Life-Skills Training in Education

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This article takes a historical look at the life skills in education movement and makes recommendations for future directions. Specific affective education and social skills training programs contributing toward a systematic and visible life-skills curriculum are described. Elements of life-skills training in both the mental health and education fields are discussed, and interaction between life-skills training efforts in these two fields is noted and encouraged. Finally, considerations for implementing life-skills training programs in education are presented.

The 1969 yearbook of the Association for Supervision and Curriculum Development of the National Education Association was a landmark publication for the life skills in education movement. In this work, titled *Life Skills in School and Society*, Rubin and a group of distinguished authors recommended an increased focus on "education for life," on developing a "comprehensive school" that teaches "primary skills" necessary for the individual's physical and emotional well being—"skills that enable the individual to know, to think, to feel, to value, and to act" (p. 30). Looking into the future, Rubin wrote:

> Nineteen-eighty-four, that year which has come to symbolize the incomprehensible and frightening future, is but fifteen years from the appearance of this volume. Once again, and perhaps with greater urgency than ever before, as men who plan the schools have always done, we must ask ourselves, "What skills must a youth have ?" (p.22)

Now, 15 years later, in our sometimes "incomprehensible and frightening" *present*, it is painfully clear that our youth do not always acquire the skills necessary to negotiate developmental hurdles and to solve predictable life problems. Statistics on teenage suicide, unwanted pregnancy, juvenile crime, and substance abuse reveal that many within the next generation have not been adequately prepared to avoid or handle successfully the challenges of modern society. As Egan (1984) notes:

> We live in a society where acquiring certain kinds of "life skills" is left to chance or is, at best, a rather haphazard process. . . . It seems that "life skills" *acquired, practiced, and used* is not one of the valued accomplishments of education, either formal or informal. (p. 35)

Therefore, we continue to ask the question, "What skills must a youth have?" We also seek answers to the equally important question, "How can we best teach these skills?"

Life Skills in Education

Educational theory and practice, in fact, reflect a longstanding concern with preparing the student for life in a complex social world. Vital to success in this world are skills such as friendship behaviors, values clarification, conversation, planning, health maintenance and promotion, time management, assertiveness, and listening. Re-visioning the goals of education in these directions began with the Progressive Education movement, which sought to make the problems of living a part of the school curriculum. However, Adkins (1974) points out there was no lasting impact for several reasons:

1. Identified life tasks were thought to be too general or too trivial.
2. Methods of instruction relied for their success on exceptionally talented teachers and could not be easily used by average teachers.
3. Life problem-centered content and methods were resisted because they were inappropriately inserted into the curriculum.
4. Effective instructional technology was simply not available.

Curricular approaches to teaching students life skills gave way to the return to a subject-centered focus. As this occurred, the counseling field was burgeoning, and it seemed that counselors could fulfill the school's role in the psychosocial development of students. However, counselors did not succeed in this task (Adkins, 1974). They failed because of insufficient manpower and the inadequacy of traditional group

and individual methods as vehicles for systematic life-skills training. How, then, can we ensure that our youth develop the life skills crucial to healthy development and survival in today's society? The answer may lie in the inclusion of life coping skills as an integral part of the curriculum at all levels of education.

In *A Life-Skills Curriculum,* Gazda (1984) relates life skills to the developmental tasks outlined by such developmentalists as Erikson (1950, 1963), Havighurst (1953, 1972), and Kohlberg (1973). Gazda contends that "Accomplishment of the developmental tasks is dependent on mastery of life skills appropriate to the stage and task" (1984, p. 93). Adkins (1974) argues eloquently for a "Fifth Curriculum" which "would provide life problem-centered instruction from kindergarten through continuing education on predictable developmental tasks, crises, and problems" (p. 512). Even earlier, Krathwohl, Bloom, and Masia (1964) published affective objectives in precise terms.

Professional educators have long acknowledged the existence of a hidden curriculum which plays a significant role in the lives of students. Though unsystematic and often ignored, it attempts to develop social behaviors, values, and attitudes thought to be important to school and society. This is a high risk society for growing up. Why not provide students with the advantages of systematic programs designed to foster acquisition of coping and problem-solving skills that have the potential to prevent personal tragedy? A highly *visible*, explicit, systematic life-skills curriculum can empower students with the competencies necessary for successfully negotiating life's challenges. If we anticipate and prevent problems or address them early on, we can substantially reduce human suffering.

Curricular Programs

Wood (1982) differentiates between two curricula designed to facilitate social development: (a) affective education and (b) social skills training. Using a psychoeducational approach, *affective education* is purported to focus on thoughts, feelings, and interpersonal relationships. A primary goal is the enhancement of self-esteem through expression of feelings, verbal sharing, problem-solving activities, role playing, psychodrama, and sociodrama.

Social skills training uses a behavioral model, and includes the systematic planning of experiences designed to teach individuals situationally appropriate behavior. Results focus on obtaining positive interpersonal consequences while avoiding adverse consequences.

Teachers function as models of appropriate behavior, as planners of behavior-change programs, and as dispensers of consequences. These models are expected to influence choice of future behavior.

Wood concludes that both kinds of skill training are useful in schools. When the goal is to experience feelings for their own sake, then "affective education" is appropriate. When the behavior to be learned is a *must*, then social skills training is more suitable.

Affective Education Programs.

- The Human Development Program (Bessell & Palomares, 1970) is more popularly recognized as the "magic circle." The program is designed for students in grades two through six. The students sit in a circle forming a discussion group in which responses to selected topics concerning self-awareness, mastery, and social interaction are accepted in a nonjudgmental manner. Teachers use reflective listening techniques as they clarify thoughts and feelings. Schindler (1982) reports success with this technique with children as young as four or five.
- Developing Understanding of Self and Others (DUSO), designed for children between the ages of five and ten, gives special attention to helping children develop a vocabulary for expressing their feelings (Dinkmeyer, 1970). Activities developed within units such as self-acceptance include stories with an object lesson, discussion, role play, and the use of puppets to encourage participation. Teachers act as facilitators while structuring the experiences.
- Toward Affective Development (TAD) also focuses on feelings and their effect on others. Aimed at grades three through six, numerous lessons are provided with the assistance of discussion, pictures, filmstrips, cassettes, and posters. Teachers are encouraged to participate in these activities designed to promote openness to experiences and cooperation among peers (Dupont, Gardner, & Brody, 1974).
- Values Clarification (Raths, Harmin, & Simon, 1966) is a procedure rather than a packaged program like those previously described. While procedures and activities are included in handbooks, teachers are urged to develop their own ideas. The program goal is to stimulate students to discover and build their own values. Teachers, again, function as nonevaluative facilitators. Many of the techniques suggested are common to practitioners of group therapy.

Social Skills Training.

- Social Problem-Solving (SPS) Training Programs, perhaps better thought of as cognitive-behavioral programs, have been the source of much systematic study (Weissberg & Gesten, 1982). These programs teach interpersonal problem-solving skills as a primary prevention strategy to reduce maladaptive behavior. Lessons are highly structured and may be divided into such units as: recognizing feelings in ourselves and others, problem sensing and identification, generation of alternative solutions, consideration of consequences, and integration of problem-solving behavior. Role playing is the most important teaching mode in these efforts to solve social problems. In addition, children are taught to use mediated self-instruction. Evaluation of these programs suggests that as the technology for conducting SPS training improves so does the generalizability of the acquired skills.
- The Model Affective Resource Curriculum (MARC) project is designed to teach emotionally disturbed adolescents skills in self-control, problem solving, and interpersonal communication skills (Francescani, 1982). Its lessons use a standard delivery pattern of instruction, modeling, practice, and feedback. Videotape portrayals of adolescents involved in problem situations are followed by activity lessons using a variety of techniques and materials.

Life-Skills Training in Special Education

Perhaps the most widespread and highly researched instance of life skills training is social skills training of the mentally retarded, learning disabled, or emotionally disturbed (Gresham, 1981; Gambrill, 1984). Without a doubt, the mainstreaming mandate issued in Public Law 94-142 significantly increased interest in training youth in social/life skills. It became readily apparent that just including special needs children in the same classrooms with normal children (mainstreaming) would not be sufficient to promote healthy social interaction. Handicapped children had to be taught acceptable social skills, and activities had to be structured carefully to promote positive interactions.

Goldstein, Gershaw, and Sprafkin (1984), in an attempt to make traditional psychotherapy more responsive to patients' needs, have developed *Structured Learning Therapy.* The major techniques involved include modeling, role playing, performance feedback, and transfer of learning. In their recent work teaching prosocial skills to antisocial and aggressive adolescents, they have used live models as well as filmstrips and video and audio tapes. Rock music accompanies the behavior steps

of the skills to be learned. Of significant note are their words of wisdom: "Study your trainees, learn how they learn, and prescriptively reflect these insights in your behavior-change efforts" (Goldstein, Gershaw, & Sprafkin, 1984, p. 80).

Training the Teachers

Teachers have been the focus of some well-known programs. Gordon's (1977) *Teacher Effectiveness Training* program and Carkhuff's *Human Resources Development Model* (Carkhuff & Berenson, 1976) are distinct contributions in this area. A substantial research literature demonstrates that training in interpersonal communication skills enhances the teaching effectiveness of educators (Gazda, Asbury, Balzer, Childers, & Walters, 1977).

Life-Skills Training in the Mental Health Field

The life-skills movement in education has a parallel in the mental health field. Traditional mental health strategies are not meeting, and perhaps cannot meet, our nation's growing needs for psychological help. According to the National Institute of Mental Health (Regier, Goldberg, & Taube, 1978), an estimated 15% (32 million) of our population suffers from serious mental disorders; yet only 3% (6.5 million) are helped by mental health specialists.

To help resolve the crisis of need, the mental health field must shift its emphasis toward prevention, use of paraprofessionals, self-help groups, teaching mental health skills to other workers in the human services, and the dissemination of psychological skills to expanded populations of both traditional and nontraditional clients and helpers. A new model for mental health training and delivery is emerging from these efforts, and this model is rapidly gaining influence and recognition. A substantial research base has been developed, and psychological skills training has been the subject of issues of major counseling journals, of recent training texts, and of major books and reviews (Larson, 1984b).

Life-Skills Training: An Interface of Education and Mental Health

To meet the growing demands for psychological help, the mental health profession must adopt a more educational and skills development model of training and delivery. To educate students for life, the education field must adopt a curriculum including content areas traditionally assigned to the counselor or mental health professionals. These

two developments—the "therapist as teacher" and the "teacher as life skills trainer"—have great potential for synergy. To achieve a convergence of goals and methods between professionals requires dialogue and interchange. As this occurs, a more holistic model and practice of both education and therapy can emerge which attends to whole persons as active problem solvers.

Consider a few ways workers in mental health and education can work at this interface of psychology and education. The psychologist or mental health worker can work with educators to develop life-skills training programs relevant to the needs of specific student populations. They can draw upon existing life-skills training packages for teaching such life skills as problem solving, values clarification, relaxation, assertiveness, job finding, and so forth, or they can create an original program. Another kind of intervention would be to train teachers, counselors, and students in interpersonal skills, using programs like Ivey's Microcounseling, Kagan's Interpersonal Process Recall Method, Carkhuff's Human Resources Development Model, Gordon's Teacher Effectiveness Training, Goodman's Sashatape program, or Guerney's Relationship Enhancement program. (See Larson, 1984a, for a description of these programs.)

Identifying Life Skills.

A necessary step in the development of the life-skills movement—in both the educational and mental health fields—has been the effort to identify the life skills deserving attention and implement the appropriate programs. Adkins (1974, 1984), Egan (1984), Gazda (1984), Goldstein (1979), Lazarus (1982), and Smith (1982) have begun to develop typologies of the life skills necessary to healthy development and functioning. For example, Egan (1984) identifies seven "packages" of life skills: skills related to physical development; learning-how-to-learn skills; skills related to values clarification and reformulation; self-management skills; interpersonal communication skills; small group skills; and systems involvement skills. Gazda (in press) and his colleagues have developed four categories of life skills: problem-solving/decision-making skills; fitness/health maintenance skills; identity development skills; and interpersonal communication skills.

Teaching/Learning Methods.

Having identified specific life skills, the next step for the life-skills training field is the development of methods for teaching these skills to large numbers of trainees. A review of the more systematic and influential life-skills training programs in both the education and mental

health fields reveals several themes that run through the teaching/learning methods employed:

1. They all involve the active participation of clients and students in the learning process.
2. There is focus on specific behaviors (internal and external) and the mastery and maintenance of these behaviors.
3. The programs are based on established learning principles of modeling, observing, discriminating, reinforcing, and generalizing.
4. Each program includes both didactic and experiential emphases.
5. The programs are highly structured.
6. Goals are clear.
7. Progress is monitored.
8. Mystification is minimized.

Life-Skills Training in Action.

The educator or mental health worker wishing to develop or supplement life-skills training efforts in school settings should have a clear idea of the "how tos" involved in teaching life skills in a more systematic manner. The following scenario is meant to capture essential elements of life-skills training. With the eight above themes in mind, life-skills trainers in education might begin by identifying the target problem areas they would like to address. They could include listening skills, learning-how-to-learn skills, self-management skills, interpersonal communication skills, problem-solving/decision-making skills, or identity development skills. Existing packaged programs could be critically evaluated to determine if they could be effectively used to teach such skills.

If an existing program is not used, a second step would be to identify both effective and ineffective responses that students make when confronted with problem situations. Students could role play critical incidents and engage in brainstorming to elicit responses. Once tentative effective and ineffective responses are identified, the life-skills trainer can model the positive behaviors or present them via videotape or audiotape. It is critical that students exhibit the ability to discriminate between effective and ineffective responses. Once this ability to discriminate has been demonstrated, students must be given opportunities to practice positive coping responses either through role plays or through responses to videotape or audiotape presentations of problem situations.

After students have demonstrated the desired life skills, the next focus of the life-skills trainer becomes ensuring that this new behavior transfers to other settings, either inside or outside the school. Frequent

check-ins with students about their skill performance outside school and close observation provide support for the maintenance and generalization of the new behaviors. Having students *report their successes* with new life skills provides a powerful incentive for all students to practice the life skills.

Consideration for Implementing Life-Skills Training in Education

Even under the most advantageous of circumstances, implementation of life-skills training curricula within institutions of education requires thoughtful preparation and consideration of several unique and not-so-unique circumstances. A few of these are discussed below:

1. Success with life-skills training techniques is evolutionary. New repertoires of behavior are adopted slowly. If prevention of dysfunctional responses is the goal, it will take time to determine if maladaptive behavior has been avoided.
2. Systematic practice is essential. Individuals must be involved in opportunities to practice, test out, and adopt newly acquired skills. Behavioral changes need to be supported in day-to-day living situations. Psychoeducational interventions cannot be left to happenstance or haphazard efforts.
3. Generalization of life skills and attitudes must be deliberately taught. It is sometimes difficult to predict whether new skills will be applied to new situations. Wood (1982) advocates teaching in the environmental situation where the new learning will be most useful. Still others (Weissberg & Gesten, 1982) suggest that behavioral changes may be more likely to transfer when trainers are more experienced.
4. Established school practices must be considered. It is necessary to consider how new procedures will impinge on established school routines. Teachers can cooperate only when they clearly understand time and role demands and can work them into their ongoing program. Educators will expect curriculum changes to be sound theoretically and practically useful within the classroom.
5. Consider the teacher-pupil relationships. When skills of an affective nature are involved, the rapport and trust between teacher and pupil are an important as the relationship between a counselor and client. Quality teacher training must be a high priority. Success may be dependent on the ability of the teacher to serve as an appropriate role model while generating trust and understanding as a facilitator.

6. Finally, the need for confidentiality and privacy must be respected and maintained. Concerns about the sharing of private family matters have been expressed by parents who do not support affective curricula. Students must be given the choice of whether or not they wish to participate.

Future Directions

Revisioning the goals of education to include a fifth curriculum would profit greatly from diffusion of knowledge among helpers of all disciplines and professionals who share a life-skills training orientation. Techniques and theory already developed in the mental health and educational fields can guide and inform these efforts. Life-skills training tools—both conceptual and technological—are being developed to meet our needs. Using these effectively, we can indeed help to prepare our students for the challenges ahead.

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