

## Life skills education for social competence of primary school children

■ SHANTI BALDA AND USHA TURAN

Received: 25.05.2012; Revised: 20.08.2012; Accepted: 12.10.2012

See end of the paper for authors' affiliations

Correspondence to :

**SHANTI BALDA**  
Department of Human  
Development and Family  
Studies, College of Home  
Science, C.C.S. Haryana  
Agricultural University, HISAR  
(HARYANA) INDIA  
Email: sbalda@rediffmail.com

■ **ABSTRACT** : Life skills are the abilities for adaptive and positive behaviour that enable children to deal effectively with the demands and challenges of everyday life. Life skills are a group of psychosocial competencies and interpersonal skills that include decision making, problems solving, critical and creative thinking, effective communication and interpersonal relationships, coping with emotions and stress, self-awareness and empathy. All these skills are interrelated. Life skills develop on a continuous basis and are used throughout the life. Childhood is considered as a critical period in the life span of an individual, whatever is taught and learnt during this stage has long lasting impact in one's life. In any community, children face the odds in their life from the early years and throughout their life, hence, it is important to develop healthy life skills from the early years in order to develop social competence through interpersonal problem solving skills. The present study was undertaken in Hisar to promote interpersonal problem solving skills of 6-8 year old children with the objective to make them competent from the early years so that they can solve their day to day problems competently through critical and creative thinking and communicate effectively to develop healthy interpersonal relations and act as a productive member of the society when they are grown up. Intervention programme was provided to these children for a period of one month to promote their interpersonal problem solving skills. Results indicated that after exposure to intervention programme, there was significant improvement in problem solving skills of children.

■ **KEY WORDS** : Life skill education, Social competence, Primary school children

■ **HOW TO CITE THIS PAPER** : Balda, Shanti and Turan, Usha (2012). Life skills education for social competence of primary school children. *Asian J. Home Sci.*, 7 (2): 328-335.

The importance of learning life skills in childhood years is often over looked by people. However, life skills need to be taught early in children's life for them to become all-rounded educated persons. Without life skills education, children will not be able to apply what they have learned in school to their everyday life. Life skills are taught from the time a child is born, teaching these skills must continue throughout their academic learning experiences. During elementary school years most important life skills that can be developed are social skills. Teaching children how to share, wait for their turn, to be polite to others, and well-mannered are skills that can be developed during these years of education. Respecting their peers, playing together and working together in groups and helping one another are all life skills that children are taught in school and at home; however, these skills will help them throughout their life-span.

(Tyrer, 2010).

According to WHO, life skills are the abilities for adaptive and positive behaviour, that help individuals to deal efficiently with the demands and challenges of everyday life. Every school should provide comprehensive, integrated life skills education that can enable young children to make healthy choices and adopt healthy behaviour in their lives. The life skills cover a broad range of skills and include core skills and additional areas that can be addressed in a culturally sensitive manner. As described by World Health Organization core skills that are developed include decision making, problem solving, creative thinking, critical thinking, effective communication, interpersonal relationship skills, self-awareness, empathy, coping with emotions, and coping with stress. The additional areas in which a culturally sensitive approach is needed include goal setting, assertiveness, and negotiation skills.

In any social and cultural setting, social competence is achieved through the skills which have been described as life skills. A socially competent child is good in social problem solving skills. Social problem solving skills are the cognitive strategies that children use to deal with interpersonal situations or problems to achieve their social goals. In every day life children face a range of social dilemmas and they use different strategies to resolve these issues. Zahn-Waxler *et al.* (1994) reported that by the time children are of school age, they have a range of strategies in their repertoire, both positive and negative, for resolving social dilemmas and issues.

The social problem solving skills of young children are usually examined through the use of hypothetical reflective reasoning. During interviews, children are presented with hypothetical situations to assess their knowledge of “appropriate” strategies. Hypothetical scenarios have been used to examine how children achieve a number of social goals. These include object acquisition (e.g., Balda, 1997; Chen and Rubin, 1992; Malik *et al.*, 2006; Punia *et al.*, 2005; Shure and Spivack, 1981), friendship initiation (Balda, 1997; Malik *et al.*, 2006; Rubin and Krasnor, 1986) and avoiding anger (Balda 1997; Punia *et al.*, 2005; Shure and Spivack, 1981). Children’s responses to hypothetical dilemmas provide information about how children solve their interpersonal problems.

During childhood years, caregivers give high priority to enhancing young children’s social development. Research indicates that unless children achieve minimum social competence by about the age of six years, they have a high probability of being at risk throughout their life. Peer relationships contribute a great deal to both social and cognitive development and to the effectiveness with which we function as adults. The best childhood predictor of adult adaptation is not IQ, school grades, or classroom behavior but, rather the adequacy with which the child gets along with other children. Social skills are considered as most important life skills. Hartup (1992) reported that children who are generally disliked, who are aggressive and disruptive, who are unable to sustain close relationships with other children, and who cannot create a place for themselves in the peer group are “at risk”. The risks are many - poor mental health, dropping out of school, low achievement and other school difficulties, poor employment history, and so forth. Mental health and education professionals generally agree that it is essential to begin developing prosocial attitudes and behaviours in children at a very young age because aggression in young children that is not remedied nearly always leads to later acts of delinquency. Given the life-long consequences, life skills for social relationships should be given high priority.

The lack of social problem solving skills including critical thinking, alternative thinking and consequential thinking affect the way children handle problems that are encountered with peers and adults. Children who are poor problem solvers experience frustration and failure when problems develop with

their caregivers including parents and teachers. Caregivers also experience a sense of failure and frustration when they try to deal with children as they face these problems. This leads to unhealthy child-caregiver relationship. Balda (1997) has reported that parents who tell children what to do or who offer advice to solve the problem are not teaching their children to think. Instead they are doing the thinking for the child. In a cross-cultural study she found that as compared to Australian parents and teachers, Indian parents and teachers more often provided solutions to children’s problem when children approached them for help. In such instances children do not get opportunity to solve their problems on their own, instead they become dependent on care givers for the solutions of their problems.

Inter personal cognitive problem solving (ICPS) skills are significantly correlated with high-risk behaviours as measured from preschool through grade 6 in a longitudinal research (Spivack *et al.*, 1976). It was found that high risk behaviour predicted more serious outcomes as violence, substance abuse, unwanted teen pregnancy, depression and some forms of psychopathology. These high-risk behaviours include physical and verbal aggression, inability to wait and cope with frustration, lack of empathy, social withdrawal and poor peer relations (Parker and Asher, 1987). Balda in her studies (Balda, 2002a; Balda, 2002b; Balda and Negi, 2001; Balda *et al.*, 2002; Balda *et al.*, 2003; Negi and Balda, 2002; Negi *et al.*, 2003; Negi *et al.*, 2004) has reported that poor problem solving skills are predictors of sociometric status of children and behavioural problems.

Social problem solving skills have important implications for socio-emotional adjustment and interpersonal social competence. Social problem solving approach has potential to reduce, even prevent more severe behavioural dysfunction (Spivack and Shure, 1989). It is more important “how” children think, that is, the “process” of thinking or problem solving and not “what” to think (Shure, 2002). Children from an early age can, or learn to, think for themselves and solve every day problems. Those who can do this are likely to be adjusted in their later life than those who cannot.

The present study was undertaken to promote social competence of 6 to 8 years old primary school children through life skills education.

## ■ RESEARCH METHODS

### Participants:

One hundred children, 50 girls and 50 boys, were selected from two schools of Hisar city. The age group of children who participated in this study ranged from 6 to 8 years. Mean age of children was 7 years and 1 month.

### Measures of children’s social problem solving skills:

To assess the children’s social problem solving skills, a number of stories were selected from three published research

measures. The particular stories selected were considered to represent common experiences for children in every day life.

#### **The social problem solving test (SPST):**

Four stories from the Social Problem Solving Test-Revised developed by Rubin (1988) were used to assess children's social problem solving skills in hypothetical situations with their peers. Two stories were concerned with Object Acquisition and two stories were concerned with Friendship Initiation. The characters in the Object Acquisition stories wish to gain access to a toy or material in another child's possession; in the Friendship Initiation stories the characters wish to meet and become friendly with an unfamiliar child. The stories aim to assess children's repertoire of cognitive strategies for obtaining access to an object and for making friendship with an unfamiliar child. Picture cards were used to depict the stories.

#### **Preschool interpersonal problem solving (PIPS) test:**

Two stories from The Pre-school Interpersonal Problem Solving Test developed by Shure and Spivack (1974a) were used to measure the children's social problem solving skills for avoiding the anger of their mothers. The stories aim to assess children's repertoire of cognitive strategies for Avoiding Anger of an adult after some damage to property. Pictorial cards were used to depict each story.

#### **What happens next game (WHNG):**

This test was developed by Shure and Spivack (1974b). This measure was used to assess children's consequential thinking abilities. Four situations were selected, two situations involving a child grabbing a toy from another child, and two in which a child has taken something from an adult without asking permission. The child being tested was asked to tell what might happen next. Using stick figures and pictures of toys, the procedure is similar to that of PIPS test, in that each new elicited consequence is followed by variations of the same interpersonal acts. Consequences were elicited by describing a story root to the child being tested. As in the PIPS test, girls' names were used for girl subjects and boys' names were used for boys subjects.

#### **Administration and examples of social problem solving tasks:**

Children were individually interviewed on the social problem solving tasks. Before conducting interviews, the investigator visited schools, where she was introduced to the children by class teacher. Children were told that she would visit the school for a few days to tell them stories. The investigator built rapport with each child, before administration of the measures, by brief conversations with the child about things they enjoyed doing at home and in the school.

The child was shown a picture card and a story was read. The child being interviewed was asked what the story

character could do or say in each situation to accomplish the desired goal and then prompted to give a second response. The sex of the children in the stories was adapted to match that of the child being interviewed. In each story, the characters were given different names to maintain interest and variety. Care was taken that a story character's name was not the same as that of the child being interviewed.

All interviews with children were conducted in a quiet area of their school. Responses were recorded on interview sheets. If children did not respond, a maximum of two verbal probes were used.

#### **Pilot-test of social problem-solving measures:**

The SPST, PIPS and the WHNG stories were pilot-tested. Four children were interviewed and their responses were recorded verbatim on response sheets and coded. Their understanding of the tasks was considered to be appropriate.

#### **Life skills education through intervention programme for social problem solving:**

Programme developed by Punia and Balda (2002) was used to promote social competence through interpersonal problem solving skills. Emphasis was laid on alternative thinking and consequential thinking while dealing with interpersonal problems. The programme consisted of series of lessons in the form of games. Intervention was provided to children for a period of one month.

After a gap of one month, children were post-tested for interpersonal problem solving skills to examine the impact of intervention package on social competence.

Life skills education intervention programme was divided into two stages. In the first stage, children were taught pre-requisite skills necessary for problem solving. The second stage of the programme developed social problem solving skills directly. Children were taught to think of multiple solutions. They were encouraged to use creative problem solving skills in relation to behavioural or interpersonal issues. All children of the class were encouraged to think of different alternatives. Brain storming sessions were conducted with children. All the alternatives were written on the blackboard. When children repeated any one of the earlier offered strategy (e.g. hit him, kick him), the researcher responded, "hitting and kicking are kind of the same because they are both hurting. Can you think something different from hurting"? To avoid focus on forceful solutions, repetitions of non-forceful strategies such as "give him chocolate" and "give him candy" were also classified as "giving something". Children were asked to think of something different from giving something.

Interpersonal social problem solving skills were also reinforced during the school hours by teachers as they did for pre-requisite skill concepts. Consistent with formal structured lesson-games, the teacher guided children to see the daily real life problems, helped how they and other feel

about what happened, guided them to critically evaluate their action and encouraged them to think of other ways to solve the problem through creative thinking.

#### Scoring for children's social problem solving tasks:

For the ten stories (two representing Object Acquisition; two stories representing Friendship Initiation; two stories for Avoiding Anger; and four for consequential thinking) the following procedure was used to categorise and score the responses.

#### Categorisation of social problem solving strategies:

Children's responses to the social problem solving stories were categorised. Within any response, for the three task areas, Object Acquisition, Friendship Initiation and Avoiding Anger, children could identify more than one strategy and these were all categorised.

In the present research study, for Object Acquisition tasks, 'agonistic' category is described as 'forceful strategy'. Other categories including 'prosocial', 'authority aid', 'trade-bribe', and 'manipulative' were combined in 'non-forceful total' category, whereas, 'authority aid', 'trade-bribe', and 'manipulative' were combined under 'non-forceful other' category. For Avoiding Anger tasks, 'hide', 'blame other' and 'hide' object categories for Avoiding Anger tasks were combined in one category 'hide-blame other-hide object' category.

Categories of social problem-solving strategies		
Object acquisition	Friendship initiation	Avoiding anger
Prosocial	Conversation openers	Apology/truth
Agonistic	Indirect initiation	Replace/repair
Authority aid	Direct initiation	Manipulate affect
Trade-bribe	Prosocial/complimentary	Hide
Manipulative	Invitation	Blame other
	Adult intervention	Hide object
	Non-normative	Authority aid

#### Scores obtained from the categorised responses:

From the categories of responses, scores were developed for each child for relevancy of strategies, within-story flexibility in use of strategies, total scores across stories for strategy use, and proportional use of strategies within task areas.

#### Relevancy scores:

The relevancy scores represented a rating of whether a given strategy could solve the posed social problem. A score of 1 was given for a relevant solution. A score of 0 was given for an irrelevant and repeated response. Relevancy scores were obtained for the three task areas - Object Acquisition, Friendship Initiation, and Avoiding Anger.

#### Within-story flexibility scores:

Flexibility scores involved a comparison of the categories found in Response 2 with those found in Response 1 for any given story. Flexibility was computed by giving a score of 0 if the child failed to offer a response to the interviewer's probe following the initial response; a score of 1 was given if the second response involved only the same category as the first response; a score of 2 was given when there were modifications of the first response, when one or more new categories had been added in Response 2; and a score of 3 was given for a completely novel response in Response 2. Within-story flexibility scores were obtained for - Object Acquisition, Friendship Initiation, and Avoiding Anger.

#### Total scores:

Total scores were obtained for:

- Total number of categories used within responses across all six stories.
- The number of different categories within responses across all six stories (two or more same response categories in a specific task area were counted only once).
- Total relevancy and total within-story flexibility scores
- Total number of different consequences. The number of different consequences in the four stories was combined.

#### Proportional scores:

Proportional scores in the use of social problem solving strategies for the different task areas were computed in order to compare the relative use of a particular category by a child, in proportion to the total number of different categories used by the child within an area.

## RESEARCH FINDINGS AND DISCUSSION

The results obtained from the present investigation have been discussed under following heads:

#### Pre- and post-testing comparison of social problem solving scores of children:

Pre and post-testing performance of children in social problem solving task areas was compared using paired-t tests. Pre-and post-testing mean scores, mean difference and paired-t values for Object Acquisition, Friendship Initiation, and Avoiding Anger tasks are presented in Table 1.

Table 1 clearly depicts that there were significant differences in pre and post-testing performance of children. For object acquisition, friendship initiation and avoiding anger tasks, at post-testing stage after intervention, mean scores of relevant strategies and with-in story flexibility were significantly greater than pre-testing mean scores.

As presented in Table 1, for total task areas, post-testing mean scores of total number of categories of strategies and

different categories of strategies were significantly greater than pre-testing mean scores. Also, after exposure to educational intervention programme, children suggested greater number of relevant and flexible strategies than before intervention.

Total number of consequences suggested at pre and post-testing stages were also computed and compared using paired-t test. As shown in Table 1, after exposure to intervention programme, children suggested greater number of consequences at post-testing stage than at pre-testing stage.

Results of the present study clearly showed that there was significant improvement in social problem solving skills of children at post-testing stage. For all the three social problem solving areas, Object Acquisition, Friendship Initiation and Avoiding Anger, post-testing mean scores of total number of categories of strategies and number of different categories of strategies were significantly greater than pre-testing mean scores. Also, after training, children suggested more relevant and flexible alternatives. Consequential thinking of children also improved significantly after exposure to intervention programme.

#### Pre- and post-testing comparison of social problem solving strategies suggested by children:

Pre and post-testing proportional use of strategies by children was also compared using paired t-test. Pre and post-testing proportional mean scores, mean difference and paired-t values are presented in Table 2 for all the three task areas.

As presented in Table 2, for Object Acquisition tasks, post-testing mean proportions of 'non-forceful total' and 'non-forceful prosocial' categories of strategies suggested by children were significantly greater than pre-testing mean proportions. After intervention, children suggested lesser proportion of 'forceful' strategies than before intervention. Also, children suggested lesser proportion of 'non-forceful

other' strategies at post-testing stage than at pre-testing stage.

For Friendship Initiation tasks, after intervention at post-testing stage, children suggested greater proportions of 'prosocial' and 'invitation' categories of strategies than before intervention. On the other hand at post-testing stage, children suggested significantly lesser proportions of 'indirect initiation' strategies in comparison to pre-testing stage. Although not significant, similar trend was observed for 'adult intervention' and 'non-normative' strategies.

For Avoiding Anger tasks, after exposure to intervention programme, children suggested significantly greater proportions of 'apology-truth' alternatives as compared to pre-testing stage. Also, at post-testing stage children suggested significantly more proportions of 'replace-repair' and lesser proportions of 'hide-blame other-hide object' strategies as compared to pre-testing scores.

It can be concluded from these results that after exposure to life skills education programme, children suggested significantly greater proportions of 'non-forceful' strategies, particularly 'prosocial' strategies and significantly lesser proportions of 'forceful' strategies for obtaining access to an object. For initiating friendship with an unfamiliar child, after training programme children were more likely to use 'prosocial' and 'invitation' strategies and less likely to use 'indirect initiation' strategies. Children were more likely to apologize and admit their mistake to avoid maternal anger after having done some damage to property. Also, they suggested 'replace-repair' strategies more often and 'blame other, hide, hide object' less often at post-testing stage.

This research study clearly indicates that at post-testing stage, after exposure to life skills education intervention programme, children suggested significantly greater number of strategies and different categories of strategies in all the three social problem solving task areas. Children suggested more relevant and flexible alternatives to solve their interpersonal social problems. Also, children were able to think

**Table 1 : Pre and post-testing comparison of social problem solving scores**

Measured variables	Pre-testing	Post-testing	Difference	Paired-t values
	Mean $\pm$ SD	Mean $\pm$ SD	Mean $\pm$ SD	
OA relevancy score	3.10 $\pm$ 0.76	3.74 $\pm$ 0.49	0.64 $\pm$ 0.54	11.82*
OA within-story flexibility	2.97 $\pm$ 0.80	4.31 $\pm$ 0.82	1.34 $\pm$ 0.50	26.97*
FI relevancy score	3.00 $\pm$ 0.77	3.70 $\pm$ 0.46	0.70 $\pm$ 0.61	11.45*
FI within-story flexibility	2.83 $\pm$ 0.73	4.16 $\pm$ 0.72	1.33 $\pm$ 0.55	24.12*
AA relevancy score	3.06 $\pm$ 0.66	3.68 $\pm$ 0.47	0.62 $\pm$ 0.56	10.98*
AA within-story flexibility	2.75 $\pm$ 0.67	4.27 $\pm$ 0.62	1.52 $\pm$ 0.72	21.19*
Total number of categories of strategies	16.72 $\pm$ 3.29	18.97 $\pm$ 3.89	2.25 $\pm$ 0.95	19.78*
Total number of different categories of strategies	6.45 $\pm$ 2.27	9.37 $\pm$ 2.36	2.92 $\pm$ 1.09	22.13*
Total relevancy score	9.16 $\pm$ 1.79	11.12 $\pm$ 0.99	1.96 $\pm$ 1.15	16.49*
Total within-story flexibility score	8.55 $\pm$ 1.77	12.74 $\pm$ 1.73	4.19 $\pm$ 1.22	34.34*
Total number of different consequences	1.36 $\pm$ 0.67	3.43 $\pm$ 0.56	2.07 $\pm$ 0.69	21.43*

Note. Means differ significantly at \* $p < .05$ ; OA (Object acquisition); FI (Friendship initiation); AA (Avoiding anger)

of different consequences for the strategies they used to solve their interpersonal problems.

Results described in this study clearly show that after exposure to intervention programme for life skills education, there was significant increase in quantitative scores of children for social problem solving tasks. These results get support from the previous research. Shure and Spivack (1978, 1979, 1981, 1982), Shure (1993, 1996, 2002) and Spivack and Shure (1974, 1989) have done a pioneer work on intervention programme to help children to improve their interpersonal cognitive problem solving skills. These authors reported that after intervention alternative and consequential thinking of children improved significantly. The present research also gets support from the findings of Fies and Simons (1985) indicating that the trained children were better able to problem solve after training than were those who did not receive any training.

In India, Punia (2002) and Punia *et al.* (2003, 2004a, 2004b, 2004c, 2005) have conducted research with normal and aberrant pre-school urban and rural children. Training was imparted to these children to enhance their social problem solving skills. Results revealed that after undergoing social competence training, social problem solving skills of normal and aberrant preschool children improved significantly. In a recent study, Punia *et al.* (2010) suggested that early intervention programme for social problem solving during pre-school years is very important to help children to develop cognitive repertoire of different strategies for alternative solutions to a problem, and to weigh the consequences of any strategy or solution before putting that strategy into action. In this way children can be prevented from developing maladaptive behaviour which has

long-lasting negative impact on their behaviour, personality as well as on development of social relations.

Malik (2003) and Malik *et al.* (2005a, 2005b, 2010) have conducted research on social problem solving skills of primary school children. Results revealed that social problem solving training significantly improved the thought and behaviour of socially incompetent children through problem solving techniques. Educational training helped children to think of different, relevant, and flexible alternatives to solve interpersonal social dilemmas. These authors suggested that the early intervention programme for interpersonal social problem solving during childhood years can help children to think alternative solutions to a problem, and to look at the possible consequences of any solution. Thus, early identification and intervention helps in primary prevention of maladaptive and behavioural problems.

With regard to quality of strategy usage, it was found that after intervention, children suggested greater proportions of non-forceful and less proportions of forceful strategies as compared to pre-testing stage for obtaining access to an object in another child's possession. Although, in the present research emphasis was laid only to enhance alternative and consequential thinking, however, after receiving training there was significant increase in proportions of non-forceful strategies, particularly prosocial strategies and decrease in proportions of forceful strategies suggested by children. So, it can be interpreted from these results that greater number of alternatives in cognitive repertoire and ability to examine the consequences of their actions aid children to suggest non-forceful alternative to solve their interpersonal conflicts with

**Table 2 : Pre and post-testing comparison of SPS strategies suggested by children**

Measured variables	Pre-testing	Post-testing	Mean difference	Paired-t values
<b>Object acquisition tasks</b>				
Total forceful	0.25	0.18	-0.07	4.39*
Total non-forceful	0.75	0.82	0.07	4.35*
Non-forceful prosocial	0.53	0.64	0.11	8.00*
Non-forceful other	0.22	0.18	-0.04	4.58*
<b>Friendship initiation tasks</b>				
Conversation openers	0.49	0.48	-0.01	0.89
Indirect initiation	0.06	0.01	-0.05	12.32*
Direct initiation	0.22	0.21	-0.01	0.98
Prosocial	0.14	0.20	0.06	7.68*
Invitation	0.06	0.10	0.04	5.47*
Adult intervention	0.01	0.00	-0.01	1.01
Non-normative	0.02	0.00	-0.02	1.99
<b>Avoiding anger tasks</b>				
Apology-truth	0.67	0.75	0.08	5.23*
Affect-manipulate	0.11	0.10	-0.01	1.68
Replace-repair	0.10	0.13	-0.03	4.12*
Blame other-hide-hide object	0.12	0.02	-0.10	18.43*

\* indicates significance of value at  $P < 0.05$

their peers. Similarly for initiating friendship with an unfamiliar child, life skills training helped children to initiate relationship with prosocial and invitation strategies. Finally, training helped children to boost their confidence so that they could speak truth and apologize after committing some mistake or damaging the property. These results get support from the findings of Punia (2002) and Malik (2003). Buie and Jennifer (1997) found that instruction in the problem solving strategies increased children's frequency of prosocial solutions and decreased the frequency of aggressive solution in interpersonal conflicts. In a recent study, Lefler *et al.* (2009) evaluated a group-administered, manualized social skills intervention programme on children in the age range of 7 to 13 years who had peer relationship difficulties. The results provide support for social skills intervention. There was significant improvement in social skills of children after intervention.

### Conclusion:

In conclusion, this research has made a significant contribution in life skills education, particularly for social problem solving skills, of primary school children. Social problem solving training programme helped children to improve their social competence. The findings of the present study support the previous research conducted across cultures. It is widely accepted that during childhood years children are required to develop healthy social relationships with peers and adults. Therefore, it becomes very important for them to learn to cope with the problems and demands of social interactions. Life skills education through intervention programme during childhood years can help children to think of alternative solutions to a problem, and to look at the possible consequences of any solution. Parents and teachers should closely observe behaviour of children to identify poor social problem solvers. Once these children are identified, then parents and teachers can work together to promote their social behaviour and interpersonal problem solving skills with life skills education programme, behaviour modification techniques or social skills training. Through these programmes children are helped to develop prosocial behaviour and interpersonal social problem solving skills including alternative and consequential thinking. In order to have successful impact, parents and teachers need to have understanding of behavioural patterns of poor problem solvers, neglected, withdrawn and peer rejected children so that individual attention is provided to each child. Parents and teachers need to express appropriate behaviour while interacting with young children since they are role models for young children.

Life skills education programmes can prevent and reduce maladaptive and high-risk behaviour which has long-term negative impact on psychological health and well being of individuals. Thus, early identification, life skills education and

intervention help in primary prevention of maladaptive, socio-emotional and behavioural problems. Childhood being a critical and sensitive period in the life-span need to be handled with care since whatever is experienced, taught, and learnt during this period has life long impact.

Authors' affiliations:

USHA TURAN, CIS Kanya Mahavidhyala, Fatehpur Pundri, KAITHAL (HARYANA) INDIA

### ■ REFERENCES

- Balda, S.** (1997). *Socialisation experiences and preschool-aged children's social problem solving skills in Australia and India: A cross-cultural study*. Ph.D. Thesis. Centre for Applied Studies in Early Childhood, Queensland University of Technology, Brisbane, Queensland, AUSTRALIA.
- Balda, S.** (2002a). Social behaviour and interpersonal problem-solving skills of Australian children. *J. Soc. Sci.*, **6** : 141-144.
- Balda, S.** (2002b). Social behaviour, social-cognitive scores and peer ratings in Australian children. *J. Human Ecol.*, **13** : 279-282.
- Balda, S.** and Negi, M. (2001). Peer ratings and social problem solving skills of 8-9 year old children. *J. Soc. Sci.*, **5**: 231-233.
- Balda, S., Punia, S.** and Punia, D. (2002). Peer rating scale: A reliable sociometric measure for preschool children. *J. Psychometry*, **15**: 21-28.
- Balda, S., Punia, S.** and Punia, D. (2003). Correlates of sociometric status in five to six year old rural children. *J. Family Ecol.*, **5**: 93-95.
- Buie, H.** and Jennifer, D. (1997). Effects of a problem - solving strategy on the alternative solutions of preschool children. *Dissertation Abstracts Internat. Section - A: Humanities & Soc. Sci.*, **58**: 2157.
- Chen, X.** and Rubin, K.H. (1992). Correlates of peer acceptance in a Chinese sample of six-year-olds. *Internat. J. Behavioral Development*, **15**: 259-273.
- Feis, C.L.** and Simons, C. (1985). Training pre-school children in interpersonal cognitive problem solving skills: A replication. *Prevention in Human Services*, **3**: 59-70.
- Hartup, W.W.** (1992). Having friends, making friends, and keeping friends: Relationships as educational contexts. Urbana, IL: ERIC Clearinghouse on *Elementary and Early Childhood Education*, E.D. 345 854.
- Lefler, E.K., Hartung, C.M., Scambler, D.J., Page, M.C., Sullivan, M.A., Armendariz, M.L., Isenberg, J.C.** and Warner, M. (2009). Effects of a social skills intervention administered in mixed diagnostic groups for children with peer relationship problems. *A Research-to-Practice Journal for the Early Intervention Field*, **12**: 18-32.
- Malik, S.** (2003). Impact of intervention package on social problem-solving skills of 6 to 8 years old poor social problem solvers. PhD Thesis. Department of Human Development and Family Studies, College of Home Science, C.C.S. HAU, Hisar, HARYANA (INDIA).
- Malik, S., Balda, S.** and Punia, S. (2005a). Promoting social competence of 6-8 years old socially incompetent girls. *J. Soc. Sci.*, **10**: 233-236.

- Malik, S., Balda, S., Punia, S. and Singh, C.K.** (2005b). Impact of interpersonal problem solving training on social competence of 6-8 years old boys. *Behavioural Scientist*, **6**: 129-134.
- Malik, S., Balda, S. and Punia, S.** (2006). Socio-emotional behaviour and social problem solving skills of 6-8 years old children. *J. Soc. Sci.*, **12**: 55-58.
- Malik, S., Balda, S., Punia, S. and Duhan, K.** (2010). Educating aberrant children for social problem solving. *Internat. J. Educ. Sci.*,
- Negi, M. and Balda, S.** (2002). Predictive correlates of sociometric status in 6-8 years old children. *H.A.U. J. Res.*, **32**: 95-99.
- Negi, M., Balda, S. and Malik, P.** (2003). Social behaviour and socio-personal factors associated with the sociometric status of 6-8 years old boys. *Behavioural Scientists*, **4**: 117-120.
- Negi, M., Balda, S. and Malik, P.** (2004). Predictors of sociometric status of 6-8 years old girls. *Indian J. Psychometry & Edu.*, **35**: 68-72.
- Parker, J.G. and Asher, S.R.** (1987). Peer relations and later personal adjustment: Are low-accepted children at risk? *Psychological Bulletin*, **102**: 357-389.
- Punia, D.** (2002). *Intervention programme for interpersonal cognitive problem-solving skills*. Ph.D. Thesis. Department of Human Development and Family Studies, College of Home Science, CCS HAU, Hisar, HARYANA (INDIA).
- Punia, D. and Balda, S.** (2002). *Manual on intervention programme for promoting interpersonal cognitive problem-solving skills*. Department of Human Development and Family Studies, College of Home Science, CCS HAU, Hisar, HARYANA (INDIA).
- Punia, D., Balda, S. and Punia, S.** (2003). Interpersonal cognitive problem-solving skills of average and aberrant children for peer and mother problem tasks. *H.A.U. J. Res.*, **33**: 137-142.
- Punia, D., Balda, S. and Punia, S.** (2004a). Impact of interpersonal problem-solving training on social competence of aberrant children. *Indian J. Soc. Res.*, **45**: 259-264.
- Punia, D., Balda, S. and Punia, S.** (2004b). Promoting interpersonal cognitive problem-solving skills of aberrant children. *Behavioural Scientist*, **5**: 105-110.
- Punia, D., Balda, S. and Punia, S.** (2004c). Training disadvantaged rural children for interpersonal cognitive problem-solving skills. *Studies Tribes & Tribals*, **2**: 9-13.
- Punia, D., Balda, S. and Punia, S.** (2005). Promoting social competence for development of rural girl child. *J. Human Ecol.*, **18**: 173-176.
- Punia, D., Balda, S. and Punia, S.** (2010). Socio-emotional health and social problem-solving skills of preschoolers. *Indian J. Soc. Res.*
- Rubin, K.H.** (1988). *Social Problem Solving Test* (Unpublished manuscript). University of Waterloo, Department of Psychology, Ontario, CANADA.
- Rubin, K.H. and Krasnor, L.R.** (1986). Social-cognitive and social behavioral perspectives on problem solving. In M. Perlmutter (Ed.), *Cognitive perspectives on children's social and behavioural development* (pp. 1-68). Hillsdale, NJ: Lawrence Erlbaum Associates.
- Shure, M.B.** (1993). I can problem solve (ICPS): Interpersonal cognitive problem solving for young children. *Early Child Development & Care*, **96**: 49-64.
- Shure, M.B.** (1996). *Raising a thinking child: Help your child to resolve everyday conflicts and get along with others*. New York: Pocket Books.
- Shure, M.B.** (2002). *How to think, not what to think: A problem-solving approach to resilience and prevention of risk behaviours, Ages 4-12*. Drexel University, Cambridge, Massachusetts.
- Shure, M.B. and Spivack, G.** (1974a). *Preschool interpersonal problem solving test*. Department of Mental Health Sciences, Hahnemann Medical College and Hospital, Philadelphia.
- Shure, M.B. and Spivack, G.** (1974b). *What Happens Next Game*. Department of Mental Health Sciences, Hahnemann Medical College and Hospital, PHILADELPHIA.
- Shure, M.B. and Spivack, G.** (1978). *Problem-solving techniques in Childrearing*. Jossey-Bass Publishers: LONDON, UNITED KINGDOM.
- Shure, M.B. and Spivack, G.** (1979). Interpersonal cognitive problem solving and primary prevention to the nursery and kindergarten children. *J. Clinical Child Psychology*, pp. 89-94.
- Shure, M.B. and Spivack, G.** (1981). The problem-solving approach to adjustment: A competency-building model of primary prevention. *Prevention in Human Services*, **1**: 87-103.
- Shure, M.B. and Spivack, G.** (1982). Interpersonal problem solving in young children: A cognitive approach to prevention. *American J. Community Psychology*, **10**: 341-356.
- Spivack, G. and Shure, M.B.** (1974). *Social adjustment of young children: A cognitive approach to solving real life problems*. SAN FRANCISCO: JOSSEY-BASS.
- Spivack, G. and Shure, M.B.** (1989). Interpersonal Cognitive Problem Solving (ICPS): A Competence-building primary prevention program. *Prevention in Human Services*, **6**: 151-78.
- Spivack, G., Platt, J.J. and Shure, M.B.** (1976). *The problem solving approach to adjustment : A guide to research and intervention*. SAN FRANCISCO: JOSSEY BASS.
- Zahn-Waxler, C., Cole, P.M., Richardson, D.T., Friedman, R.J., Michel, M.K. and Belouad, F.** (1994). Social problem solving in disruptive preschool children: Reactions to hypothetical situations of conflict and distress. *Merrill-Palmer Quarterly*, **40**: 98-119.

#### ■ WEBLIOGRAPHY

**Tyrer, M.** (2010). *Teaching life skills in the elementary school classroom*. Retrieved on October 9, 2010 from <http://www.helium.com/items/958107-teaching-life-skills-in-the-elementary-school-classroom>.

\*\*\*\*\*