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The Effect of Life Skills Training on Mental Health and Student Self-Esteem

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Abstract- The main purpose of this study was to investigate the effect of life skills training on mental health and self-esteem of elementary school female students. The present study was a semi-experimental design with pretest-posttest design with control group. The statistical population of all fifth grade female students of the elementary school in Rashtkhar were selected through 2009-10 educational year. The sample consisted of 60 female students in a simple random sampling. They were randomly assigned into experimental and control groups (each group included 30). The research tools consisted of the Choldeberg mental health test, Cooper Smith's self-esteem test, and a practical guide to life skills training. Data were analyzed using independent t-test and these results were obtained.

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The Effect of Life Skills Training on Mental Health and Student Self-Esteem

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Abstract- The main purpose of this study was to investigate the effect of life skills training on mental health and self-esteem of elementary school female students. The present study was a semi-experimental design with pretest-posttest design with control group. The statistical population of all fifth grade female students of the elementary school in Rashtkhar were selected through 2009-10 educational year. The sample consisted of 60 female students in a simple random sampling. They were randomly assigned into experimental and control groups (each group included 30). The research tools consisted of the Chaldeberg mental health test, Cooper Smith's self-esteem test, and a practical guide to life skills training. Data were analyzed using independent t-test and these results were obtained.

1. Life skills training improves student mental health.
2. Teaching life skills improves student self-esteem.
3. The effect of education on life skills on physical symptoms, anxiety and insomnia has been meaningful, but there has been no significant effect on social dysfunction and depression.
4. The effect of life skills training on general self-esteem, social self-esteem, and academic self-esteem was meaningful. But it was not significant on family self-esteem.

Keywords: life skills training, mental health, self-esteem.

I. INTRODUCTION

In recent decades, psychologists have come to the conclusion in their study of behavioral disorders and social deviations that many of the disorders and injuries are related to the inability of individuals to properly and properly analyze their own situations and their situations, lack of control and personal adequacy to confront the situation Difficult and unprepared to solve problems and problems in the right way. So, given the ever-increasing complexity of society and the expansion of social relationships, preparing people, especially children, to deal with difficult situations is essential. In this regard, psychologists, with the support of national and international organizations, have started teaching life skills around the world and at school level to prevent mental illness and social abnormalities. Given the expansion of school-based mental health services in different countries, the World Health Organization has developed a life skills research initiative as part of the organization's mental health program. The primary goal of the World Health Organization is to develop a mental

health skills plan for life in different societies around the world to address the development, application, and evaluation of a life skills training program that focuses on the development of basic psychological capabilities, such as problem solving, coping with Emotions, self awareness, social adjustment, and stress control among children and adolescents. Thus, schools should emphasize the maintenance and maintenance of their mental health, rather than focusing only on increasing the academic performance of students. Take the necessary steps to achieve the goal, because if the goal is achieved, many of the educational and educational problems will be reduced. One of the world-class preventive programs is the teaching of children's life skills. The World Health Organization (WHO) has developed a program called "Life Skills Training" to raise the level of mental health and prevention of psychosocial harm and in UNICEF (the United Nations Charter) in 1993. Year after year, this program has been studied in many countries (WHO, Nouri Qasem Abadi and Mohammad Khani translation, 1998).

Various researches that have been carried out following the implementation of the life skills training program in schools have shown that the impact of this training on different dimensions of mental health and compatibility shows that overall, life skills and social skills education has a positive impact on the following items:

1. Positive social behaviors in schools (positive social interaction between colleagues)
2. Increased problem solving ability - Self-awareness
3. Reduced anger, anxiety, depression, shyness in delinquent behaviors
4. Establish an internal containment position
5. Social acceptability
6. Confronting the crisis
7. Social confrontation
8. Increased daring
9. Positive self-concept
10. Suitable verbal and non-verbal skills (Death, Smith, and Worcesky, quoted by Naseri, 2005).

Research shows that people with high self-esteem and low self-esteem have higher problem-solving skills, so that they can identify effective solutions better than low-endavors, and expect more effective responses to effective responses and solutions. They also have the ability to criticize and more likely to be

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criticized. Therefore, they use good criticism, which is a complex interpersonal skill (Pessini and McCraighie, 1998; quoted by Sarkhosh, 2005).

One of the characteristics of a normal personality is self-esteem, self-esteem is the degree of approval, and the value that a person feels towards himself or the judgment that a person has for his value. Self-esteem is one of the concepts that has been studied by many psychologists. Self-esteem is associated with some psychological phenomena, high self-esteem is associated with positive and constructive coping strategies, high motivation and positive emotional state (Baybandeng, 1993).

Research has shown that spell-suppression skills training and peer pressure reduces vulnerability to peer pressure, increases and maintains the status of internal control and self-esteem (Shops and Cogs, 1993). Some assessments have proven that engaging in life skills training classes can create self-esteem. Self-esteem also enhances flexibility versus changes, and strengthens positive attitudes toward self-esteem (Vickersky, Sarkhosh, 2005). Everybody has different skills throughout his/her lives. From the early years of life everybody learns to walk and talk. Learning these skills will help us to live better and make more use of our facilities. Life skills make us personally better adapted to the environment. According to the UNESCO World Education Organization, life skills are classified into ten categories:

1. Self-awareness skills
2. Empathy skills
3. Skills of relationships between individuals
4. Effective communication skills
5. Stress coping skills
6. Managing Excitement Skills
7. Problem solving skills
8. Decision-making skills
9. Creative thinking skills
10. Critical Thinking Skills

Life skills for a better life help us deal with life's problems in a positive way, in order to achieve more success, because, according to Nietzsche, man is what he can do with whatever he does, but if he wants to (Jennifer and Pour Hosseini, 2009).

Learning life skills to understand people's adequacy, self-esteem and self-esteem affects them and plays an important role in mental health.

On the one hand, the country's political transformation more and more reveals the need for attention to the law and civil rights. The realization of national and international concepts and destabilization requires educating educated citizens who have the knowledge and ability and attitude necessary for peaceful living in society. On the other hand, the rapid expansion of communication and rapid access of individuals to various communication means, such as

telephone, Internet, etc., necessitates the development of citizenship. Citizens who are aware of individual and international rights recognize their cultural heritage and other nations. In contrast, negative aspects such as the impact of other cultures that conflict with religious and national contexts are sufficiently knowledgeable (Fathi and Ajargah, 2002).

Therefore, considering the relationship between the teaching of life skills and mental health and self-esteem and the relationship between these variables and the prevalence of psychosocial disorders, and the necessity of examining this issue, this research seeks to answer the question of whether life skills training on mental health and Students' self-esteem affects?

II. METHODOLOGY

The present study is a semi-experimental research. The widespread use of the word "experiment" has a broad concept and that something is being tested. The pilot project in the broad sense is the implementation of a pre-fabricated design to experience it. More specifically, it can be said that the experimental design is a structure by which the variables are acquired, organized, or created within the situational test. The present study is a semi-experimental and pre-test-post-test with control group and control group. The plot is in Table 1-3 (Delavar, 1996).

Table 3.1: Pilot research project

| Groups | Random Selection | Pretest | Intervention | Post-test |
|------------|------------------|---------|--------------|-----------|
| Experiment | R | O1 | x | O2 |
| Testifier | R | O3 | | O4 |

As shown in Table 1-3, R is the random selection of students and their placement in the test group. The purpose of O1 and O3 is to conduct Goldberg general health tests and Coopersmith's self-esteem on test group students and control group before teaching life skills to students in the experimental group. X is the teaching of life skills to students in the experimental group. O2 and O4 are doing general health and self-esteem tests on the students of the test group and the control group after teaching the skills of life to the students of the experimental group.

a) Statistical community

The statistical population of this study includes all 5th grade female students of public schools in the city of Rashtkhar (180 students) who studied in the academic year of 2009-10.

b) Sampling and volume of community and sample

The statistical sample in this study is 60 students of fifth grade elementary state-run public school in the city of Roushtkhar. A simple random sampling method was used to select the sample. In this

regard, firstly, for controlling the intelligence of students, all of the students of Wechsler's IQ test were selected and 100 subjects were randomly selected from the 100-100 test. Two patients were randomly assigned to 60 of these 100 individuals randomly.

c) *Measurement Tool*

In this research, the Goldberg General Health Questionnaire (GHQ), which has been used by scholars according to the age of modified students and Cooper Smith's Self-Esteem Test (GSSE) and a practical guide to life skills training, is described in detail.

i. *Introduction to Goldberg General Health Test (GHQ)*

Goldberg (1972) designed and developed a general health questionnaire for the treatment of non-psychotic disorders in a community health center. The main form of the questionnaire is 60 questions. The shorter form of the 12th, 20th, 28th, 30th, and 44th articles of this scale is also provided. In this study, the 28 questions of the General Health Questionnaire, introduced by Goldberg & Huller (1979), have been used. The questionnaire has four sub-scales, each scale has 7 questions. The main objective of this questionnaire is not to achieve a specific diagnosis in the hierarchy of mental illness, but its main principle is to distinguish between mental illness and health. In fact, the 28-item form of the questionnaire has the benefit of being designed for everyone in the community. This questionnaire as a surrogate tool can determine the likelihood of a mental disorder in a person. The following four measures are: general health, chronic symptoms, anxiety and insomnia symptoms, signs of social dysfunction and symptoms of depression, there are four sub-scales based on statistical analysis of responses:

The sub-scale (A) includes things about how people feel about their health and their tiredness and physical signs. This sub-scale assesses the sensory intakes often associated with emotional arousal. Articles 1 to 7 relate to this sub-scale.

Sub-scale questions (B) include those that are associated with anxiety and insomnia. Articles 8 to 14 relate to this sub-scale:

Sub-scale (C) measures the ability of individuals to meet the demands of the job and the daily life and reveals their feelings about how to deal with the commonplace of life. Articles 15 to 21 relate to this sub-scale, and finally the fourth.

Sub-scale (D) includes materials that are associated with severe depression and suicidal tendencies, and Articles 22-28 are related to this sub-scale.

The overall score of each person is derived from the sum of the grades of the four sub-scales (Sturra, 1991 Translation of the Prosecutor, 1998). The questionnaire is scored based on Likert scale (0-1.2 -3) and the total score of each person will vary from zero to 84. It is also necessary to explain that the low score in

this questionnaire is a sign of high mental health and a high score of mental health symptoms (a copy of this questionnaire is given in Appendix 1).

ii. *Reliability of the Goldberg General Health Exam*

Goldberg and Williams (1998) predicted a 95 percent waist (1985) report the internal consistency of the general health questionnaire using Cronbach's alpha of 90 percent.

Kaiss (1984) obtained Cronbach's Alpha 93% of the General Health Questionnaire, and Shak (1984) reported Cronbach's alpha of 88% on 2150 students (quoted from Taghavi, 2001).

The reliability of the 28 questions of the Goldberg General Health Questionnaire was calculated 91% by Palahang, Nasr, Barahani and Shah Mohammadi (1996) (Cloughi, Astura and Haghshenas, 1999). Taghavi (2001) achieved the GHQ rehabilitation reliability coefficient of 3 to 4 weeks for the entire questionnaire of 72% and for the 60% physical syndrome, 68% anxiety syndrome, 57% social disorder syndrome and 58% for depression syndrome (Rajabi, 2004). In one study, the Cronbach's alpha coefficients and the general health questionnaire for general students were 0.85 and 0.86 for female students, respectively, 0.87 and 0.84 respectively, and for male students 8.8 and 0.90 respectively achieved. Amanollahi (2004) in the research, the Cronbach's Alpha coefficients and the general health questionnaire for general students were 0.84 and 0.85 for female students 0.83 and 0.84 respectively and for male students 0.85 and 0.86 respectively. Verdi (2004) calculated the coefficients of Cronbach's alpha and the general health questionnaire of 0.94 and 0.89, which is optimal.

iii. *Introducing the test for Cooper-Smith self-esteem*

Cooper-smith's self-esteem scale (1967) is a self-report scale of 58 articles, pencil-paper test, 8 of which are polygraphs, and 50 other articles to 4 subscales of general self-esteem, social self-esteem, family self-esteem, and Educational self-esteem is divided. The method of grading this test is zero and one in the sense that Articles 14,18,19,21,23,24,28,29,30, 32,36,45,47,57,2,4,5,10 response Yes, a score and no answer are zeroed. The rest of the questions are reversed, that is, the answer is good. A score and the answer will be zero. Obviously, the minimum score that a person might take is zero and a maximum of 50. If the respondent has more than 4 grades from the 8th article of the lie detector, which includes articles 6, 13, 20, 27, 34, 41, 48, 55, it means that the validity of the test is low and the subject tried to improve himself.

iv. *Confidence test for Cooper Smith's self-esteem*

Cooper Smith et al, (1967) obtained a 88% refractive index after 5 weeks and a 70% test coefficient after three years for this scale. Factor analysis has shown that the individual scales are different factors of

self-esteem (Quoted by Nisea and ShannyYaylaq, 2002). Shokrkon and Nissi (1994), in their research on the first to third year high school students in Najaf Abad, reported a 90% and 92% re-test reliability coefficient for male and female students, respectively. Allameh (2005) also performed this scale on a student's sample of reliability, using a spin-off method of 83% and a Cronbach alpha of 84%. Several studies have confirmed the coefficient of validity of Cooperismit's self-esteem scale. In the study of Shokrkon and Nissi (1994), the coefficient of validity of this scale was calculated by correlating the test scores with the final grade of the students, and the coefficients obtained for boys are 69% and For girls, 71% ($p = 0.001$) have been reported. Allameh (2005) has used the correlation method with social anxiety scale scores to calculate the validity of this questionnaire and has obtained a coefficient of validity of -0.53 with ($p < 0.001$).

v. Life skills training tools

The content of life skills training in this study is based on the "Practical Guide to Primary Life Skills Training". This training program consists of ten chapters, each chapter covering one of life skills and practical exercises related to it. Topics provided include:

1. Group familiarity
2. Knowledge of yourself and your ability
3. Familiarity with personal, family and social values
4. Familiarity with how to communicate with others
5. Introduction to goal setting
6. Familiarity with decision making
7. Familiarity with the concept of violence and its containment methods
8. Familiarity with Physical Health

vi. Implementation of life skills training

The subject of the training sessions and practical exercises was set up in eight 90-minute sessions, so that half the time of each session was given practical content on the topic of the meeting and after some time, the second half of the session was grouped around Training sessions were held on the topic of training. Each session first discussed issues surrounding each educational subject, and then the subject was discussed in a group, and at the end of each training session they were presented, so that all subjects excluded the training topics from the training position Experimentally, practice. (Examples of practical exercises are given in Appendix 2).

d) Method of Execution

In order to remove the control variables, such as age, gender, educational level, educational level and intelligence, they were firstly determined and their intelligence was measured by Wechsler's intelligence test. Among the community, 100 students were selected, and 60 of them were randomly selected from

the range their intelligence was chosen between 100-100.

Data were collected by Goldberg General Health Questionnaire and Cooper Smith's Self-Esteem Questionnaire. After the students were randomly divided into two experimental and control groups, they were subjected to Goldberg general health and Cooper Smith's self-esteem. Then, experimental intervention (life skills training) was conducted on the students of the experimental group. At the end of the intervention, students in both experimental and control groups were subjected to the Goldberg General Health Questionnaire and Cooper Smith's self-esteem.

e) Outside Life Skills Training Sessions

Session 1: Meet the members of the group and the topics of the course

Provided educational materials:

1. Preliminary explanation about the course and the importance and necessity of group activities in this course
2. Importance and necessity of life skills for entering peers life and its role in important life choices such as choice of field, job selection, spouse selection

Practice topic:

1. Understanding the members of the group (Understanding the characteristics and characteristics of individuals)
2. Identify groups (recruiting, determining the role of each member of the group and naming the groups)

Session 2: Self-knowledge and self-awareness (self-awareness)

Provided educational materials:

1. Explained about the importance of recognizing one's abilities, talents and interests
2. The role of self-awareness and self-knowledge as a living skill in determining future goals.

Practice topic:

1. Understand personal strengths and individual skills
2. Awareness of future goals
3. Awareness of your physical condition
4. Understand your job skills
5. Ask questions about each group's exercises and discussions

Session 3: Understanding Personal, Family, and Social Values

Provided educational materials:

1. Definition of the concept of value
2. Introduction of various types of individual, family and social values

Practice topic:

1. Understand the values
2. Prioritizing individual, family and social values
3. Ask questions about each of the exercises and group discussions

Session 4: Understanding the phenomenon of communication and how to communicate with others

Provided educational materials:

1. Definition of the concept of communication
2. Communication barriers
3. Bridges of communication
4. Types of communication (positive and negative, verbal and non-verbal)
5. Active listening
6. Decisiveness in the behavior and difference of decisive behavior with passive and aggressive behaviors
7. The factors causing communication (such as respect, responsibility, understanding, effort and importance)
8. Dating

Practice topic:

1. Understanding the types of communication
2. Playing the role of non-verbal communication (body language)
3. Estimation of the degree of decisiveness
4. Playing a role in decisive behavior from a hypothetical or real position
5. Identify communication factors in relationships with friends and family members
6. Draw family members relationships using shapes
7. Ask questions about each exercise
8. Determine the characteristics that people consider in dating.

Session 5: Understanding the importance and how to set goals

Provided educational materials:

1. Define the goal
2. Target types
3. The importance of determining the goal in life as a life skill
4. Provide examples and examples
5. Steps to determine the purpose

Practice topic:

1. Understand the goals achieved in determining short-term and long-term goals throughout life
2. Apply the pattern of targeting for a personal goal

Session 6: Awareness of the decision and its stages

Provided educational materials:

1. The importance of decision-making skills in various aspects of life

2. A variety of simple and complex decisions and provide examples of them
3. Appropriate decision process

Practice topic:

1. Determine important life decisions
2. Using the appropriate decision model for a personal decision

Session 7: How to Avoid Anger and Violence

Provided educational materials:

1. Definition of the concept of anger and violence and the relationship between them
2. Violent factors
3. Physical, psychological and emotional states of anger and violence
4. Anger control method
5. The method of negotiating (solving the problem) in reducing anger

Practice topic:

1. Playing a role in a hypothetical or realistic situation
2. A question about the subject and group discussion
3. Application of problem solving method in anger control

Session 8: Awareness of the importance of physical and mental health and methods of maintaining health

Provided educational materials:

1. The relationship between mental and physical health
2. Features of healthy people
3. Effect of stress (stress) on physical and mental health
4. Depression and anxiety
5. Emotion-oriented and problem-oriented coping strategies
6. Anxiety and Stress Reduction Methods, Muscle Relaxation, Stage-by-step Relaxation, Relaxation by the guided imagination and focusing on breathing.

Practice topic:

1. Determine the amount of physical health
2. Application of reducing stress and anxiety
3. Relaxation exercises muscle

f) Analysis of data

In order to analyze the data in this study, using the "pre-test-post-test design with control group", the following statistical methods have been used:

1. Descriptive statistics methods such as: average, standard deviation, maximum and minimum calculation
2. Inferential statistics method:
3. Independent groups

For statistical analysis of the research data, the fifteenth version of the software "spss" was used.

III. DISCUSSION AND CONCLUSION

The research proposals included:

a) *Teaching life skills will increase the mental health of students.*

Various researches that conducted after implementing a life skills training program in schools show the effect of these training on different aspects of mental health. The results of this hypothesis test are based on the results of research conducted by Lazarus (1971), Bellechman (1985), Hamburg (1990), Anickswich and Weingung (1990), Ricksch (1996), Boutvin (1997), Shiyer and Boutvin (1998), Klingman (1998), Boutvin et al. (1984), Albertin et al. (2001), Mashara (2009), Turner (2008), Martin Jones (2009), Venezuela Victoria (2009), Ahmadian (2009) Matthew (2009), Jefferson (2010), Wang Bo (2010), Sharifi (1993), Ahmadi Zadeh (1994), Bapiry (1997), Farzam Nia (2002), Aqajani (2002), Biglu (1995), Yadavari (2004), SamariVallafi Phase (2005), Haghghi et al. (2006). So, as can be seen, the results of this research on the effect of life skills training on mental health are closely matched by other studies in this or similar field. This indicates the confirmation and consistency of the results of the first hypothesis with other research results.

i. *Teaching life skills is effective in reducing the physical symptoms of students.*

Various researches that conducted after implementing a life skills training program in schools show the effect of these training on reducing physical symptoms. The results of this hypothesis test are consistent with the results of research conducted by Rickschack (1996), Venzel Victoria and colleagues (2009), Haghghi and colleagues (2006), Sammy Wales Phase (2005), Agha Jani (2002). This indicates the confirmation and consistency of the results of this hypothesis with other research results.

ii. *Teaching life skills affects students' anxiety and insomnia.*

Various studies that have been done after implementing a life skills training program in schools show the effect of these training on reducing anxiety and insomnia. The results of this hypothesis test are consistent with the results of research conducted by Ricksch (1996), Sharifi (2003), Beyglo (1995). This indicates the confirmation and consistency of the results of this hypothesis with other research results.

iii. *Teaching Life Skills Affects the Social Impact of Students.*

Various studies that have been carried out after implementing a life skills training program in schools show the effect of these training on reducing social dysfunction. The results of this hypothesis test are not consistent with the results of research conducted by Mott et al. (1995), Ricksch (1996), Sharifi (2003), Biglow

(1995). This indicates the lack of confirmation and the consistency of the results of this hypothesis with other research results.

iv. *Life skills training affects students' depression.*

Various researches that conducted after implementing a life skills training program in schools show the effect of these training on decreasing depression. But the results of this hypothesis test are not consistent with the results of research conducted by Rickschach (1996), Sharifi (2003), Beyglo (1995), Bapirie (1997). This indicates the lack of confirmation and the consistency of the results of this hypothesis with other research results.

b) *Teaching life skills affects students' self-esteem.*

Various researches that have been done after implementing a life skills training program in schools show the effect of these trainings on different aspects of self-esteem. The results of this hypothesis test are based on the results of research conducted by Hamburg (1990), Vichrosky(2000), Mott et al. (1995), ShapVakopland (1993), Albertin et al. (2001), Guttman and Watson (2001) Alan Gurry (1999), Davis and Catamen (1997), Baiba (1998) and Takad (1990), Conrad (2009), Bubo Lovelier (2010), Beyglo (1994), Vardi (2004), Haghghi and colleagues (2006) Agha Jani (2002), Ismaili (1380), Yadavari (2004). So, as can be seen, the results of this research on the effect of teaching life skills on self-esteem are quite consistent with other research in this or similar field. This indicates the confirmation and consistency of the results of the second hypothesis with other research results

i. *Life skills training increases the overall self-esteem of students.*

Various researches that have been done after implementing a life skills training program in schools show the effect of these training on different aspects of self-esteem. The results of this hypothesis test are based on the results of research conducted by Hamburg (1990), Vichrosky (2000), Mott et al. (1995), Shap and kopland (1993), Albertin et al. (2001), Guttman and Watson (2001) Alan Gurry (1999), Davis and Catamen (1997), Baiba (1998) and Takad (1990), Conrad (2009), Bob Lewler (2010), Beyglo (1995), Verdi (2004), True and colleagues (2006), Agha Jani (2002). So, as can be seen, the results of this research on the effect of teaching life skills on self-esteem are quite consistent with other research in this or similar field. This indicates the confirmation and consistency of the results of this hypothesis with other research results.

ii. *Teaching Life Skills Affects Students' Social Self-Esteem (Peers).*

Various researches that have been done after implementing a life skills training program in schools show the effect of these training on different aspects of self-esteem. The results of this hypothesis test are

consistent with the results of research conducted by Verdi (2004), Sameri and Lali Phase (2005), Vichroski (2000), Mot et al. (1995), Hamburg (1990). This indicates the confirmation and consistency of the results of this hypothesis with other research results.

iii. *Teaching life skills increases the self-esteem of the family (parents) of students.*

Various researches that have been done after implementing a life skills training program in schools show the effect of these training on different aspects of self-esteem. The results of this hypothesis test are not consistent with the results of studies conducted by Verdi (2004), Samari and L'alifaz (2005), Vichroski (2000), Mot et al. (1995), Hamburg (1990). This shows that the results of this hypothesis are not consistent with other research results.

iv. *Teaching life skills contributes to increasing students' academic self-esteem (school).*

Various researches that have been done after implementing a life skills training program in schools show the effect of these training on different aspects of self-esteem. The results of this hypothesis test were compared with the results of researches carried out by Remedy (2004), Esmaeili (2001), Verdi (2004), Samari and Lali Phase (2005), Vichroski (2000), Mott et al. (1995) Hamburg (1990), Allen Gray (1999). This indicates the confirmation and consistency of the results of this hypothesis with other research results.

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