

MODULE

2

LIFE SKILLS

Defining “life skills”

Life skills and alcohol

Impact of life skills education

Implications for policy and prevention

References

Summary:

- “Life skills” is an approach to alcohol education that encourages the development of skills needed to make responsible and informed choices.
- The main objective of life skills education is to promote healthy lifestyles through health education.
- The approach has been integrated into curriculum development for schools and has also been implemented through other channels.
- Life skills approach includes elements that make it easy to adapt to different cultures and appropriate for implementation in both developing and developed countries.
- Due to the broad nature of the skills it develops, the effectiveness of this approach may not be easy to quantify.

Over the past twenty years, “life skills” have become part of the vocabulary in alcohol education and the prevention of alcohol misuse. The term refers to programs targeted primarily at

young people and based on the need to promote healthy lifestyles through health education. Life skills education emerged from a growing concern about certain health problems with particular impact on young people, including HIV/AIDS, sexual behavior, drugs, peer influence, and youth suicide. The emphasis of this approach is on basic personal and social skills, attitudes, and knowledge helpful in making positive decisions and lifestyle choices.

Through the involvement of the World Health Organization (WHO), life skills programs have come to play an important role with regard to health—particularly mental health—in both the developing and developed countries. With regard to alcohol, the life skills approach relies on encouraging responsible alcohol consumption and preventing misuse. However, opinions are divided on the interpretation of the term life skills, the concepts underlying it, and the content and effectiveness of individual initiatives developed within this framework.

Defining “life skills”

According to WHO, life skills may be defined as “abilities for adaptive and positive behaviour, that enable individuals to deal effectively with the demands and challenges of everyday life” (World Health Organization, 1997a, p. 1). “Every school should enable children and adolescents at all levels to learn critical health and life skills.... Such education includes....comprehensive, integrated life skills education that can enable young people to make healthy choices and adopt healthy behaviour throughout their lives” (World Health Organization, 1997b, p. 80).

The life skills approach lends itself well to implementation across cultures and has been integrated into curriculum in various countries (Bils, 1999; Godfrey, Toumbourou, Rowland, Hemphill, & Munro, 2002; International Center for Alcohol Policies, 2000; Lloyd, Joyce, Hurry, & Ashton, 2000). For example, South Africa’s Curriculum 2005 includes “life orientation” and skills for decision-making, critical and creative thinking, and effective communication. Also included are skills for developing healthy relationships and a positive self-concept (Department of Education, Republic of South Africa, 1997).

The themes addressed by this approach cover a broad range. They include core skills and additional areas that can be addressed in a culturally sensitive manner.

Core skills that are developed include (World Health Organization, Regional Office for the Western Pacific, 2003, p. 11):

- decision-making — ability to evaluate information and advice to make informed decisions, assess advantages and disadvantages of different options, change decisions to adapt to new situations, and plan for the future;
- problem solving;
- creative thinking;

- critical thinking – ability to analyze social and cultural influences on attitudes, values and behavior, question inequality, injustice, prejudice and stigma, explore and evaluate social roles, rights and responsibilities, and evaluate risks;
- effective communication;
- interpersonal relationship skills;
- self-awareness — ability to identify personal strengths, weaknesses and vulnerabilities, clarify personal values and beliefs, and recognize personal worth and personal happiness;
- empathy;
- coping with emotions;
- coping with stress.

The additional areas in which a culturally sensitive approach is needed include:

- goal setting;
- assertiveness;
- negotiation skills.

Life skills and alcohol

In relation to alcohol, life skills programs attempt to teach individuals (young people, in particular) to make healthy, responsible, and appropriate choices about drinking in an effort to reduce alcohol misuse and problems related to excessive and abusive drinking patterns. This approach has been implemented in education and prevention through school-based programs and is also part of some initiatives that are not curriculum-based (Godfrey et al., 2002; International Center for Alcohol Policies, 2000; Marlatt et al., 2003; Spoth, Guyll, & Day, 2002). The life skills education has been used to help parents support their children and also to help them assess their own drinking (Ashery, Robertson, & Kumpfer, 1998; Foxcroft, Ireland, Lister-Sharp, Lowe, & Breen, 2003; Kumpfer, Alvarado, Tait, & Turner, 2002; Kumpfer, Alvarado, & Whiteside, 2003; Spoth, Redmond, & Lepper, 1999). It has also been applied within settings where a need for reducing or preventing harm had been identified, for example among prison inmates (Wald, Flaherty, & Pringle, 1999).

The life skills approach is a useful component of alcohol education but its successful implementation requires additional supporting elements (Perry et al., 1989). These include, for example, the provision of balanced and appropriate information about alcohol consumption, drinking patterns, and outcomes. Given the wide range of cultural views on alcohol, life skills programs need to be implemented in a culturally sensitive way and should address specific cultural issues.

Media and culture awareness have also been suggested as essential adjuncts to the life skills approach, beyond the critical thinking component that is already included. In addition, issues related to social environment, economics, and opportunity also need to be addressed, given their impact on the choices and decisions that people make about drinking and health in general.

Impact of life skills education

The impact of life skills education has been debated (Foxcroft et al., 2003; Gorman, 2002; Palinkas, 1996; Plant & Plant, 1999). The basic questions to be addressed are how the impact of this (or any other) approach should be measured and what are its desired outcomes. For some, the acceptable outcome is measured in preventing people from drinking. For others, it is to enable the target audience to make informed choices and decisions about whether to drink and how to drink responsibly. How to measure an intangible result like this clearly presents a serious problem. It is difficult to quantify the development of skills such as coping with stress or the development of interpersonal skills. A qualitative assessment must often be sufficient.

In particular in developing countries where means and resources are often scarce, evaluation is difficult. For example, following up with a group of children in primary school to assess how they have developed can prove difficult due to high attrition rates. However, there is evidence that life skills education can have an impact (Botvin, Baker, Dusenbury, Botvin, & Diaz, 1995; Botvin, Griffin, Diaz, & Ifill-Williams, 2001; International Center for Alcohol Policies, 2000; Smith et al., 2004; Swisher, Smith, & Vicary, 2004).

Some general patterns, nevertheless, have emerged from the evaluations that have been undertaken in this field. Certain “factors of success” have been identified (World Health Organization, 1999, 2003). These include the need for:

- long-term programs;
- trained educators or providers;
- * a focus on both generic and specific skills;
- developmentally appropriate inputs;
- active student involvement;
- links to other subjects;
- user-friendly materials;
- peer leadership components.

Where these factors have been implemented, life skills programs contributed to a decrease in alcohol misuse, drug abuse, smoking, delinquency, violence, and suicide and to an improvement in pro-social behavior (e.g., Botvin & Kantor, 2001; “LifeSkills Training,” n.d.; Perry, 1987). Other findings suggest a positive impact on mental health in relation to self-image, self-esteem, self-efficacy, and social and emotional adjustment and a decrease in social anxiety. School performance has been shown to improve with regard to behavior, academic achievement, and absenteeism (e.g., International Center for Alcohol Policies, 2000).

In general life skills development, there have been reported signs of improvement in problem solving, communication, and coping skills (Botvin & Kantor, 2001; Perry, 1987). It is these indicators and trends—often qualitative and anecdotal in nature—that indicate the potential of this approach and its particular contribution to the issue of alcohol use.

Implications for policy and prevention

The life skills approach falls into the broader area of alcohol education (MODULE 1: Alcohol Education). It is one of many approaches aimed at reducing the potential for harm related to certain drinking patterns and at promoting responsible alcohol consumption. As with any policy approach, it is important to recognize that—on its own—life skills education cannot be expected to have a significant impact. The implementation of any alcohol education programs must be coupled with other measures and be part of a broader effort to effect change.

To this end, life skills programs also position alcohol consumption within the context of other lifestyle and health behaviors. Drinking, thus, is not viewed in isolation but as part of a range of life choices, all relying on the same decision-making skills. In many communities, especially in the developing countries, life skills education offers support to youths and other population groups that they are unable to receive elsewhere (e.g., International Center for Alcohol Policies, 2000).

The life skills approach has several useful advantages. It can be applied in a range of cultural settings and adapted to diverse views on alcohol consumption (International Center for Alcohol Policies, 2004). It lends itself to implementation in schools

and other “formal” settings, but also to use in informal settings where skill development is the main goal (Botvin & Kantor, 2001; Godfrey et al., 2002; International Center for Alcohol Policies, 2000; Marlatt et al., 2003).

Finally, life skills programs encourage a “bottom-up” approach that enables countries and communities to identify the way forward relevant to their particular needs and resources. This led to the development of materials that are tailored for specific target audiences and to the training of personnel who can apply these materials according to the needs of the community in which they work (e.g., training of pharmacists in Grant & Litvak, 1998, p. 284).

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