

Effectiveness of Life Skills Education (LSE) Training for School Teachers in a Post Disaster Scenario

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Abstract

Measuring the effectiveness of the training in life skills education imparted to the school teachers in the aftermath of tsunami disaster was the broader aim of the study. Twenty five teachers from St. James High School, Vaniakudy, Government Middle School, Colachel and St. Alex Middle School, Kottilpadu were selected for the training programme with the permission of the Education Department officials at Kannivakumari District. Profile of the participants was collected using a performa designed for the purpose. Pre-post administration of (1) Knowledge Assessment Scale (Sekar, 2007) and (3) Life Skills -Opinion Questionnaire (Bharat, Kishore Kumar & Vranda, 2005) was done to measure the effectiveness of the training. Results showed a significant knowledge difference ('t' value = 26.6, df - 24 'p' < 0.001) before and after training, indicating that the training was beneficial for the participants.

Keywords: Life skills education, Training school teacher, Disaster

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Introduction

Post tsunami, in Kanniyakumari District, Tamil Nadu, affected children were found to be aggressive, disobedient, playful, showing disrespect inside and outside the family, abusing substance, attempting suicides, less interested in studies, etc particularly after the passage of 1.5 - 2 years. These issues were raised by the teachers during the review meetings in the schools and demanded solution. The outcome of the subsequent brainstorming session of the psychosocial care team members (Psychiatric as well as Community development social workers) suggested life skills education training to teachers and implementation by them with the handholding support by the team members.

A set of ten life skills such as (1) Self awareness, (2) Empathy, (3) Decision-making, (4) Problem solving, (5) Interpersonal skills, (6) Effective communication, (7) Critical thinking, (8) Creative thinking, (9) Coping with stress and (10) Coping with emotions were (WHO, 1997) the focus of training. Life skills training sessions are self building in nature wherein the participants are assisted to internalize the personal and social skills essential for successes in life. Anyone imbibing the skills experiences an enhancement in the capacity to cope and tackle challenges that comes across life.

Children and adolescents are trained on life skills for the reasons that it facilitates the process of socialization, supports healthy development, prevents certain causes of disability, disease and death and the most important that it equip them to be in pace with the changing social situations (WHO, 1999). Globally, what makes life skills education popular is its utility as a preventive and promotive approach. It's proved to be useful in early addressing of psychosocial social issues such as substance abuse, violence, HIV/AIDS, etc and for the same reason, these days it's an important component of the health promotion programmes.

Research studies shows that life skills training enhances self esteem (Esmaeilinasab et al., 2011), happiness, quality of life, emotion regulation (Tahereh et al., 2011), social adjustment (Bita et al., 2010) and satisfaction of life (Akbar, 2011) among children and 42

adolescents. Life skills training is also effective in symptom reduction such as anxiety, depression and stress among children with mental disorders (Nasser & Soran, 2010). Impact of life skills education programme implemented through teacher-trainers reported a significantly better self-esteem, coping, adjustment specifically with teachers in school and pro-social behaviour among children and adolescents in the intervened group than those in the matched controls (Srikala & Kishore Kumar, 2010). There were also positive changes in the class behaviour and interaction among the children who were part of the training programme.

Reduction in fighting and abusive nature, bullying and an overall improvement in skills was noted in pupils. Marked improvement was also seen in respecting others, friendship, 'opening up', level of confidence and caring each other. Discipline in the class and school improved as a result of better student-teacher interaction after implementing life skills education. As trainers teachers started feeling better about themselves and they became more confident in their teaching abilities (ICAP, 2000).

Life skills education training brings significant changes in behaviour components and problem behaviour of children in difficult circumstances (John, 2009). It is also an answer to prevention of violence in children as enhancement of the cognitive, interpersonal and emotional infuses social. skills social responsibility and maturity (Katia, Anna & Parul, 2000). Further, literature reveals that school is one of the most appropriate places for introducing life skills education (Rhona et al. 1994). It is also a proven fact that parents and teachers have a major role in strengthening life skills in children and adolescents (Parthasarathy, Renjith & Shobitha 2009).

Methodology

The present study focused on determining the effectiveness of the life skills training imparted to the school teachers in Kanniyakumari District, Tamil Nadu. This training was part of the psychosocial care programme for tsunami survivors by National Institute of Mental Health and Neurosciences (NIMHANS), Bangalore in the affected Southern States of India. A total of 25 teachers handling the high school classes from 8th to 10th standard from St. James High School, Vaniakudy, Government Middle School, Colachel and St. Alex Middle School, Kottilpadu participated in this pilot training programme. These schools were located in the tsunami affected villages.

The concerned education office in Kanniyakumari district had granted the necessary permission for the teachers to participate in the training programme. Ethical committee clearance of NIMHANS was granted for the entire psychosocial care programme under which this particular study was conducted. The three day training programme on life skills education was held from 13th to 15th February 2007, based on a life skills module (table 1) developed at the Psychiatric Social Work department in NIMHANS, Bangalore (Sekar, 2007). Life skills education training adopted multiple participatory methodologies like brain storming, free listing, roleplay, group discussion using case studies, storytelling, debate, games with cognitive messages, etc.

Measurement before and after the training programme was done using the tools (1) *Knowledge Assessment Scale* (Sekar, 2007) a tenpoint scale that record the pre-post training changes and (2) *Life Skills - Opinion Questionnaire* (Bharat, Kishore & Vranda, 2005) used to assess the opinion of teachers on life skills education. Both the scales were extensively used for the various training programmes in the tsunami affected districts in Kerala, Tamil Nadu and Karnataka. A participant profile was prepared to record the socio-demographic details of the participants.

Participants are taught on effective communication and the significance of having good interpersonal skills, meaning of assertive skills, handling negative peer pressure, critical thinking and creativity, enhancing self awareness, concern for others, identify and manage stress through positive coping mechanism and taking apt decision making to find solutions to their problems.

S1. no:	Content	Methodology	Expected Outcome/learning		
1	Ice-breaking	Game	Initiate interaction and develop familiarity among participants		
2	Life Skills Education	Lecture/ Discussion	Definition and meaning		
3	The issues of children and adolescents	Group discussion/ Presentation	Identification of issues		
4	Moral education V/s life skills education	Lecture/ Discussion	Differentiate life skills education and moral education, realize the importance of LSE		
5	10 basic skills	Activity/ Discussion/ Role play/ Experience sharing	Internalize the 10 basic life skills such as (1) Self awareness, (2) Empathy, (3) Decision-making, (4) Problem solving, (5) Interpersonal skills, (6) Effective communication, (7) Critical thinking, (8) Creative thinking, (9) Coping with stress and (10) Coping with emotions		
6	The role of teachers in LSE	Lecture/discussi on	To understand the facilitation process		
7	Time Management	Activity	To learn about time management and the skills involved, effective ways of studying, devoting time personal, social and family purpose		
8	Substance abuse	Story telling/Group Discussion	Harmful effects of alcohol/drugs		
9	Sexuality and HIV/AIDS	Flipchart/discus sion	Understand normal development, changes in adolescents, sex and sexuality, myths, risk taking behaviour and its consequences		

Table: 1 Contents of the life skills training programme

S1. no:	Content	Methodology	Expected Outcome/learning
10	Social Responsibility	Activity	Why to be socially responsible?
11	Impact of Advertisement s	Group Discussion	Ill effects, critical analysis
12	Pre-Post Assessment	Questionnaire	Evaluation of the training

Results

Socio-demographic profile

Among the participants, 11(44%) teachers were from Government Middle School, Colachel, 8 (32%) from St. Alex Middle School, Kottilpadu and 6(24%) from St. James High School, Vaniakudy. Male teachers were 4(16%) and female teachers were 21(84%). Majority of the teachers were Christians 19(76%) followed by Hindus 6 (24%). Married persons were only 5(20%) and unmarried were 20 (80%). Among the participants 18 (72%) reported to be direct victims of disaster (tsunami). Another 7 (28%) persons among the participants were non victims.

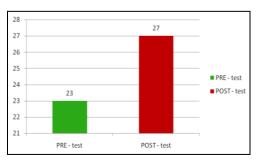
Level of knowledge on life skills

The mean score on the level of knowledge on life skills before training was 1.72. After training the score rose to 8.68. A significant difference ('p'<0.001) was thus observed in the pre and post knowledge level scores on paired 't' test. Table No.2 below shows some of the items that shows improvement in the knowledge about life skills among the teachers.

Sl.	Item description	Pre	Post
No		assessment	assessment
		(%)	(%)
1	LSE can be taught by teachers	100	100
2	LSE is essential for school children	100	100
3	LSE should be part of school curriculum	95	100
4	LSE is only theoretical knowledge	21	53
5	Moral education is important than LSE	90	95
6	Experiential learning methods are used in LSE training	68	90
7	LSE increase adaptability of children in the school	79	100
8	LSE promotes health in adolescents	90	100
9	LS increase academic performance,	84	100
	decrease dropout, better adjustment	04	
10	Life skills are not the responsibility of the teachers	05	63

Opinion of life skills education

Before the training programme, the mean score on the life skills opinion questionnaire was 23 (Graph 1). After the training programme a change in opinion was noted and the new mean score was 27. Paired 't' test revealed a significant difference ('p'<0.01) between the pre and post assessment scores.



Graph: 1 Mean score on Life Skills Opinion Questionnaire"

Discussion

It is a proven fact that the inbuilt buffers existing in the society in the form of control and support from the near and dear ones guide children and adolescents to grow into a mature adult. This buffer is lost in major disaster situations like tsunami where the social support system within and outside the family erodes almost completely and the victims especially children and adolescents experience a huge psychological turmoil. The stress experienced is usually manifested in the form of anger outburst, aggressive behaviour, crying spells, sadness and so on. It is due to this understanding that special attention given to children and adolescents in the psychosocial care programme (Sekar et al., 2005) in the initial relief and rescue phases. As they pass through rehabilitation and rebuilding phase, children and adolescents would require additional skills to adapt positively to the new situations, experiences and changes in their life. The skill deficits may drive many into socially unaccepted behaviours like substance abuse, scholastic backwardness, aimlessness, low frustration tolerance, instant pleasure gratification, picking up fights, etc. The scenario thus demands intervention.

Children and adolescents spend a major chunk of their day time at schools. For the same reason, as mentioned before school becomes the best place for introducing life skills education (Rhona et al. 1994). Teachers, in general have a crucial role in the personality formation of the students. Training the teachers on life skills education and providing handholding support for the implementation helps teachers to place themselves better and facilitate the students to overcome the difficult situation.

Life skills training for the school teachers in the present study was found to be effective and one of the reasons for the same could be the participatory training methodology. Participatory approach arouses interest, sustains attention and makes learning possible through fun and humour (Renjith, 2012). The training had enhanced the knowledge level and also the opinion about life skills education.

Prior to the training programme, the belief of many of the teachers was that life skills education was theoretical, less important than 48

moral education and only rich, urban and girl children may need it. Further, many believed that advice, punishment and disciplined school atmosphere was sufficient to increase emotional and social abilities in adolescents. Most of them were unaware of the health benefits and believed that academic excellence alone can bring success in life. Teachers were also reluctant to accept that imbibing life skills in students were their responsibility. It was a surprise that in the opinion of few teachers, adolescents never experience any stress.

Training programme changed the perception of the teachers. Applicability of life skills for children in any culture, gender and socio-economical status was clear. Difference of LSE and moral education are known to the participants. Topics mostly taught by using multiple methodologies such as activities with cognitive messages, free listing, group discussion, brainstorming, modelling and role plays helped in clear and easy learning. Teachers understood how to ask the facilitative questions to children and adolescents after each session on a particular topic. They also learned to relate the activities to the real life situations. Demonstration and explanation of the application of appropriate skills to deal with different situation was made clear by the trainer to the teachers. Thus, the teachers have become confident in class room implementation of life skills education. It can bring the desired positive changes in the children and adolescents.

Conclusion

Teachers were enthusiastic about the implementation of the programme at the school level as they felt it could bring solutions to several pressing issues noticed among children and adolescents in the aftermath of tsunami. Also, trained teachers being from the same school allows effective monitoring of the progress made by the students. Integration of life skills education into the school curriculum is essential as it would help in institutionalising the programme. Life skills education implemented through teachers may be considered an alternative approach.

Declaration of Interest: The authors alone are responsible for the content and writing of the paper.

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