

## **Chapter Four**

### **Life Skills**

*This chapter is based on the premise that life skill education promotes mental well-being in young people and equips them to face the realities of life. Here I introduce the concept of life skills education and the reasons for its indispensability in today's world. I begin with a personal experience, written as a journal entry, which enabled me to recognize the importance of life skills education in the life of children. Additionally, I examine the core life skills and exemplify the organised course of action I pursued to shape the module I used to enhance life skills in children. Finally I validate the need of an interactive educational programme and an active learning technique for life skills enhancement using drama as a method.*

#### **The importance of mental health**

I never imagined, in my wildest dreams, that I would ever see something like this in my lifetime. All the airports are closed. No flights are being allowed to land in USA. The borders are all sealed. Even the domestic flights are all grounded. The smoke and the debris are moving like a tidal wave. It is like a scene from a Hollywood 'disaster' movie, however this is real. On live television, I can see shots of people running; like in a 'disaster' film, desperately clutching whatever they have in their hands, tears streaking their soot covered faces, running, just running. Everyone is crying, the announcers, reporters, the police, the public... everybody. Everyone is stupefied. They do not know what is happening. Everyone is disoriented. I can see a shot of the flight going to crash into the World Trade Centre. Can you imagine fifty-five floors crashing down like pancakes? New York is like a --- war zone.

I can't believe it; the twin towers have collapsed! I am watching it live, sitting in New York, about half an hour away from the twin towers. First one tower, then the other. Even though I am watching it, I cannot believe it's true. It is so unreal. It is so horrible--- horrific is the word that is repeated by everyone, again and

again.

I keep on thinking about these events that have just taken place. While reflecting on them one appeal relentlessly returns to me: "...even though all institutions and offices will remain closed to-morrow, all the school principals, supervisors and few teachers are to report to their schools... As they have to meet to discuss how to help the children deal with the trauma of to-days events...."

This explicates the importance of mental health in our lives and in the lives of our children.

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The mental health and well-being of our children requires our attention. According to the WHO papers on mental health (Hendren, Birell Weisen and Orley, 1994), '*nearly one in five children will have an emotional/behavioural disorder at some time during their youth regardless of where they live or how well to do they are*' (p. 1). Emotionally disturbed children exhibit their impairment in a variety of ways such as failing academically, having poor self-images, having poor peer relationships and additionally, they may have little respect for the law of their society and adults (Hendren et al, 1994).

Academic failure and social rejection have a lasting consequence, as a failure to learn in school limits a person's chance to succeed in the future.

*'The improvement of mental health of children and prevention of childhood emotional problems is a very important part of any mental health programme. This can partly be done by teaching the school children the essentials of mental health and giving training in life skills.'*

(Srinivasa Murthy and Wig, 2003)

At the heart of life skills education is the learning of life skills. Life skills are '*abilities for adaptive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life*' (WHO, 1997, p.1).

The core set of skills (WHO 1997: p.1) that follow the above description are:

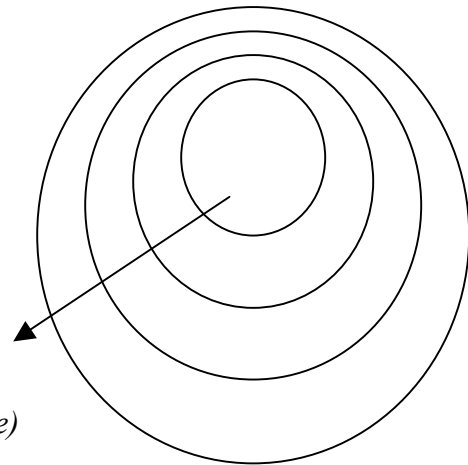
- *Problem solving*
- *Critical Thinking*
- *Communication*
- *Interpersonal skills*
- *Coping with emotion*
- *Decision-making*
- *Creative thinking*
- *Interpersonal skills*
- *Empathy*
- *Coping with stress*

Life skills education promotes mental well-being in young people and equips them to face the realities of life. By supporting mental well-being and behavioural preparedness, life skills education equips individuals to behave in a pro-social ways and it is additionally health giving (Birell Weisen and Orley, 1996). To achieve health giving pro-social behaviour (seen in the outer layer of Fig.1) a life skills programme must have effect on the inner layer of mental well-being and middle layers behavioural preparedness. Consequently, life skills education can be seen as empowering children and thus enabling them to take more responsibility for their actions (Orley, 1997).

Inner to outer circle-

- Life skills education
- Mental well-being
- Behavioural preparedness
- Health giving pro-social behaviour

*(Arrow represents direction of effect over time)*



**Fig. 1 -Model of effects of Life skills education (Birell Weisen and Orley, 1996, p.4).**

At the United Nations Inter-Agency Meeting held at WHO, Geneva (WHO, 1999: p.4) life skills education was considered as crucial for:

- *The promotion of healthy child and adolescent development;*
- *Primary prevention of some key causes of child and adolescent death, disease and disability;*
- *Socialization;*
- *Preparing young people for changing social circumstances.*

Life skills education has been developed by different organisations with different objectives, for example, prevention of substance abuse (Perry and Kelder, 1992) prevention of bullying and prevention of AIDS (WHO, 1994). However, Orley (1997) argues that learning life skills is a desirable activity on its own as it helps individuals to deal effectively with everyday demands and does not have to be justified as preventing anything. Nor is it necessary to introduce a life skills education programme only when and where there are mental and behavioural disorders (WHO, 1999). Effective application of life skills can influence the way children feel about others and themselves, which in turn can contribute to the children's self-confidence and self-esteem.

I believe that the school is a good place to introduce life skills programmes, as the school years, during which children acquire a major part of their formal education, are important developmental years in an individual's life. In school, besides academics children also learn social skills and encounter authority other than their parents (Matheson and Grosvenor, 1999). Students often look to adults in the school community for guidance, support and direction (Brooks, 2004). Furthermore, schools have a high credibility with parents and community members (WHO, 1997) and thus have a great influence on children and their families. For these reasons I think the school is a formidable institution for a life skills intervention.

I believe school education should emphasise not only academics but also the mental well-being of children to make it a positive place of learning. Moreover, schools are crucial in building or undermining self-esteem and sense of competence as teachers and peers play

an important role in the development of self-esteem of school going children (Woolfolk, 2001). I therefore believe a comprehensive teacher-training programme in life skills education would facilitate not only better teachers but also would support children's educational and mental health requirements (Edwards, 1994; Cohen, 1999; Brooks, 2001). In this manner schools can act as a safety net, protecting children from hazards, which affect their education, developmental and psychosocial well-being.

A successful intervention programme in schools can be founded at four level suggests Hendren, Birell Weisen, and Orley (1994, p. 6):

**Table 3: Levels of intervention of mental health programme.**

<b>Comprehensive school mental health programme</b>	<b>Level of intervention</b>
Promoting psychosocial competence	I. Integrated into school curriculum
Mental health education	II. Part of general health curriculum
Psychosocial intervention	III. Students needing additional help in school
Professional treatment	IV. Students needing additional mental health intervention

Hendren and co-writers (1994) compare level I through IV to primary, secondary and tertiary prevention efforts. Levels I and II / primary prevention and health promotion interventions, aim to promote healthy behaviour and prevent disorders from developing for the entire school population. Level III the secondary prevention efforts, target a selective population of high-risk students to prevent the onset of disorder. The tertiary level, seen as level IV aims to aid students who have already developed a disorder. At level IV with the help of mental health professionals individual children's needs could be met with the intent of treating disorders.

The focus of my study is on children needing additional help and falls in the category of secondary prevention efforts at Level III, which targets a selective population of high-risk students. Children with chronic illness and disabilities, history of physical and sexual abuse, difficult temperament, developmental delay, scholastic underachievement, to name a few, are considered to be students at-risk (Hyson and Van Trieste, 1987; Birell Weisen, and Orley, 1996; McClellan and Katz, 2001). Children with specific learning difficulties (SpLD) are also recognised as individuals at-risk of having mental health problem (Deci, Hodges, Pierson, and Tomassone, 1992; Edwards, 1994; Barrett and Jones, 1996; Miles, 1996; Brooks, 2004).

**Where do I start?**

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To find a starting point, I had to search among prior theories and investigations. Being a special educator I am competent in the field of educational psychology and my experience in drama facilitated my understanding of educational drama. However, I had to additionally familiarise myself with the language and methods of socio-psychology.

The first ten lessons of my study in life skills enhancement were based on teaching communication skills (Chapter 5, p.103). From the point of view of life skills enhancement, my classes were effective (Chapter 5, p.123-5), however the critical incident described in Chapter 5, p. 124 compelled me to revisit my initial plans.

Greene (2003a) suggests a teacher should imagine, reflect and act with more and more concrete responsibility. Quoting Ricoeur's description of imagination as '*the passion for the possible*', she suggests that '*our life projects—teaching, ...must be imagined as possible and cared about enough to move us to hard and committed work*' (p. 7).

I realised that merely preparing activities for life skills lesson is not sufficient for a comprehensive life skills programme project (WHO, 1997). For an effective and broad based module that hopes to promote psychosocial competence and achieve health

promotion, the life skills lessons need to be planned as a part of a sequential and unified programme. To some extent the lessons should be designed enabling later life skills activities to build on skills taught/learnt earlier in the programme (WHO, 1997). This was something I had overlooked when I planned Cycle 1 (Chapter 5,p.103).

Thinking creatively and critically and then reflecting helped me to alter my life skills enhancement programme and reposition it. While reflecting I reviewed the situation using LEARN (Table 4. Source: CNO, 1996 as quoted in Maich, Brown and Royle, 2000, p.312)

**Table 4. LEARN: guidelines for reflection**

- Look back; play the experience backing your mind
- Elaborate and describe the experience in writing
- Analyze why things occurred as they did
- Revise your plan for a future similar situation
- New trial; implement you revised plan

I revisited the list of the core skills using the Life Skills Education Manuals (WHO 1994, 1996, 1997) and the WHO Life Skills Education-Planning for Research manual (1996) as references. Using the guidelines for reflection (Table 4), I tried to understand the core life skills (Appendix 10). I deciphered the core life skills and analysed each one and I identified the ‘understanding emotions’ as the first step in life skills education.

### **Time Line**

Simultaneously, I looked at the time line of my research implementation to determine the outcomes that can be expected. Birell Weisen and Orley (1996) suggest that a short-term programme of approximately three months could facilitate knowledge acquisition, a change in attitude and improved well-being. A middle range programme of one year could assist positive behavioural intentions, improved psychosocial competence or life skills, improved classroom climate and behaviour, improved relationships between pupils, and pupils and teacher, improved academic achievements. A long-term

implementation of a programme of two-three years could show significant change in health and social behaviour.

The implementation of my research module, expected to be carried out over a period of one and half years as a part of the research requirement of the university, falls in the category of a middle range programme. Table 5 shows the outcomes I hoped to achieve after one and half–two years.

**Table 5: Expected Outcomes with reference to Time Line**

	Year 1(level 1)	Year 2 (level 2)
<b>Understanding and Coping with emotions</b>	To understand that there is a range of emotions and the expressions of different emotions  To become aware different people may experience different emotions in response to the same situation	Understanding how they affect the way we behave.  To better understand how others' words and action can influence our emotions and how ours affect others
<b>Self -awareness</b>	Learning about me as a special person	Self control
<b>Communication</b>	Basic verbal and non-verbal communication skills	Assertive communication in the face of peer pressure
<b>Empathy</b>	Understanding how people are alike and how we differ. Learning to appreciate the differences between people (also falls in self awareness skills)	Avoiding prejudices and discrimination of people who differ (also falls in self awareness skills)
<b>Creative Thinking</b>	Developing the capacity to think creatively	Generating new ideas about things that are taken for granted



	Year 1(level 1)	Year 2 (level 2)
<b>Interpersonal relationship skills</b>	Learning to value relationships with friends and family	Forming relationships and surviving the loss of friendships
<b>Decision making</b>	Learning basic steps of decision-making	
<b>Coping with stress</b>	Identifying the sources of stress	Methods of coping in stressful situations
<b>Problem solving</b>	Learning basic steps of problem solving	
<b>Critical thinking</b>	Learning basic steps of critical thinking	

**Table 5: cont.**

The life skills intervention module planned for this research was planned in a series of fifty lessons. The module was divided into six terms (see Table 1,p.7) to establish a fixed juncture to enable effective, periodic assessment. The students’ level in the early stages of a particular life skill instruction is termed as the pre-learning level. The level of the students’ development at the end of the instruction is termed as the post-learning level.

The lessons were designed to provide the children with instructions regarding understanding and coping with emotions, self-awareness and empathy. Issues regarding interpersonal skills, problem solving, communications, decision making and critical thinking were ‘infused’ into the module, in that they were not taught as separate subjects but were taught within the teaching of another life skills.

For example, in Cycle 2 when they learnt about understanding and coping with emotions the children were introduced to problem solving and decision-making (described in Chapter 9, p.253). Critical thinking, decision-making and problem solving was similarly dealt with during the creation of the dance-drama performed during the annual programme (Chapter 7, p.218-220).

A part of the module was devoted to facilitate empathy training. However, enhancing empathy was infused from the beginning of the research in Cycle 1 (see photographs in Chapter 8., p. 242), when the children started learning about emotions and

emotional understanding (e.g. Chapter 6, p. 193-4) and when the children learnt about ‘self’ and participated in the ‘blind walk’ activity (Chapter 7, p.227). Additionally, creative thinking, communication skills and interpersonal skills were not dealt with as separate subjects but were essential parts of the whole module (e.g. Chapter 9, p.250).

### **Linking life skills education and drama**

A life skills educational programme needs to be incorporated into schools in the interest of the children’s mental well-being. A competent life skills programme should be concerned not only with the prevention of emotional and psychosocial problems but should also be focussed at management and enhancing pro-social behaviour. Research conducted by Lions-Quest (Quest, 1992), Consortium on School Based Promotion of Social Competence (1996), Greenberg, Kushe, Cook, and Quamma (1995) and WHO (1993, 1994) have all stressed the need for an innovative and a child-friendly curriculum in mental health education.

Teaching techniques that integrate active learning need to be incorporated into a life skills educational programme to increase its efficiency. As life skills education is a dynamic process it cannot be learned or enhanced on the basis of information or discussion alone. Expecting children to change their behaviour merely by providing information is impracticable suggests Orley (1997; WHO, 1999). It must also include experiential learning. Experiential learning involves a ‘*direct encounter with the phenomena being studied rather than merely thinking about the encounter, or only considering the possibility of doing something about it.*’ (Borzak, 1981: p.9 in Brookfield, 1983).

Teachers need to move beyond lecturing to create a stimulating learning environment as life skills learning cannot be facilitated on the basis of information or discussion alone (United Nations Population Fund, 2000). Moreover, rote-learning style of Indian education cannot facilitate life skills enhancement as participants merely sit passively taking in information and subsequently merely memorise the lesson. Importantly, the lessons need to be designed creatively to understand diversity in learning styles of children especially children with SpLD.

Life skills learning is facilitated by the use of participatory learning methods and is based on a social learning process which includes: hearing an explanation of the skill in question; observation of the skill (modelling); practice of the skill in selected situations in a supportive learning environment (scaffolding); and feedback about individual performance of skills.

I perceive drama as a natural vehicle for active and experiential learning as it is an extension of the imaginative, pretend play of childhood (Blatner and Blatner, 1997; Henry, 2000). Practitioners of educational drama (Slade 1954, 2001; Jackson, 1993; Bolton, 1998; Taylor, 2000) highlight the effectiveness of drama in enhancing the psychosocial aspect of a child's growth and suggest that drama can play an important role in life skills enhancement. This makes drama a suitable approach for delivering a competent life skills curriculum.

Moreover, I believe drama creates an opportunity for vicarious learning that is learning by observing others. 'Modelling' (Bandura, 1986) can have a powerful effect on learning. According to Bandura's (1977) Social Learning theory '*patterns of behaviour can be acquired through direct experience or by observing the behaviour of others (modelling)*' (p. 22). Modelling can be exploited to broaden horizons- to teach new ways of thinking (Woolfolk, 2001), can be effectively used to teach new behaviour (Bandura, 1986) and used to encourage already learnt behaviour (Woolfolk, 2001). Moreover, modelling facilitates learning life skills in the safe environment of the school.

Cognitive development occurs through the child's conversations, interactions and through problem-solving experiences shared with a parent or teacher and also a sibling or peer (Vygotsky, 1978, 1987). These people serve as guides and teachers, providing the information and support necessary for the child's intellectual growth. Bruner identified this means of assistance of adults and able peers as 'scaffolding' (Wood, Bruner and Ross, 1976). The support could be clues, reminders, and encouragement, breaking the problem down into steps, providing examples, or anything else that allows a student to grow in independence as a learner. I believe Bruner's method of 'scaffolding' is similar to the methods used in drama.

I perceive drama as an effective tool for the implementation of a life skill enhancement project. Drama enables children to make connections and understand complex life situations and human intricacies. Intrinsically drama is a multisensory mode of learning, and can increase awareness of self and others. It can enhance communication skills, creative thinking skills and interpersonal skills through experiential learning. At the same time drama democratise the classroom for the reason that it relies on co-creative input. Collaboration, mutual decision-making and problem-solving are central to the process of drama. Additionally, role-play in drama allows the participants to imagine what life is like for another person; even in a situation they are not familiar with, thus encouraging empathetic skills. Importantly, drama takes learning back to the core, returning to the:

*‘human context where it sprang from so that knowledge is not an abstract, isolated subject-based discipline, but is based in human action, interaction, commitment and responsibility’* (Heathcote in Bolton, 1998, p.177).