

Scholars Research Library

Der Pharmacia Lettre, 2015, 7 (12):159-162 (http://scholarsresearchlibrary.com/archive.html)



Effectiveness of training on learning coping skills among Iranian preuniversity female students; a semi-experimental study

Fathola Mohamadian¹, Ashraf Direkvand-Moghadam² and Ataollah Hashemian^{*1}

¹Psychosocial Injuries Research Center, Ilam University of Medical Sciences, Ilam, Iran ²Psychosocial Injuries Research Center, Faculty of Nursing and Midwifery, Ilam University of Medical Sciences, Ilam, Iran

ABSTRACT

Stress as an integral part of every person's life, especially during adolescence can cause unpleasant effects. Therefore, this study is conducted in order to measure the efficacy of the training on learning coping skills. In a semi-experimental study, pre-university female students of Ilam (Iran) evaluated during the academic year 2010-2011. A multistage cluster random sampling was used to select the participants. Data were collected by two demographic and "Billings and Mouse" questionnaire by pre- and post-test method. In conducting interventions, same ways of using scientific literature, teaching aids, role playing method, and efficient method of coping skills were provided and finally statistical analysis was performed using SPSS software. A total 216 students were evaluated. There was a significant difference between solving-focused coping skill before and after the intervention (57.4% vs. 62.5%; P=0. 02). Emotionalism focused coping skills has been significant differences before and after the intervention (42.6% vs., 34.8 %; P=0. 02). Training on learning coping skills increased the problem solving-focused coping skill in pre-university female students.

Keywords: Stress, Coping skills, Student.

INTRODUCTION

Stress is defined as a multidimensional concept that focused on the dynamic relationship between the individual and the environment (1). Stress is variety of literature in social, behavioral, and life sciences (2). Every day, individual is faced with multiple stresses and pressures (3). In fact, stress creates inconsistency "real or unreal" between the requirements of a situation and existential, mental, and social resources of the individual (1). However, some degree of stress can be effective in increasing the humans' performance, but also, prolonged stress can induce some side effects, including mental and physical illnesses, sleep disorders, poor concentration, and reduce in problem solving ability (4-6). Although, all people experience some degrees of stress in a different situation, but in adolescence period, occurred the rapid biological, behavioral and cognitive. Therefore, rapid and sudden changes can impose stress on adolescence (3). Researchers believed that students in adolescence period are a high risk group due to the transitional nature of their life. Always, in adolescence period, students need to adapt to changes in their physical and mental as well as their adaptation to the environment and surroundings (1). There are various methods in order to reduce the effects of stress such as effective coping style, relaxation, joke and humor, sports and social support exist. Used of training stress coping skill is one of the most common methods (2, 3). There are two main types of coping strategies. In which problem-solving coping skill is to solve the problem or to act in such way that stress resource could be changed, but emotion-focused coping skill reduces the mess along with the stressful situation. It is noteworthy that when stress is occurring, people use both or one of these methods. Moreover, in emotion-focused coping skills, adaptive and non-adaptive strategies exist (7, 8). Since approximately 16% of our population consists of students and the mission of education in addition to formal training is to breed and train these loved ones, especially teenagers, so students need to learn the ways for coping with the stress which this plan is conducted in order to measure the effect of such trainings

MATERIALS AND METHODS

In a semi- experimental study, pre-university female students of Ilam (Iran) evaluated during the academic year 2010-2011. A multistage cluster random sampling method was used to select the participants. In order to select the research samples, firstly three pre-university centers were selected by clustering method in different region of the city. Then, 216 students were selected as the research samples by using random sampling method, as was previously described for other studies (9-13). Data collection was carried out by two questionnaire "Billings – Mouse (1981)". "Billings- Mouse questionnaire contains 19 items. Overall, 8 items evaluated the problem solving coping style and 11 items on emotional focused coping style, A four-choice Likert scoring from "never" to "a lot" was used. However, some questions were graded reversely based on their negative charge (14). Validity and reliability of Billings- Mouse Coping skills questionnaire have been confirmed in previous studies (15, 16) and Iranian population (7, 17). The training content is selected using the newest scientific resources, including stress, stress symptoms, efficient ways of stress coping skills. For more effect of training, in addition to educational aids and face-to-face training method, role-playing method was used. The highest number of participants in each training class beginning 30 participants.

This study was undertaken with the approval of the Ethical Committee of the Ilam University of medical Sciences, Iran. The aim of the study was described an informed consent was obtained from all participants before the enrollment in the study. To enhance confidentiality, all questionnaires were completed anonymously and only required information was collected. The SD was used to describe the data frequency, percent and mean. The association between coping style and qualitative variables was determined by using X^2 and Fisher Exact test.

RESULTS

A total 216 pre-university female students were studied. There was not a statistical relationship between parents' education', father's occupation and students' coping skill. However, the relationship between mothers' occupation and students' coping skill was significant. The parents' characteristics are presented in table 1.

Characteristics	N (%)	P-value
Father's occupation		0.451
Governmental	115(53.24)	0.431
Non-governmental	101(46.76)	
Mothers occupation		
Governmental	50(23)	0.003
Non-governmental	166(77)	
Father's education		0.06
Illiterate	5(2.3)	0.00
Primary	15(7)	
Secondary	39(18)	
Diploma	54(25)	
Academic	103(47.7)	
Mother's education	10(4.6)	0.058
Illiterate	10(4.0)	0.058
Primary	37(17.2)	
Secondary	33(15.8)	
Diploma	76(35.2)	
Academic	60(27.2)	

Table 1. The parents' characteristics in study participants

There was a significant difference between solving-focused coping skill before and after the intervention. Emotionalism focused coping skills has been significant differences before and after the intervention (42.6% vs., 34.8 %; P=0. 02). The coping skill before and after training are presented in table 2.

Also, in lights of frequency of coping behaviors, following results were obtained:

Behaviors such as the use of past experiences during the occurrence of a problem, consult with relatives, friends, and professionals such as doctors, lawyers or clergy (Table 3), due to the positive aspects of the situation in hand, increase of information about the situation, correct understanding of the problem, prudent decisions for problem-

solving, considering multiple solutions, trying to fix the problem after the intervention than before the intervention in lots of frequency have increased.

While behaviors such as problem internalizing, forgetting the problem, overeating, smoking or drugs in order forget the problem, blaming others in lights of frequency have decreased after the intervention.

Table 2: Distribution of absolute and relative of problem-solving coping skill among Iranian pre-university female students before and after the intervention

Problem-solving coping skill	Before intervention*	After intervention*
Problem solving	117 (54.4)	131 (65.2)
Emotional focused	84 (42.6)	70 (34.8)
Total	204 (100)	201 (100)
	N (%)	

 Table 3: Distribution of absolute and relative to the question "I consult with professionals such as doctors, lawyers and clergy" among Iranian pre-university female students before and after the intervention

Options	Before intervention*	After intervention*	
Never	152 (70.4)	80 (37)	
Sometimes	50 (23.1)	46 (21.3)	
Often	12(5.6)	49(22.7)	
Always	2(0.9)	82(38)	
Non response	2(0.9)	26(12)	
Total	216 (100)	216 (100)	
- NI (0/)			

N (%)

DISCUSSION

The current study aims to evaluate the effectiveness of training on learning coping skills among Iranian preuniversity female students.

Our findings show that students besides official trainings need healthy behavioral and cognitive methods and skills for coping with life problems and the officials in charge must pay attention to them. The finding of the study showed that there is not a meaningful relationship between parents' education level and coping skill. Maybe the most important reason is that parents similar to the school officials have more emphasis on educational dimension and less emphasis on training and life skills topics.

The results of this study showed that 42.6 % of research samples used of an emotion-focused coping skill for their stressful life events before the intervention. Because of emotion-focused coping skill can increase the risk of mental and physical disease (18); therefore, it is a meaningful rate.

Our results indicated that training increased the rate of solving-focused coping skill in our study population. In a problem-focused coping skill, individuals trying to well inform and analyzing the problem. Then apply the previous experiences to solve the problem and control the situation (19). Since evaluated the relationship between stress coping styles and quality of life in different population (4, 5, 19, 20). Researcher believed that a problem-focused coping skill is useful to prevent the development of stressful life events (21).

A study reported the problem-focused coping styles as an effective factor for psychological reactions of patients (2). Another finding of this research showed that using emotion-focused coping skills has been reducing after the training. So that usage rate of emotion-focused coping style before intervention was 42.6 %, but after the training has fallen to 32.8%. These changes are not accidental due to their significant effect of the intervention instead it was because of the intervention effect. Therefore, instead of relying on stress itself, we can rely on efficient and active coping skill and optimistic planning and general capability in order to perform the works in stressful situations and this has a positive correlation with self-esteem and energetic mood and there is a meaningful relationship between using problem-solving method and social support with academic progress and there is a negative relationship between using avoidant approaches with academic progress in adolescence period (22, 23).

The results of a study showed that students who had much maladaptive coping strategies, they had more stress and less general health. We could hope that by implementing such programs, we could see promotion of mental health in our students in regular manner.

Finally, we could say that since students, especially adolescents would confront with families and educational stressful situations which could negatively affect their function and also because of clinical outbreaks of social

harms such as suicide among Ilam youth and adolescent, so targeting them requires to use such trainings especially stress coping skills and in the next years, some programs must be created for the those in our country.

CONCLUSION

Training on learning coping skills increased the problem solving-focused coping skill and decreased the emotionfocused coping skill in pre-university female students.

Acknowledgment

This study was approved by the Ilam University of Medical Sciences. We thank the participants, coordinators, and data collectors who assisted in this study

REFERENCES

[1] Yazdani M, Rezaei S, Pahlavanzadeh S. Iran J Nurs Midwifery Res. 2010;15(4):208-15.

[2] Maleknia N, Kahrazei F. Journal of Midwifery and Reproductive Health. 2015;3(4):472-78.

[3] Rahmani M, Rahmani A, Nequee F. European Online Journal of Natural and Social Sciences. 2013;2(2):376-85.

[4] Beddoe AE, Murphy SO. J Nurs Educ. 2004;43(7):305-12.

[5] Weinstein N, Brown K, Ryan R. J Res Pers .2009;43:374-85.

[6] Sanderson AC. health psychology. New York: John wiley & sons; 2004.

[7] Mohammadzade J, Maleki M, Veisy F. Treand in life scinces. 2015;4(3):2319-5037 (e).

[8] Taylor ES. health psychology. new York: Mcgraw-Hill companies; 2009.

[9] Direkvand-Moghadam A, Ghazanfari Z, Sayehmiri K. J Clin Diagn Res. 2014;8(1):96-9.

[10] Direkvand-Moghadam A, Jaafarpour M, Khani A. J Clin Diagn Res. 2013;7(11):2567-9.

[11] Direkvand-Moghadam A, Khosravi A. J Clin Diagn Res. 2013;7(10):2247-9.

[12] Direkvand-Moghadam A, Rezaeian M. Int J Gynaecol Obstet. 2012;118(3):213-5.

[13] Direkvand-Moghadam A, Khosravi A, Sayehmiri K. Acta Biochim Pol. 2012;59(4):673-7.

[14] Billings AG, Moos RH. J Behav Med. 1981;4(2):139-57.

[15] Zeidner M, Endler NS. A Critical Survey Of Coping Instruments. New York: Wiley; 1996.

[16] Moss R, Billings A. Conceptualizing and measuring coping resources and processes. 2nd ed: In: Goldberger L, Brezintz Sh, editors. Handbook of stress: Theoretical and clinical aspects; **1982**.

[17] Kahrazei F, Danesh E, Hydarzadegan A. Zahedan Journal of Research in Medical Sciences. 2012;14(2):112-16.

[18] Korfage IJ, Essink-Bot ML, Mols F, van de Poll-Franse L, Kruitwagen R, van Ballegooijen M. Int J Radiat Oncol Biol Phys. 2009;73(5):1501-9.

[19] Mukwato K, Mweemba P, Makukula M, Makoleka M. Medical Journal of Zambia. 2010;37:40-5.

[20] Ahadi H, Delavar A, Rostami A. Procedia - Social and Behavioral Sciences. 2014;116:3467-70.

[21] Mehrabi T, Azadi F, Pahlavanzadeh S, Meghdadi N.Iran J Nurs Midwifery Res. 2012;17(6):421-4.

[22] Feurestein M, labhe EE, Kuczmierzyk AR. health psychology : A psychological perspective New york: Plenum press; **1986**.

[23] Gerin W, Pieper C, Marchese L. psychsomatic medicine. 1992;54:707-19.