



Effectiveness Social Skills Training on Addiction Potential Reduction in Male High School Students

Yosef Dehghani¹ and Mostafa Dehghani^{2*}

1. Department of Psychology, Persian Gulf University, Bushehr, Iran
2. Young Researchers Club, Bushehr Branch, Islamic Azad University, Bushehr, Iran

*Corresponding Author: dehghani001@gmail.com

Abstract: The purpose of this study was Study of effectiveness social skills training on addiction potential reduction in boy's student of Ahvaz high school. The sample consists of All high school boy's students in Ahvaz who had scored one standard deviation above the mean in the zargari addiction potential questionnaire and among them 40 students were selected randomly then assigned to two groups randomly (Experimental group and Control group). 8 sessions therapy were implemented for experimental group. In these sessions, social skills, such as assertiveness skills, anger control, and how to communicate with others in the experimental group were instructed but the control group received no intervention. Evaluation device was zargari addiction potential questionnaire. The outcomes of the independence T-test showed that there were a significant difference between addiction potential reduction scores in control and experimental groups ($p < 0/01$). The results indicated social skills training was effective on addiction potential reduction in boy's student of Ahvaz high school.

Keywords: Social skills, Addiction potential, Narcotic drugs.

INTRODUCTION

Dependence on substance or addiction to drug is common among all of the socio-economic class and is not limited to particular group. With respect to its high prevalence and difficulty of treatment, it is necessary to identify the risk factors contributing to this bad habit in population .

Addiction is one of the problems that have been threatening our society. Overuse of substances is a phenomenon that has spread in recent centuries within different communities. Etiology of this problem requires much research in various fields and is a time- consuming task¹. Addiction to drug is a result of frequent drug use or recreational and psychotropic substance use to the extent that the addicted is involved in it severely and he or she finds himself unable to quit it or keep use of substance increasingly and refuses to decrease the dose of the substance and if he or she determines to give the drug up he or she may be poisoned. In medical

Effectiveness Social Skills Training on Addiction Potential Reduction...

science the term of dependence is used for addiction interchangeably. The addict is one who mentally and physically depends to drug². Substance abuse is one of the today's social pathologies so that not only endangers the health of both individual and community but induces the mental and moral degeneration³.

Today the addiction is one of the main problems of human beings and it takes more and more new dimensions. Now the addiction of adolescences is a wake-up call for the government. The United Nation has designated the day 26 June as Global Fight against Drug. Due to failure to establish emotional relationship with their parents, adolescences opt to fill this gap by substances⁴. The drug use of the poor adolescents compared to rich ones is being gradually increased in the coming years⁵.

According to research conducted by Mohammad Khani⁶ 19% of students attending in both high and guidance schools reported that they have at least experienced smoking, drinking and some other addicting substances one time in their life. In accordance with this research, 14.7%, 9.8 % and 0.05 % of students have experienced smoking, alcohol consumption and drug use respectively. Family conflict, depression, anxiety, positive attitudes and beliefs toward drug, are the most powerful predictors of substance among adolescents⁷. In one study, the relationship between identity status and recreational drug use has been examined among teenagers who are studying in seventh to twelfth grades at Arizona State. The authors found that in contrast to adolescents with the imposed identity, the adolescents with the scattered identity were involved in smoking and alcoholic drink, inhaled substances and cocaine two times, three times and five times than the former respectively. They have also reported the frequency of adolescents 'substance use of successful status and delayed identity within those of both imposed and scattered identity⁸.

Considering these findings, the adolescence can be regarded as one of the most important periods of life and a unique process in individuals. This is a critical point of growth and development which creates physiologically and mentally substantial changes in individual and induces imbalance of body and mind. The adolescent in this period is emotionally immature, having narrow experience and weak body .

A mere emphasis on conventional prevention methods is insufficient to current problems. In United State, the primary prevention measures are associated with an educational approach about the consequences of drug use. However, the empirical findings suggest that use of this approach alone is ineffective and even the adolescents who are curious in this case; it may encourage them to substance abuse. Yet the present research is not pessimistic about this kind of education, rather it suggests that relying solely on one factor without considering the others is a simplistic approach⁹.

However, one of the major problems is that it is very difficult to establish training programs that could remove the bias toward medical relief of the drug and mitigate the strong predisposition to substance in addicts⁹. In spite of these

challenges, it seems that such intervention in order to inhibit the implicit cognitive response of the addicts to stimulus associated to alcohol is very promising^{9, 10, 11}. One way to prevent rising mental and behavioral problems is to promote people's psychological capacity through social skills education. Social skills include a series of the capabilities that facilitate adjustment and positive behavior in the situation which the individual presents in. Social skills education involves many different aspects, they are: 1. Self-consciousness: awareness of strengths and weaknesses, realistic self-image, rights and responsibilities, explanation of the values. 2. Effective communication: effective verbal and nonverbal skills, assertiveness, negotiation, refusal, overcome one's shyness and listening. 3. Anger management: understanding the emotions of self and others, the relationship between emotions, feelings, thought and behavior, coping with frustration, the anger and impatience, fear and anxiety, and coping with intense excitement, and so on. 4. Encountering with stress: coping with situations that are unchangeable, having the strategies for responding to difficult situations (loss, rejection, and criticism), dealing with problems without resorting to substance abuse, keeping cool under pressure and having a schedule. In order to promote social – mental capabilities, the most immediate way of intervention is to boost the coping resource on which the individuals are able to strengthen their personal and social skills. Regarding to children and adolescents such intervention can be offered by introducing the social and life skills in a supportive educational setting, i.e. the school¹².

For life skills, which itself is a part of social skills, many definitions have been offered. For World Health Organization (WHO) the life skill means the ability to adjust and deal with the challenges of life properly. This ability can be physical, cognitive, and behavioral¹³.

The attempt for teaching life skills should be mainly focused on middle schooling during which significant changes occur including puberty, facing with new structures of the education system and increasing the importance of peer groups; this kind of teaching is practiced exclusively to inhibit risky behaviors and the effect on their consequences¹⁴. Adolescents who have poor social and individual skills not only are vulnerable to incentive factors of substance but also they tend to use of substance as an alternative to compromised coping strategies¹⁵.

Various studies show that teaching of social skills or life skills has an effective role in reducing a tendency to addiction. In a study conducted by Bagheri¹⁶ the impact of life skills teaching on attitude and awareness toward to drug and self-esteem has been examined in Tehran 'secondary school students. The results indicate that life skills education is effective on students' attitude change toward the drug¹⁷ has evaluated the role of coping skills teaching on attitudes toward drugs in students who participated in collective conversation session. Results show

Effectiveness Social Skills Training on Addiction Potential Reduction...

that coping skills training changes the attitudes of students in the subject group more significantly than the control group .

Teaching of social skills to adolescents have had a significant impact on inhibiting them from drug use as well as individual risky factors such as self-concept, self-control skills and social skills, locus of control and attitude towards the substances^{18, 19}. In their research have shown that there is a relationship between the poor performance of social skills in childhood and posing the psychological problems such as delinquency, academic and cognitive dysfunction, truancy and later in adulthood, alcoholism, anti-social behavior and mental disorders. Sometimes life skills as a therapy for behavioral problems or strategic support for pre-treatment preparation, is used in some diseases²⁰.

One of the most important social skills attracted the attention of author in this study and was used over other ones during therapy process are assertiveness skills. It refers to Interpersonal relation, without neglecting the others and allowing them to protect themselves²¹. Assertiveness skills are a set of capabilities that: initiate and maintain positive social relationships, develop friendship and intimacy with peers, adapt to the conditions and accept the demands of their social setting. Today governments sustain heavy cost for fighting against drug use, because this phenomenon is considered as personal and social problems. The importance of formulating the preventive strategies has long been clear to public as a whole. Despite increasing efforts in preventing and treating substance abuse, however, there is growing evidence that drug use is increasing²².

Considering the increasing use of drugs, especially its incidence among the young people, it seems that they have no contribution toward development and construction of their nation, so it is necessary the measures to be taken to inhibit the addiction within society as a whole. Given that social skills teaching, including promoting assertiveness for reducing behavioral disorders has been already confirmed in several studies, the author in present study opt to find whether teaching of social skills such as assertiveness, the way of dealing with anger, communicating with others and...are effective in reducing potential to addiction in boy's student of high school?

MATERIALS AND METHODS

The method in this study is a semi-empirical with pre and post-test. The population is consisted of the whole high school boy's students in Ahvaz province, who scored high points in zargari addiction potential questionnaire (one standard deviation above the mean). And among them 40 students were selected randomly then assigned to two groups randomly to Experimental and Control group (each group 20 people). The therapeutic sessions were 8 sessions of 1.5 hour for subject group. In these sessions, the subject group received the social skills teaching such as assertiveness skills, anger management, and the way of communicating with others. In the therapeutic session the subjects attempted to exercise the skills through playing role. Meanwhile, in order to strengthen these skills outside of

therapy sessions, the members were instructed to pursue performing the skills in home or elsewhere. But the control group did not receive any intervention.

Instrument: zargari addiction potential questionnaire: This is a native scale in Iran which is constructed by Zargar²³ with respect to Iranian owns the psychological – social conditions. This questionnaire consists of two factors, having 36 items plus 5 ones of lie detectors. Each question was scored on a continuum ranging from 0 (completely disagree) to 3 (completely agree). Two methods were used to determine the validity of this scale. The validity of scale construct was calculated by correlating it with a 25-item scale of a clinical symptoms list (0.45 SCL_25) that was significant at 0.0001 levels. Scale reliability using Cronbach's alpha was 0.90, which is desirable²³.

RESULTS

In this section after presenting the descriptive results relating to pre-and post-test of both subject and control groups, they we will be compared. The test of both groups was examined based on the results obtained by administrating Zargar Readiness to Addiction Scale .As table 1 shows, the difference between pretest and posttest in the subject group is significant , indicating increase of post-test score over pre-test one, whereas the difference between pretest and posttest in control group is small.

As it is seen in table 1, the mean and standard deviation of Zargar Readiness to Addiction Scale scores in the pre-test phase were 70.43, 3.075 for Experimental group and 68.23, 2.89 for control group and in the post- test phase, they were 47.32, 6.67 for Experimental group and for control group, 67.92, and 2.08. It means that the mean of readiness to addiction in subject group in post-test is decreased compared to pre-test in the control group.

In the present study in order to test the research hypothesis and determine significance of differences between Experimental and control group scores on the Readiness to Addiction variable, the independent t test was used. Meanwhile, due to not being identical regression gradient between the pre-and post-test scores in both groups, it was not possible to use the covariance analysis .

As can be seen in table 2, there is a significant difference between subject and control groups in terms of differential Readiness to Addiction scores in pre and post-test. Therefore, the research hypothesis will be confirmed. In other words, the social skills' training has been effective in reducing tendency to addiction in boy's student of Ahvaz high school.

Table 1. Depression scores mean and standard deviation in pre-and post-test in each group

Group	Pre test		Post test	
	Mean	Standard Deviation	Mean	Standard Deviation
Experimental	70.43	3.075	47.32	6.67
Control	68.23	2.89	67.92	2.08

Effectiveness Social Skills Training on Addiction Potential Reduction...

Table2. Analysis of independent groups T test on difference between pre -and post - test Readiness to Addiction scores in subject and control groups

Group	F	Df	T	Sig
Experimental	31.862	38	54.14	0.001
Control				

DISCUSSION

The purpose of this study has been to examine the efficacy of social skills education on reducing the degree of vulnerability to addiction. Today, despite the substantial cultural changes and alteration in lifestyles, many people are unable to cope with life's challenges and this matter is made them vulnerable to life problems and difficulties. To deal with these problems, it is necessary that they should learn how to achieve the life skills. Learning life skills, prepares the individual for dealing with everyday life problems effectively and enables him to overcome challenges and tensions. The importance of life skills to cope and adapt to environmental conditions is such that it has been defined as the ability to cope and manage life's challenge²⁴. The Results in Table 4 show that this kind of education has been effective in reducing the vulnerability to addiction. Therefore the hypothesis of this research is confirmed. These findings are in agreement with earlier Researches^{17, 16, 6, 26}. Similarly, these findings can be partly consistent with earlier Researches^{27, 28, 29, 30}. These researchers believe that life skills teaching are effective on reducing anxiety and its components in the students. In explaining these findings, it may be said that because the people having high readiness for drug use are those that have low assertiveness and self-esteem, social skills teaching enables them to increase self-esteem and assertiveness, and therefore the tendency to abdication is dramatically decreased as a results of having such characteristics. The people who have low self-esteem and self-concept and due to poor self-concept do not have the ability to reject unreasonable requests by others and because of their extreme need to be approved by others, especially their peer groups may be opt the drug as a scheme for approval by his or her peers. One of the most important in influence of life skills is to improve the individual's behavioral and motivational problems. By resolving behavioral problems, the negative feedback received from the environment is reduced significantly, promoting the individual mental health³¹. Since the addicts are constantly exposed to negative attitudes and even to be ostracized by their peer and society, when regaining their health through life skills teaching, they will establish effective communication with others and negative feedback from others who already have already received from others now is reduced extremely and as a result, individual mental health is guaranteed.

Some research has shown that negative self-concept is one factor that plays a role in the tendency to addiction³². Teaching of social skills can also improve

mental health and create a valuable sense in people in reducing the tendency to addiction¹⁷.

Today, drug dependence and abuse is a personal, social and health problems which is being considered as a threat for national human resources and social capital in different countries. In recent year the addiction problem has had a climbing trend. Unfortunately so far no serious attention to addiction and social responses to it instead of focusing on long-term policy based on practical approach and is consistent with the goals of health promotion and prevention however they take is a reactive policy. However the real goal should be to reduce the number of victims and perpetrators of abuse. This requires the intervention of governments, local communities, judicial system and researchers. Studies conducted on adolescent behavioral problems manifested as delinquency and sometimes lead to arresting them, suggesting that educational problems, lack of self-control skills and problem-solving skills efficiently and failure of emotional control, cause the person is living in difficult situations to do the wrong behaviors that will separate him from the path of healthy living. If the students are given a proper education it can reduce the incidence of such cases. Students as individuals who will shape the community's future, if they learn social skills, having the opportunity to benefit from life with better productivity and became a more effective member in his or her community³³.

Therefore, the present study and the studies in this field can be said life skills training can reduce drug readiness and application of effective educational methods that lead to the prevention are recommended.

REFERENCES

1. Moradi, M. (2002). *Bang shame, looking at the problem of drugs and addiction*. Tehran: Naghshe Kelk Publications.
2. Coleman, G. J. (1995). *Abnormal psychology and modern life*, forth Indic reprint
3. Waldron, H. B & Turner, C. W. (2008). Evidence-based Psychosocial Treatments for Adolescent Substance Abuse. *Journal of Clinical Child and Adolescent Psychology*, 37, 1, 238-261.
4. Pick Hart, C. (2001). *The key to prevention and combating addiction in young adolescent*, translated by Herman, H. Sabryn. Tehran: Saber Publication.
5. Douglas, K. S & Dutton, D. G. (2001). Assessing the link between stalking and domestic violence. *Aggression and Violent Behavior*, 6, 519-545.
6. Mohammad Khani, S. (2005). *Construction and Standardization of risk factors and protective questionnaires for alcohol, tobacco and other substances to identify students at risk of*. Deal with.UNODC.
7. McCuller, W. J., Sussman, S., Dent, C. W & Teran, L. (2001). Concurrent prediction of drug use among high-risk youth. *Addictive Behaviors*, 26(1): 137-142.

Effectiveness Social Skills Training on Addiction Potential Reduction...

8. Jones, R. M & Hartmann, B. R. (1988). Ego identity: developmental differences and experimental substance use among adolescents. *Journal of adolescence*, 20, 143-160.
9. Wiers, R. W., Schoenmakers, T., Houben, K., Thush, C., Fadardi, J. S & Cox, W. M. (2008). Can problematic alcohol use be trained away? New behavioral treatments aimed at changing and moderating implicit cognitive processes in alcohol abuse. In C. R. Martin (Ed.), *Identification and treatment of alcohol dependence*. United Kingdom: M&K Publishing .
10. Fadardi, J. S & Cox, W. M. (2009). Reversing the sequence: Reducing alcohol consumption by overcoming alcohol intentional bias. *Drug and alcohol Dependence*, 101, 137-145.
11. Schoenmakers, T., Wiers, R. W., Jones, B. T., Bruce, G & Jansen, T. M. (2006). Intentional re-training decreases attention bias in heavy drinkers without generalization. *Addiction*, 102, 399-405.
12. Brghndan, S., Zarbakhsh, M. R & Ghaemi, N. (2001). Effectiveness of therapeutic lifestyle skills education on adolescent attitude to prevent drug abuse. *Proceedings of the National Conference of substance abuse and health*. Abhar: Islamic Azad University.
13. Jones, M., & Lavalley, D. (2009). Exploring of life skills needs of British adolescent athletes. *Psychology of Sport and Exercise Journal*, 10, 159-167.
14. Helfrich, C. A & Foog, F. L. (2007). Outcomes of life skills intervention for homeless adults with mental illness. *The Journal of Primary Prevention*, 28, 313-326.
15. Botvin, G, J. (2000). Preventing drug abuse in schools; social and competence enhancement approaches targeting individual-level etiological factors. *Addictive Behaviors*, 25, 887- 897.
16. Bagheri, M. (2002). The rule of teaching life skills on knowledge and attitudes towards drugs and self-esteem of students. Master's thesis. Psychology and Educational Faculty .Tehran University.
17. Rahmati, A. (2004). Coping skills training in changing attitudes towards drug abuse among students of Kerman. PhD thesis, Psychology and Educational Faculty of Allameh Tabatabai University, Tehran.
18. Mohammad Khani, S. (2006). Evaluation of life skills education on factors in the structural model material in adolescent at risk. PhD thesis. University of Welfare and Rehabilitation Sciences.
19. Nazari, I & Hossainpour, M. (2009). The effectiveness of social skills on anxiety and self-esteem female students. *New findings in Psychology*, 2, 4.
20. Kurtz, M., Jeffrey, S. B & Rose, J. (2010). Elementary neurocognitive function , learning potential and everyday life skills in schizophrenia: What is their relationship? *Journal of schizophrenia Research*, 116, 280-288.
21. Güven, M. (2010). An analysis of the vocational education undergraduate students' levels of assertiveness and problem-solving skills. *Procedia Social and Behavioral Sciences*, 2, 64-70.

22. Lowinson, J. H., Millman, R. B & Longrod, G. (1997). Substance abuse: A comprehensive textbook. New York: Willams & Willams: Baltimore.
23. Zargar, Y., Najjarian, B & Naeami, A. Z. (2008). The relationship between personality traits (sensation seeking, assertiveness, psychological hardiness), the religious attitude and marital satisfaction with readiness for drug abuse. *Journal of Education and Psychology Chamran University*, 1(3): 99-120.
24. Suparp, J., Boonyathan, W., Kittipichai, W & Chamroonsawasdi, K. (2010). Life school development program to reduce bullying and to promote good practices among primary school students. Samut-Sakorn Provice, Thailand. *Journal of Public Health*, 40, 7-16.
25. Naderi, F., Pasha, Gh. & Makvandi, F. (2007). Effects of social skills training on individual individual-social, aggressive and assertive female students at risk. *Knowledge and Research in Psychology*, 33, 62-37.
26. Liberman, R. P., DeRisi, W. J & Mueser, K. T. (1989). Social skills training for psychiatric patients. Allyn and Bacon Press.
27. Smith, R. (2004). The effect of life skills Training on anxiety and aggression in Group of third- grade guidance school. *Journal of mental Health care*, 41(3), 212-220.
28. Dietz, T. J. (2005). Social skills in self- assertive strategies of toddlers with depressed and odder mothers. *Journal of Genetic psychology*, 166, 94-107.
29. Faller, H. (2004). Prognostic value of Anxiety Loping and depression in survival of lung cancer patients. *Psychobiology*, 13, 359-364.
30. Shalter, T. (2002). Problem solving skills Training for mothers of children with newly diagnoses canter .*psychological abstracts*, 89.
31. Williams, E. O. (2010). The use of music to teach life skills to students with emotional disabilities in the classroom. Retrieved from: www.teacher.org.cn/doc/ucedu201001/ucedu201002.pdf.
32. Frouoddin, A & Sadrossadat, S. J. (2002). The relationship between self-concept and trends drug addiction in youth. *Medicine and Purification*, 46, 74-66.
33. Zimmerman, D. C. (2010). Project for life skill building in 12th grade social studies classrooms: A case study. Retrieved from: <http://eric.ed.gov/PDFS/ED510590.pgf>.