaints, social functioning showed the (Moradi, 2002).

Results of Makikangas (2004) teaching life skills in the field of consciousness studies, which showed that after the training, students, are more honest, more altruistic and less aggressive show. In another study of life skills education on alcohol, cigarettes and drugs were investigated, the results showed that training in reducing smoking, alcohol and drugs, increasing mental health have been instrumental in (Botvin et al, 2006). Blanchard (2006) life skills education programs to prevent suicide, violence and other negative behavior and academic performance used results indicate that the rate of suicide, violence and negative behaviors and reducing wastage Is. Well as Jeffrey (2002) in their study showed that stress increases the adaptability of life skills training. All The above research to the study, teaching life skills in effective health promotion Primary prevention mental and ten are shown. Therefore the cost and availability of prevention and this training, it can be used for the welfare and improvement of the mental health community.

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References

1. Adib, Y., (2003). Life skills curriculum model for optimal design: (Unpublished PhD/ Thesis), University of Tarbiat Modares Tehran.(Persian)
2. Aghajani, M. The effect of life skill training on mental health, resource control: (Unpublished

- MS/ Thesis), University of Shahid Beheshti Tehran.(Persian)
3. Aghazadeh, M. (2000). Life skills training guide for young people. Tehran: Published by Danesh, (Persian)
 4. Alamdar, H., Shojaei, S., (2005). The effect of life skills training on conduct disorder in middle school students. *Counseling Researches*, 16(4). (Persian)
 5. Bafandeh Gharamaleki, H.(2000). Compared to deaf and haed of hearing adolescents in public health: (Unpublished MS/ Thesis), University of Tehran.(Persian)
 6. Blanchard, B. J.(2004). Investigating the relationship between adolescence self – concept and romantic relationship satisfaction. published B.A. Dissertation, Sanita selm college.
 7. Botvin, G.J., Griffin, k. w., Nichols, T. D.(2006). Preventing youth violence and Delinquency through universal school- based prevention approach & prevention science. Vol. 6 issue, P:403.
 8. Jeffry, P.(2002). Competency coping and contributory life skill. *Journal of Agricultural Education*. Pennsylvania University, p: 68-74.
 9. Kaplan. H., Sadok, B., (1992). Synopsis of Psychiatry. Translated by: Pourafkari N.(1996). Tehran: Nashre Ab. (Persian)
 10. Khodarahimi, S., (1995). The concept of psychological health. Published by Javdan kherad,Mashad. (Persian)
 11. Makikangas, A., Kinnunen, U., Feldt, T. (2004). Self esteem, disp. Sitional optimism, and health, Evidence from cross-laggrd data on employee. *Journal of research in personality*. 38: 556-57
 12. Moradi, M., (2002). The impact of beneficial life skills training on high school students in Tehran in his mental status improved: (Unpublished MS/Thesis), University of Shahid Beheshti, Tehran.(Persian)
 13. Otadi, M., (2001). Women’s employment impact on the mental health of spouses: (Unpublished MS/ Thesis), University of Alzahra, Tehran(Persian)
 14. Sanitioso, R.B., Wlodarskki, R.(2004).Enserch of information that confirms a desired self-perception: Motivated processing of social psychology bulleatin,30,412-422.
 15. Sharifi, Z.(1993). The impact of teaching life skills on reduces depression in adolescents. (Unpublished MS/ Thesis), University of Tehran.(Persian)
 16. Taghavi, M.R., (2001). Validity and Reliability of Public Health Questionnaire. *Journal of Psychology*.4: 381-398.(Persian)
 17. Tarmyan, F.(1993). Preliminary evaluation of the effectiveness of life skills training programs to prevent drug abuse in the first year students of junior high school: (Unpublished MS/ Thesis), University of Shahid Beheshti, Tehran.(Persian)
 18. Tarmyan, F., Mahjueei, M., Fathi, T.(1999). Life Skills.3rd ed. Published by Tarbiat, Tehran. (Persian).

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