

## LIFE SKILLS INTERVENTION FOR URBAN AND RURAL ADOLESCENT GIRLS STAYING WITH ALCOHOLIC PARENTS IN SHILLONG



Lindsay Murray MSangma

(1<sup>st</sup> Author) Phd Scholar, Amity Institute of Social Sciences

Prof. Dr. Nirupama Prakash (2<sup>nd</sup> Author)

Director & Head of Amity Institute of Social Sciences,  
Amity University, Noida, UP, India

Delegation to the 2<sup>nd</sup> International Women's Rights Assembly  
(Regd: 09IWRA2)

### Abstract:

The present Study focuses on Life Skills Intervention for Urban and Rural Adolescent Girls staying with Alcoholic Parents. The sample of the study consisted of 194 female adolescent's participants between the age group of 10-19 years from Shillong, Meghalaya, India. The Objective of the study were, to study the demographic profile of the adolescent girls, to provide life skills programme for the female adolescents, to compare the differences between urban and rural female adolescents by assessing life skills before and after intervention. The tools used were demographic profile, Children of Alcoholics Screening Test (CAST), (Pilat & Jones, 1985), Life Skills Assessment Scale (LSAS), (Nair, Subasree & Ranjan, 2010). The hypothesis was **H<sub>0</sub>**: There will be significant differences between urban and rural female adolescents on the basis of life skill intervention **H<sub>1</sub>**: There will be no significant differences between urban and rural female adolescents on the basis of life skill intervention. Purposive sampling was applied using structured and standardized questionnaire. The researcher has selected a descriptive research design in phase 1 and in phase 11 pre experimental research design was used. Only single group was included that is experimental group and control group was not included, single group was pretested and then exposed to the intervention programme and later again the experimental group was post tested. The collected data were computed and analysed using SPSS. The present study focuses on providing Life skills programme in the form of intervention to adolescents living with alcoholic parents

**Keywords:** *Life Skills Intervention, Urban, Rural, Adolescent Girls, Alcoholic Parents*

**A**dolescence as given by World Health Organisation the age group of 10-19 years, this age group requires special attention and proper guidance as the process of growing up is a critical stage for adolescents. Adolescence period can be viewed as stressful with growth and changing environment, some of the major stress factors often comes from school, family, peer pressure and their personal lives. Alcohol affects each member of the family

from the unborn child to alcoholic's spouse, which results not only physical problems for the alcoholics, but also may result in physical and psychological problems for other members of the family. Alcoholism is not simply an individual problem. Families often play a significant role in the cause and cure of alcohol problems. There are many highs and lows problems that go with it when someone is living with an alcoholic. Spouses and children are affected indirectly; the



effects can vary from being withdrawn to being enablers. (The American Academy of Child and Adolescent Psychiatry (AACAP), 2011) stated that children of alcoholics are four more times more likely than other children to become alcoholics themselves. Children of alcoholics develop poor self-image; have difficulties in school and establishing relationships with friends and teachers. Children are more at risk to child abuse, neglect and behavioural problems. Raj et.al (2012) conducted a comparative study on behavioral problems in children of alcohol dependent parents. Total sample was 60 children age ranged from 4-18 years, experimental and control group was compared. The results showed that high externalizing problems in children of alcohol dependent was found with regards to rule breaking behavior and aggressive behavior. Internalizing behavior was also higher among children of alcohol dependent. Behavioral problems, attention problems, poverty, lack of proper education, social problems, decreased parental monitoring, stress, lack of stimulation in the rearing environment were seen significantly higher in children of alcohol dependent as compared to control group. Stanley & Vanitha (2008) conducted a study on psychosocial correlates in adolescent children of alcoholics to see their adjustment and self-esteem. 50 children of alcoholics were taken and tools used were Self-esteem Index and Adjustment inventory. The result revealed that the majority of children of alcoholic manifest lower self-esteem and their adjustment were poor when compared with children of non-alcoholic. Anda et.al (2002), explored a study on those children's who are living with alcoholic parents, and main intension was to know about their childhood experience and whether living with alcoholic parents can have any adverse effect on the children like depression and alcoholism at later stage. Sample size comprised of 9346 adults where 20% of respondents reported having parental alcohol abuse and higher risk of adverse childhood problems. The result also

confirmed that children living with alcoholic parents experiences more problems like physical abuse, emotional abuse, sexual abuse, parental separation or divorce, adult children reported having higher depression risk and adverse childhood experiences develops low self-esteem, anxiety and difficulties in maintaining relationships.

The Purpose of selecting this topic is to understand the problems experienced by the adolescents staying with alcoholic parents and identify other factors which give birth to major problems and how the problems can affect the adolescents in their day to day life. The problems faced by the children of alcoholics are given less importance especially viewed in Indian Scenario. Children of alcoholic are at risk and deserve more attention in prevention and early intervention of problems. The present study focuses on providing Life skills programme in the form of intervention to adolescents girls living with alcoholic parents.

### **Methods**

#### **Objectives**

To study the demographic profile of the adolescent girls

To provide life skills programme for the female adolescents

To compare urban and rural female adolescents by assessing life skills intervention

#### **Hypothesis**

**Ho:** There will be significant differences between female adolescents on the basis of life skill intervention **H<sub>1</sub>:** There will be no significant differences among female adolescents on the basis of life skill intervention.



### **Sampling Method**

The Universe of this Study includes the Urban and Rural Adolescents from Shillong, who fall under the age group of 10 to 19 years. The sample size for this Study consists of 194 participants who met the inclusion criteria for the study. The sample for the study was collected from adolescents who are studying in classes 6<sup>th</sup>, 7<sup>th</sup>, 8<sup>th</sup>, 9<sup>th</sup> and 10<sup>th</sup>. Purposive sampling design was selected based on the knowledge of a population and for the purpose of the study. The life skills intervention programme was conducted between the months of August to November, 2015, for urban area and for rural area in the months of May to July, 2016 in 15 sessions with 54 activities. Each session was activity based and participatory in nature. The major techniques used to impart information were games, drawing, sharing, brainstorming, group work, group discussion, story analysis, role play, presentation, discussion and lectures. A pre-test and post-test design was used with only experimental group and no control group to assess the life skills intervention programme. The researcher has selected a descriptive research design in phase 1 as the design is helpful to identify the demographic characteristics of the participants and in phase II pre experimental research design was used. Only single group was included that is experimental group and control group was not included, single group was pretested and then exposed to the intervention programme and later again the experimental group was post tested. The collected data were coded, classified and analyzed using statistical package for social sciences (SPSS) 17.0 version. The obtained data were analyzed using descriptive statistics like frequency and percentage, mean and standard deviation, and Parametric test like Paired t-test.

### **Life Skills Intervention Programme**

Programme was developed for the adolescents from August to November, 2015, for urban area and for rural area in the months of May to July, 2016 in 15 sessions with 54 activities, where the adolescents were engaged in active training and learning process through series of activities on the ten core life skills. The purpose of the programme is to make them aware of the ten core life skills, provide knowledge, information which then can help the adolescents develop positive thinking, healthy ways of living, promote their mental well-being and competencies to face the daily situations

### **Procedure**

The data collection began with the researcher obtaining permission from the De-Addiction centers and seven different schools from Shillong, and when the permission was granted the researcher met each participant individually, explained about the research and gave them the copies of questionnaires. Researcher began with a brief introduction about the whole study prior to signing of the informed consent form. Pre- Assessment started after the responses from respondents and their positive feedback which started from last week of August for screening test to screen out children who are either living with or have lived with alcoholic parents along with socio demographic and standardized questionnaires were given. After analysis of the screening data, Phase II-Post –Assessment the participants were taken as experimental group was then exposed to intervention programme which started from first week of September till last week of October. From 1st week of November till last week of November was Phase III-Post Assessment, where the same sets of questionnaires were given to the participants and collected after one month. The Same procedure was also followed for rural area in the months of May to July,



2016. The researcher requested them to answer all the questions and respond spontaneously. The Head of the Department was requested to return the Questionnaire duly filled in within by students.

## DESCRIPTION OF ASSESSMENT TOOLS

### 1. Demographic data sheet

The demographic data sheet consists of name, age, gender, education qualification, family type, parent's occupation, caste, religion and name of the school.

### 2. Children of Alcoholics Screening Test (CAST)

Children of Alcoholics Screening Test (CAST) (Pilat & Jones, 1985) are 30-item screening instrument developed to identify children who are either living with or have lived with alcoholic parents. The questions measure children's feelings, attitudes, perceptions, and experiences related to their

parents' drinking behaviour (Larson & Thayne, 1998; Pilat & Jones, 1985). Answering "yes" to six or more questions is the recommended threshold for identifying people as children of alcoholics (Pilat & Jones, 1985). The CAST has been shown to be both a valid and reliable measure, with a validity coefficient of .78 and a reliability coefficient of .98 (Pilat & Jones, 1985).

### 3. Life Skills Assessment Scale (LSAS)

Life Skills Assessment Scale (LSAS), scale can be administered to a group or to an individual (Nair, Subasree & Ranjan, 2010). LSAS consists of 100 items in the form of statements in-built with a 5-point scale for the respondent to check the appropriate response which is most descriptive of him/her. It has both positive and negative items. LSAS measures ten (10) dimensions of Life Skills. Reliabilities for the 100 indicators of LSAS as a whole were found to be split-half 0.82, test-retest 0.91 and Cronbach's Alpha 0.84 which was highly reliable and 89% concurrence.

## Results and Discussion

**Table: 1.1.1**

**Title: Demographic profile of the participants**

Personal profile	Variable	Frequency	Percentage	Personal profile	Variable	Frequency	Percentage
1.Age	12-13	30	15.4	3.Family Type	Joint Family	53	27.3
	14-15	114	58.8		Nuclear Family	141	72.7
	16-18	50	25.8				
2.Education Qualification	Class 10	34	17.5	5. Caste	Schedule Tribe	112	57.7
	Class 9	85	43.8		General	27	13.9
	Class 8	38	19.6		Other	30	15.5
	Class 7	29	14.9		Backward Classes		
	Class 6	8	4.2		Schedule Caste	25	12.9



**LIFE SKILLS INTERVENTION FOR URBAN AND RURAL ADOLESCENT GIRLS STAYING WITH ALCOHOLIC PARENTS IN SHILLONG**

Lindsay Murray MSangma

The Rights, Vol-III: Issue-I

8<sup>th</sup>, March, 2017

ISSN: 2454-9096 (online)

<b>6. Parent's Occupation</b>	<b>Government</b>	<b>32</b>	<b>16.5</b>	<b>8. Geographical Area</b>	<b>Urban</b>	<b>85</b>	<b>43.8</b>
	<b>Employee</b>	<b>7</b>	<b>3.6</b>				
	<b>Accountant</b>	<b>7</b>	<b>3.6</b>				
	<b>Banker</b>	<b>35</b>	<b>18</b>				
	<b>Business Man</b>	<b>32</b>	<b>16.5</b>				
	<b>Daily Labour</b>	<b>22</b>	<b>11.4</b>				
	<b>Shopkeeper</b>	<b>25</b>	<b>12.9</b>				
	<b>Social Worker</b>	<b>3</b>	<b>1.5</b>				
	<b>Freelancer</b>	<b>21</b>	<b>10.8</b>				
	<b>Farmer</b>	<b>10</b>	<b>5.2</b>				
	<b>Fisherman</b>						
	<b>7. Religion</b>	<b>Christian</b>	<b>113</b>				
<b>Hindu</b>		<b>55</b>	<b>28.4</b>				
<b>Muslim</b>		<b>26</b>	<b>13.4</b>				

The above table 1.1.1 presents the distribution of participants in relation to personal information that is age, Gender, educational qualification, family type, parent's occupation, caste and religion. Based on the above table it is evident that out of 194 participants, 114(58.8%) participants belongs to the age group of 14-15 years, 85(43.8%) participants are studying in class 9, 141(72.7%) participants belongs to nuclear family, 35(18%) participants parents were working as businessmen, 112(57.7%) participants falls in Scheduled tribe, 113(58.2%) participants belongs to Christian and 109(56.2%) participants belongs to rural area..



**Table: 1.1.2**

**Title: To Compare Urban and Rural female Adolescents by assessing Life Skills**

Variables		Gender	N	Mean	Std. Deviation	Std. Error Mean
Pre	Self-Awareness	Female	194	34.9278	5.93880	.42638
	Empathy	Female	194	34.0000	5.33441	.38299
	Effective Communication	Female	194	25.9381	4.19428	.30113
	IPR	Female	194	33.8196	4.96552	.35650
	Creative Thinking	Female	194	25.1546	4.99708	.35877
	Critical Thinking	Female	194	33.3660	5.54913	.39840
	Decision Making	Female	194	31.6907	4.87217	.34980
	Problem Solving	Female	194	30.2320	5.30644	.38098
	Coping With Emotion	Female	194	27.3866	5.58032	.40064
	Coping With Stress	Female	194	17.0825	5.31723	.38176
	Self - Awareness	Female	194	37.3299	6.91356	.49636
	Empathy	Female	194	34.9021	5.24880	.37684
	Effective Communication	Female	194	25.5722	3.80175	.27295
	IPR	Female	194	34.1392	4.99598	.35869
	Creative Thinking	Female	194	26.0155	5.06893	.36393
	Critical Thinking	Female	194	36.1856	5.50521	.39525
	Decision Making	Female	194	33.3711	5.14317	.36926
	Problem Solving	Female	194	31.1031	6.60661	.47433
	Coping With Emotion	Female	194	29.9742	5.52004	.39632
Coping With Stress	Female	194	19.2062	5.20947	.37402	
Post						





*The above table 1.1.2 represents the comparison of urban and rural female adolescents assessing Life Skills. From the above results, it is found that all the factors have undergone a change for most of the participants except for effective communication and critical thinking. This clearly shows the positive impact of the intervention given.*

**Table: 1.1.3**

**Title: Ho: There will be significant differences between female Adolescents on the basis of life skills intervention H<sub>1</sub>: There will be no significant differences among female Adolescents on the basis of life skills intervention**

<b>Variables</b>	<b>Gender</b>	<b>N</b>	<b>Mean</b>	<b>Std. Deviation</b>	<b>Sig</b>
<b>Pre</b>					
<b>Self- Awareness</b>	<b>Female</b>	<b>194</b>	<b>34.9278</b>	<b>5.93880</b>	<b>.125</b>
<b>Empathy</b>	<b>Female</b>	<b>194</b>	<b>34.0000</b>	<b>5.33441</b>	<b>.691</b>
<b>Effective Communication</b>	<b>Female</b>	<b>194</b>	<b>25.9381</b>	<b>4.19428</b>	<b>.022</b>
<b>IPR</b>	<b>Female</b>	<b>194</b>	<b>33.8196</b>	<b>4.96552</b>	<b>.165</b>
<b>Creative Thinking</b>	<b>Female</b>	<b>194</b>	<b>25.1546</b>	<b>4.99708</b>	<b>.742</b>
<b>Critical Thinking</b>	<b>Female</b>	<b>194</b>	<b>33.3660</b>	<b>5.54913</b>	<b>.416</b>
<b>Decision Making</b>	<b>Female</b>	<b>194</b>	<b>31.6907</b>	<b>4.87217</b>	<b>.964</b>
<b>Problem Solving</b>	<b>Female</b>	<b>194</b>	<b>30.2320</b>	<b>5.30644</b>	<b>.856</b>
<b>Coping with Emotion</b>	<b>Female</b>	<b>194</b>	<b>27.3866</b>	<b>5.58032</b>	<b>.230</b>
<b>Coping with Stress</b>	<b>Female</b>	<b>194</b>	<b>17.0825</b>	<b>5.31723</b>	<b>.251</b>
<b>Self -Awareness</b>	<b>Female</b>	<b>194</b>	<b>37.3299</b>	<b>6.91356</b>	<b>.658</b>
<b>Empathy</b>	<b>Female</b>	<b>194</b>	<b>34.9021</b>	<b>5.24880</b>	<b>.552</b>
<b>Effective Communication</b>	<b>Female</b>	<b>194</b>	<b>25.5722</b>	<b>3.80175</b>	<b>.493</b>
<b>IPR</b>	<b>Female</b>	<b>194</b>	<b>34.1392</b>	<b>4.99598</b>	<b>.227</b>
<b>Creative Thinking</b>	<b>Female</b>	<b>194</b>	<b>26.0155</b>	<b>5.06893</b>	<b>.235</b>
<b>Critical Thinking</b>	<b>Female</b>	<b>194</b>	<b>36.1856</b>	<b>5.50521</b>	<b>.946</b>
<b>Decision Making</b>	<b>Female</b>	<b>194</b>	<b>33.3711</b>	<b>5.14317</b>	<b>.248</b>
<b>Problem Solving</b>	<b>Female</b>	<b>194</b>	<b>31.1031</b>	<b>6.60661</b>	<b>.609</b>
<b>Coping with Emotion</b>	<b>Female</b>	<b>194</b>	<b>29.9742</b>	<b>5.52004</b>	<b>.634</b>
<b>Coping with Stress</b>	<b>Female</b>	<b>194</b>	<b>19.2062</b>	<b>5.20947</b>	<b>.837</b>



The above table 1.1.3 shows Comparison of female adolescents in terms of life skills intervention. The table shows significant difference in communication skills in pre-condition where the urban females were scoring better than rural female adolescents but after receiving the intervention rural female adolescents improved their communication and scored similar to urban female adolescents. This shows that the intervention has a considerable impact.

### Discussion

The findings shows that out of 194 participants, 114(58.8%) participants belongs to the age group of 14-15 years, 85(43.8%) participants are studying in class 9, 141(72.7%) participants belongs to nuclear family, 35(18%) participants parents were working as businessmen, 112(57.7%) participants falls in Scheduled tribe, 113(58.2%) participants belongs to Christian and 109(56.2%) participants belongs to rural area. In the comparison of urban and rural female adolescents assessing Life Skills it is found that all the factors have undergone a change for most of the participants except for effective communication and critical thinking. This clearly shows the positive impact of the intervention given. The present finding are in support with Gopalakrishna (2014) and Khera & Khosla, (2012), studies where the findings shows that those adolescents undergone training possess positive co-relation between core affective life skill and self-concept and are better in all aspects. Therefore the intervention program was effective in enhancing the self-concept. The results of hypothesis shows that significant differences is found in communication skills in pre-condition where the urban females were scoring better than rural female adolescents but after receiving the intervention rural female adolescents improved their communication and scored similar to urban female adolescents. This shows that the intervention has a considerable impact on all scales of life skills

assessment. A sharp increase in scores is noticed in the scales of Self-Awareness, Empathy, Interpersonal Relationship, Creative Thinking, Decision Making, Problem Solving, Coping with Emotions, Coping with Stress, which means intervention has most effect in these areas. The present finding is in support with Anuradha (2014), study where the findings shows that adolescents scored reasonably a good score on life skills which showed that adolescents are well equipped with life skills.

### Conclusion

The problems faced by the children of alcoholics are given less importance especially viewed in Indian Scenario. Parental alcoholism has severe effects on children of alcoholics; children develop low self-esteem and chronic depression. Even if the alcoholic gets treated and reformed himself but the family members who are greatly affected may not themselves ever recover from the problems inflicted upon them. Children of alcoholic are at risk and deserve more attention in prevention and early intervention of problems. The present study will bring forward awareness programmes for adolescents take necessary steps, actions and interventions which will enhance the quality of adolescents life, highlighting the need to support adolescents through professional development in engaging with the complexities involved, improved better home environment, building and strengthening good parent-child relationships and provide good support system from professionals and peer groups. Similarly several awareness programmes like distributing pamphlets, posters have been launched to awaken people and to keep them away from alcohol. The overall impact of de-addiction programme is positive, efforts should be made to make this programme continuous and the drive against alcoholism should be carried out on a war footing manner. Other professionals like mental health professionals or through teachers and parents should be involved in skill building exercises and promoting competence among adolescents.





## References

- Anda, D. d., Baroni, S., Boskin, L., Buchwald, L., Morgan, J., Ow, J., et al. (2000). Stress, Stressors and Coping among High School Students. *Children and Youth Services Review*, 22(6), 441-463.
- Anuradha, K. (2014, February). Assessment of Life Skills Among Adolescents. *International Journal of Scientific Research*, 111(11).
- Gopalakrishna, R. (2014, April). Enhancement of Self Concept Using Life Skills Approach. *Research Direction Journal*, 1(10).
- Khera, S., & Khosla, S. (2012). A Study of Core Life Skills of Adolescents in Relation To Their Self Concept Developed Through YUVA School Life Skill Programme. *International Journal of Social Science & Interdisciplinary Research*, 1(11), 115-125.
- Nair, A. R., Subasree, R., & Ranjan, S. (2010). *Manual for Life Skills Assessment Scale*. Chennai: Schools of Life Skills Education and Social Harmony Rajiv Gandhi National Institute of Youth Development.
- Pilat, J. M., & Jones, J. W. (1985). Identification of Children of Alcoholics: Two Empirical Studies. *Alcohol Health & Research World*, 9(2), 27-33.
- Raj, H., Kumar, K., Sinha, V. K., & Dogra, R. (2012). A Comparative Study on Behavioural Problems in Children of Alcohol Dependent Parents. *Dysphrenia*, 3, 137-143.
- Stanley, S., & Vanitha, C. (2008). Psychosocial Correlates in Adolescents Children of Alcoholics- Implications for Intervention. *International Journal of Psychosocial Rehabilitation*, 12(2), 67-80.