

Efficacy of Life Skills Training in Mitigating Emotional Dysregulation in Youth with Generalized Anxiety Disorder

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Abstract: *The current study aimed to examine the efficacy of Life Skills Training in Mitigating Emotional Dysregulation in Youth with GAD. The Positivism Research philosophy was used. Therefore, the researcher used a quasi-experimental pre-test and post-test design. Forty (40) adolescents (16–19 years old) diagnosed with GAD, included in the study from Sarhad Hospital for Psychiatric Diseases, Peshawar, and The Center for Psychotherapy and Psychiatry, Peshawar, participated in the study. The sample was equally divided into the control and experimental groups. Pre-tests and post-tests were used as research tools for data collection. An Independent sample t-test was applied. The result indicates that a reduction of GAD was found in EG after life skills training as compared to the participants who were included in the control group.*

Key Words: Skills Training, Emotional Dysregulation, Generalized Anxiety Disorder

Introduction

Generalized Anxiety Disorder (GAD) is a pervasive mental health condition marked by chronic and excessive worry that interferes with daily functioning. Adolescents are particularly vulnerable, with a higher prevalence of GAD among females following puberty. A core feature of GAD is emotional dysregulation, characterized by difficulties in managing emotional responses, leading to increased anxiety, impaired social interactions, and academic challenges. Addressing emotional dysregulation is critical for mitigating the impact of GAD, and one promising approach is life skills training. Swaroop's life skills framework, developed by the Indian educationist, provides a holistic intervention model targeting three essential domains: social skills, thinking skills, and emotional skills. This comprehensive approach equips adolescents with practical tools to regulate their emotions, foster resilience, and navigate challenges effectively (Florez & Bethay, 2017).

Life skills are competencies that support an individual in managing life and preserving their mental, emotional, physical, and general well-being. The World Health Organization (WHO) defines life skills as the capacity for adaptation and constructive conduct that enable people to manage activities and obstacles in daily life. Decision-making and problem-solving, critical and creative thinking, interpersonal and communication skills, self-awareness and empathy, and stress and emotion management are the five primary components of life skills. According to Piere, life skills are a variety of abilities that everyone needs for daily living and that aid in everyone's development. People who can acquire skills in one area of their lives and then apply those talents to succeed in another area of their lives are said to possess the transferability that is necessary for success. For instance, collaboration is not a life skill for someone if they are hired for a team task at work but do not apply it in other areas of their lives. However, if the person applies the abilities they acquired in the activity to one or more areas of life skills (Daros et al., 2021).

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Everyone needs to have and understand life skills training in order to act in a constructive and adaptive manner, which helps people to successfully handle demands and obstacles in daily life. Problem-solving, decision-making, critical and creative thinking, effective communication, interpersonal skills, empathy, self-awareness, and managing stress and emotions are among the life skills that one has to have. Thinking skills, social skills, and emotional skills are the three categories of life skills. Furthermore, according to WHO, life skills can help people act in a healthy way, avoid health issues, and contribute to bettering their mental health. These findings are predicated on the existence of a psychological construct, specifically the life skills dimension, which can act as a preventative measure against the development of psychological symptoms in order to maintain optimal mental health for each individual (Marganska et al., 2013). This study emphasized the efficacy of Life Skills Training in Mitigating Emotional Dysregulation in Youth with GAD.

Objectives of the Study

The following objectives were made to achieve:-

1. To assess the impact of life skills training on emotional dysregulation in adolescents with GAD.
2. To compare the outcomes of adolescents receiving life skills training (experimental group) versus those receiving no intervention (control group).

Literature Review

Life Skill Training

According to WHO, life skills are the capacity for good and adaptive behavior that help people successfully navigate the rigors and obstacles of daily life. In this sense, there are countless abilities that might be classified as life skills, and the characteristics and meaning of life skills are probably different in different contexts and cultures. Nonetheless, research in the life skills field indicates that a basic set of abilities is at the foundation of skills-based programs aimed at advancing kids' and teens' health and well-being (Gasol et al., 2022).

According to Goli (2019), life skills training can boost an individual's self-esteem, and positive peer relationships can boost an adolescent's self-esteem. Teens who receive acceptance from their peers also have a significant impact. One of the main purposes of life skill training is to uplift competency and skill in making decisions and problem-solving. Additionally, critical thinking and creative ideas may be enhanced through life skills training. Moreover, life skill training develops interpersonal skills through effective communication, dealing with emotions, and tackling stress in different situations. Therefore, life skill training is crucial for youth to cope with stress, anxiety, and depression.

Learning life skills effectively improves psychosocial skills, lowers anxiety symptoms, and affects how a learner feels about others and themselves. These skills support mental health and assist in dealing with life's challenges. Because life skills training is conducted in a group setting, it can also help people feel less stressed and anxious because they interact with others, perceive that they share their issues, and can draw on one another's experiences to cope with anxiety. On the other hand, anxiety results from a lack of ability to anticipate situations and apply skills. Life skills training helps people become more self-aware, identify their strengths and weaknesses, and take action to strengthen their abilities and address their weaknesses. Being conscious of one's strengths and shortcomings enables one to handle issues more effectively and, consequently, lessen anxiety (Liu & Yan, 2015).

Social resistance skills and improved social and personal competency are taught in life skills training programs. The training session should be conducted in a group setting. Because of the group's collective experience, the fact that others have similar issues, and the ability to draw on one another's experiences, this can help individuals in the group cope with stress and anxiety. Additionally, people who feel that they have access to resources for support when dealing with disease-related anxiety are less susceptible to the stress of the illness. With the right information about how to manage the anxiety brought on by the illness, they can confront the issues, alter their perspective of them, develop self-control, and ultimately lessen their anxiety (Chinkov & Holt, 2016).

Emotional Dysregulation

A mental health disorder called emotional dysregulation (ED) makes it challenging to regulate feelings and responses. ED sufferers may experience extended, strong emotional reactions that are out of proportion to the circumstances (Mossini, 2024). Childhood trauma, mental health conditions, and brain damage are some of the causes of emotional dysregulation. People with emotional dysregulation can benefit from life skills training since it teaches them how to recognize and control their emotions as well as build resilience. Additionally, life skills training can help people develop their communication and problem-solving abilities as well as learn how to handle stress

Generalized Anxiety Disorder

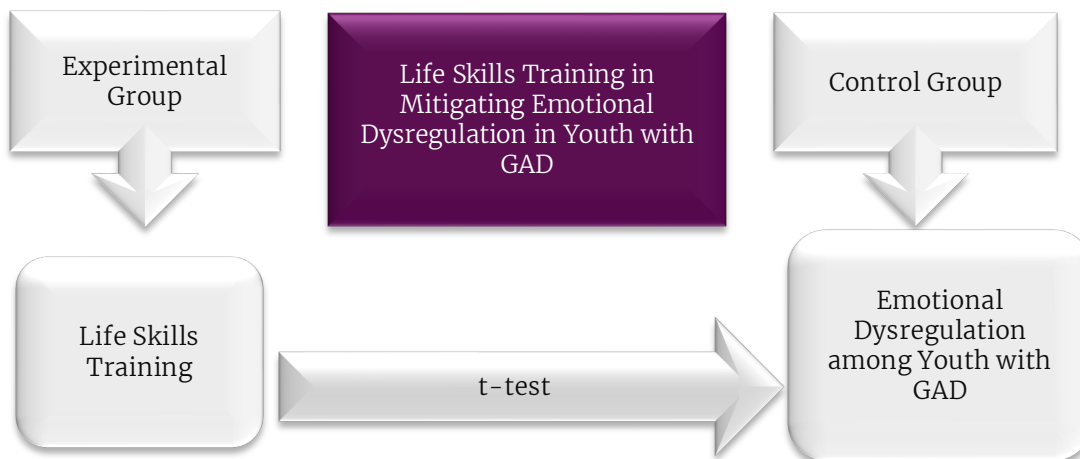
The hallmark of generalized anxiety disorder (GAD) is excessive and ongoing worry about a variety of topics. In addition to anticipating catastrophe, people with GAD may worry excessively about their finances, health, families, jobs, or other matters. It's hard for people with GAD to control their worry. They might anticipate the worst even when there isn't any evident cause for anxiety, or they might worry more than is reasonable about actual events (Hasanvand, 2015).

It has been estimated that between 2.4% and 10.8% of children and adolescents in the community suffer from generalized anxiety disorder (GAD). The incidence of young people referred to clinics varies from 2.8% to 15%. Poor academic performance, social issues, substance addiction, and suicidal thoughts have all been linked to GAD (Hedayati, 2019).

Conceptual Model

Figure 1

Conceptual Model



Hypotheses

H₁: Adolescents with GAD who undergo life skills training will exhibit significant improvements in emotional regulation in the experimental group as compared to those in the control group.

H₂: Life skills training has a significant influence on males and females with GAD compared to those in the control group.

Research Methodology

Research Design

Positivism Research philosophy was used. Therefore, the researcher used a quasi-experimental pre-test and post-test design. A study technique called quasi-experimental design assesses the results of an intervention without using random assignment (Ross & Morrison, 2013). There were forty (40) adolescents (16–19 years old) diagnosed with GAD included in the study from Sarhad Hospital for Psychiatric Diseases, Peshawar, and The Center for Psychotherapy and Psychiatry, Peshawar. The sample was divided into two groups, the control and experimental group, on the basis of a pretest. Both groups contained an equal number of participants. Pretest and posttest were designed.



Inclusion Criteria

The following criteria were adopted for the inclusion of participants.

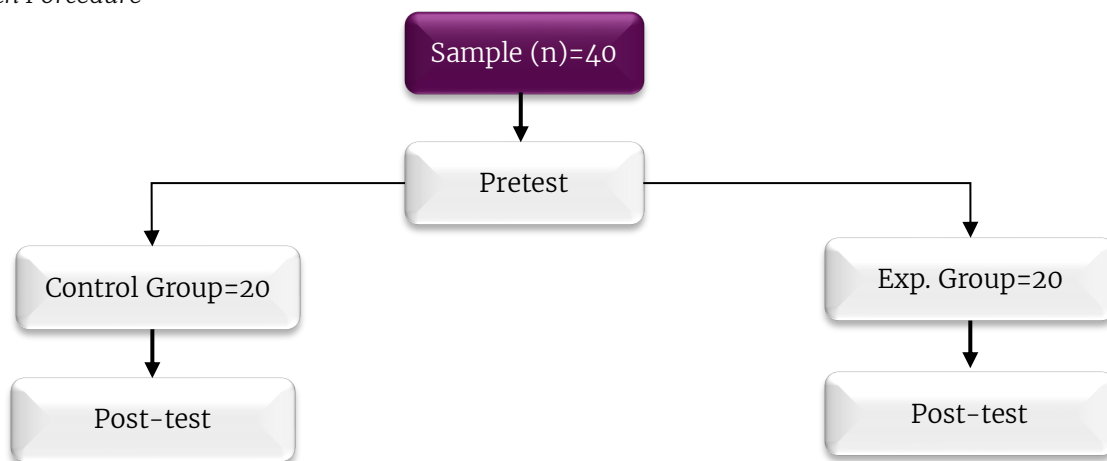
1. Adolescents aged 16–19 years diagnosed with GAD using DSM–5 criteria.
2. Willingness to participate in the intervention.
3. Availability to attend the full training program.

The Procedure of the Study

Participants were included from Sarhad Hospital for Psychiatric Diseases and the Center for Psychotherapy and Psychiatry, Peshawar. Initial screening was conducted using the GAD–7 scale and an emotional dysregulation measure. Baseline assessments were conducted for both groups, measuring emotional dysregulation, social skills, and cognitive functioning. Intervention for the Experimental Group: The life skills training was delivered over 1 month (3 sessions per week, 60 minutes each) by trained facilitators. The control group had not received any intervention but participated in pre- and post-assessments, whereas the experimental group received life skills training. After 1 month, both groups underwent the same assessments conducted at baseline to measure changes in emotional regulation and other variables. A 4-week follow-up assessment was conducted to evaluate the sustainability of the intervention's impact.

Figure 2

Research Porcedure



Data Analysis

An independent sample t-test was used with Cohen's d effect size.

Result and Discussion

Table 1

Data Normality of GAD–7

	Kolmogorov–Smirnov ^a			Shapiro–Wilk		
	Statistic	df	Sig.	Statistic	df	Sig.
GAD–7 Scale	.029	39	.200*	.996	39	.110

Table 1 indicates the data normality of the instrument which depicts that the value of Kolmogorov–Smirnov ($p=.2000>.05$) and Shapiro–Wilk test ($p=.110>.05$) was found significant. This data was found to be normally distributed.

Table 2

Showing Mean difference in Generalized anxiety disorder (GAD) Experimental Group (EG) and Control Group (CG) before intervention

Group	n	Mean	SD	cal	Sig.	Effect-Size
CG	20	3.23	.431	2.19	.287	0.03
EG	20	3.19	.659			

Table 2 reveals the mean difference in Generalized anxiety disorder (GAD) Experimental Group (EG) and Control Group (CG) before intervention. The result indicates that the Mean score of CG and EG was estimated at 3.23 and 3.19, respectively. The value of $p=.287 >.05$ which indicates there is no difference in the GAD before intervention. In other words, both groups had issues regarding GAD.

Table 3

Showing Mean difference in Generalized anxiety disorder (GAD) Experimental Group (EG) and Control Group (CG) after intervention

Group	n	Mean	SD	t _{cal}	Sig.	Effect-Size
CG	20	3.17	.528	1.92	.000	0.82
EG	20	0.98	.821			

Table 3 reveals the mean difference in the Generalized anxiety disorder (GAD) Experimental Group (EG) and Control Group (CG) after the intervention. The result indicates that the Mean score of CG and EG was estimated at 3.17 and 0.98, respectively. The value of $p=.000 <.05$, indicates there is a significant difference in the GAD after the intervention. In other words, a reduction of GAD was found in EG after life skills training. The value of Cohen's d effect size (.82) indicates that there is a large difference between EG and CG.

Table 4

Showing Mean difference in Generalized anxiety disorder (GAD) Experimental Group (EG) and Control Group (CG) after intervention among male

Group	N	Mean	SD	t _{cal}	Sig.	Effect-Size
CG	10	2.91	.431	0.23	.000	0.87
EG	10	0.71	.782			

Table 4 reveals the mean difference in the Generalized anxiety disorder (GAD) Experimental Group (EG) and Control Group (CG) after intervention among males. The result indicates that the Mean score of CG and EG was estimated at 2.91 and 0.71, respectively. The value of $p=.000 <.05$ indicates there is a significant difference in the GAD after intervention among males. In other words, a reduction of GAD was found in EG among males after life skills training. The value of Cohen's d effect size (.87) indicates that there is a large difference between EG and CG.

Table 5

Showing Mean difference in Generalized anxiety disorder (GAD) Experimental Group (EG) and Control Group (CG) after intervention among female

Group	N	Mean	SD	t _{cal}	Sig.	Effect-Size
CG	10	3.07	.488	1.82	.000	0.81
EG	10	0.83	.689			

Table 5 reveals the mean difference in the Generalized anxiety disorder (GAD) Experimental Group (EG) and Control Group (CG) after intervention among females. The result indicates that the Mean score of CG and EG was estimated at 3.07 and 0.83, respectively. The value of $p=.000 <.05$ indicates there is a significant difference in the GAD after intervention among females. In other words, a reduction of GAD was found in EG among females after life skills training. The value of Cohen's d effect size (.81) indicates that there is a large difference between EG and CG.

Discussion

The result of the study reveals that there is a significant difference in the GAD after intervention. In other words, a reduction of GAD was found in EG after life skills training. A similar result was found by Mohamed et al. (2023) and Navarro-Haro et al. (2019). They found that a life skills intervention can improve



adolescents' mental health. In order to effectively address the mental well-being of teenagers by reducing stress, anxiety, and depression, it cites a number of experimental and quasi-experimental studies that assessed life skills programs. In nearly every study, the strategies employed by teenagers to learn knowledge and skills through life skills programs and subsequently to develop positive attitudes and behaviors were described.

Certain life skills were the focus of life skills education, depending on the context. It took into account the psychosocial competencies and interpersonal skills that support participants in making wise choices, resolving issues, thinking critically and creatively, communicating clearly, forming wholesome relationships, empathizing with others, and coping with the challenges of leading healthy and fruitful lives (Winarsunu et al., [2023](#)).

Conclusion

Swaroop's life skills framework offers a comprehensive approach to mitigating emotional dysregulation in adolescents with GAD. By fostering social, cognitive, and emotional competencies, this intervention equips youth with the tools to navigate their challenges effectively, reduce anxiety, and improve their overall quality of life. The study aims to provide evidence-based support for integrating life skills training into mental health interventions for adolescents with GAD, with implications for broader educational and clinical practices.

Recommendations

1. Attention must be paid to raising awareness among teenagers, parents, educators, and the general public on the value of life skills. Policymakers, qualified experts, and facilitators are needed.
2. Including psychosocial training in relapse prevention and rehabilitation programs for children with GAD, with an emphasis on efficient emotion regulation.
3. Future researchers may conduct similar studies at the school level.

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