

## Original Article

### Effect of life skills education on nurses' happiness

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**Abstract.** Happiness is known as a common goal for all the human being and an effective factor in reducing and coping with stress. Nursing is one of the stressful jobs in healthcare facing various occupational stressors. Life skills education is an intervention used to promote mental health and confront psychosocial injuries. The present study was conducted to examine the effect of life skills education on nurses' happiness at Shahid Sadoughi Hospital in Yazd, 2015. This is a semi-experimental study with pre- and post-test and a control group. A total of 32 volunteer nurses were selected and assigned into control (n=16) and case (n=16) groups. The case group participated in an 8-hour course of life skills education (including effective communication, self-awareness, anger management, and coping with stress). Data collection was carried out using Fordyce happiness scale and demographic questions completed before and one week after the course by both groups and analyzed using chi square and t-test. According to the findings of this study the mean ( $\pm$ SD) of nurses' happiness in the control and case groups were  $131.25 \pm 11.96$  and  $130.44 \pm 12.75$  at the baseline and  $130.06 \pm 28.10$  and  $146.25 \pm 13.70$  one week later, respectively ( $P = 0.038$ ). This difference was not significant in control group ( $P = 0.163$ ). The results of this study indicated that life skills education could significantly increase nurses' happiness and thus it can be used as a beneficial intervention.

**Keywords:** Happiness, nurse, education, life skills

#### Introduction

Happiness is the most basic human issue [1] and an undeniable pillar in every organization [2] leading to socioeconomic development, better task performance, increased production, and decreased costs of abandonment of duty [3]. In addition to self-esteem and appropriate social relations, happy people have greater organizational commitment [4]. Happiness results in higher environmental constancy and lower tension while affecting the staff spirit and making the organizational environment more appealing. When the staff happiness is originated in their organization, they become more devoted to their career and perform their tasks in the best level, thus feeling well for being positive for their organization and searching for more progress and development [5]. Happiness decreases feeling the stress and increases staff ability for work [6].

Research shows that happy people have less occupational burnout and absenteeism and unlikely to leave their jobs [7]. Other benefits mentioned in the studies for happiness include positive self-concept, mental and physical health, emotional balance, increased hope for the future, favorable attitude towards one's self and others,

promotion in social relations, more tendency to help others, better decision making, and more creativity [7]. Nursing is one of the stressful jobs in healthcare where various occupational stressors endanger mental health of the [8]. Evidence shows that depression and anxiety are common problems among nurses [9]. The national survey of the work and health of nurses reported that nurses had higher rate of depression (1 in 10) as compared with their counterparts [10]. Only one seventh of the nurses are happy at work environment [11]. Peterson suggested that hospital nurses became depressed twice as much as ordinary people [5]. On the other hand, nurses' stress has been increasing during the last decade [12]. Mirzaei Tanshizi et al. [13] believed that depression significantly reduced well-being and caused low happiness and life satisfaction, while happiness is one of the factors in decreasing and coping with stress.

Life skills are abilities helping to behave appropriately and wisely in different situations and adaptively communicate with one's self and others. These skills assist in solving the problems with no aggression and feeling happy in life while being successful. Learning these abilities yields mental health promotion, human relations

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enrichment, and increased healthy behaviors. This program is introduced by WHO for promoting mental health and confronting psychosocial injuries which consists of 10 skills [14]. These skills enable individuals to convert their knowledge, value, and attitudes to practical abilities while they are effective in creating and developing abilities such as decision making, motivating, accepting responsibility, effective relationships, self-esteem, problem solving, self-sufficiency, and mental health [15]. This program has shown to be helpful in decreasing anxiety and anger as well as preventing depression, and increasing self-esteem and flexibility against changes [16]. Life skills education increases ability in controlling problems and the person voluntarily calms down [17]. In the present study, based on the nurses' needs, four skills were presented including self-awareness, effective communication, coping with anger, and coping with stress. Nurses are exposed to tensions, stress, and job emotions leading to anger and aggression. Learning coping with emotions, coping with stress, and effective communication can improve inappropriate behaviors.

Considering the importance of this issue, the present study was conducted to examine the effect of life skills education on nurses' happiness at Shahid Sadoughi Hospital in Yazd.

**Materials and Methods**

This is a semi-experimental study with pre- and post-test and a control group. Study population included nurses working at Shahid Sadoughi Hospital. In the pilot study standard deviation of happiness score was calculated as 0.5.

$$\text{Considering } n = \frac{2(Z_{1-\alpha/2} + Z_{1-\beta})^2 \delta^2}{d^2}, \alpha = 0.05, \beta = 0.2,$$

and minimum difference of 0.5 between the intervention and control groups, 16 nurses from both control and experiment groups were selected. Case group participated in an 8-hour course of life skills education (including effective communication, self-awareness, anger management, and coping with stress). Data collection was carried out using Fordyce happiness scale and demographic questions completed before and one week after the course by both groups and analyzed by chi square and t-test.

Inclusion criteria were defined as informed consent of the nurses for participating in the study, attendance in all the sessions of life skills course in the case group, having a bachelor's or master's degree in nursing with minimum 6-month work experience, not attending life skills education course before, having no mental disease and medicines consumption. Those with major stressful problems in life such as recent death of relatives or close friends or divorce were excluded from the study.

Data collection was carried out using Fordyce emotions questionnaire including two parts: 1) demographic variables such as age, sex, work experience, income, and secondary job; 2) 47 questions of Fordyce happiness scale

TABLE 1  
FREQUENCY DISTRIBUTION OF DEMOGRAPHIC CHARACTERISTICS IN CASE AND CONTROL GROUPS

Demographic variables		Group		P
		Control No. (%)	Case No. (%)	
Gender	Male	5 (31.2)	3 (18.8)	0.44
	Female	11 (68.8)	13 (81.2)	
Marital status	Single	2 (12.5)	2 (12.5)	1.00
	Married	14 (87.5)	14 (87.5)	
Education	BS degree	15 (93.8)	15 (93.8)	1.00
	MSc degree	1 (6.2)	1 (6.2)	
Work shift	Morning	1 (6.2)	3 (18.8)	0.2
	Rotating	15 (93.8)	13 (81.2)	
Income*	1 to 2 MT	10 (62.5)	9 (43.8)	0.307
	2 to 3 MT	3 (18.8)	5 (56.3)	
	>3 MT	3 (18.8)	2 (0.0)	
Secondary job	Yes	1 (6.2)	1 (6.2)	1.00
	No	15 (93.8)	15 (93.8)	

\* MT: million Tomans.

TABLE 2  
COMPARISON OF NURSES' HAPPINESS IN CASE AND CONTROL GROUPS AT THE BASELINE AND ONE WEEK AFTER LIFE SKILLS EDUCATION

Group	No.	Happiness		Statistics	
		Baseline	1 wk post-education	t	P
		Mean (SD)	Mean (SD)		
Control	16	131.25±11.96	130.44±12.75	-1.42	0.163
Case	16	130.06±28.10	146.25±13.70	-2.17	0.038

on a four-point Likert scale (agree, partly agree, partly disagree, and disagree) developed by Eysenck [18] and translated and revised at Isfahan University. Argyle [19] reported the internal consistency of this questionnaire as 0.73-0.93 with mean of 0.86. Validity of the happiness test in Persian was determined using Oxford Happiness Questionnaire. The correlation between these two scales was 0.78 and significant [20] with reliability of 0.92 [21].

With permission from the Institutional Ethics Committee, volunteer nurses who met the inclusion criteria were selected and after obtaining informed consent voluntarily participated in the control or case groups. Case group attended two 4-hour sessions of life skills education. Participants of both groups completed happiness questionnaire before and one week after the classes. Happiness in each step was determined and compared.

**Statistical analysis**

Data were analyzed using descriptive statistics (mean, SD, percentage) and differential statistics (Chi-square, t-test). A probability (P) value at the level of less than 0.05 was considered statistically significant.

**Results**

Most of the participants were married women with BS

degree working at rotating shift. The mean  $\pm$  SD for age was  $34.25 \pm 6.68$  in control and  $36.65 \pm 5.68$  in case group. The results of chi-square test showed no considerable difference in demographic characteristics in the two groups (Table 1). Average happiness score in control group was  $131 \pm 11.96$  at the baseline and  $130.44 \pm 12.75$  one week after the course, while in case group the average happiness score raised from  $130.06 \pm 28.10$  to  $146.25 \pm 13.70$  which was statistically significant (Table 2).

### Discussion

The present study was designed to examine the effectiveness of life skills education on nurses' happiness working at Shahid Sadoughi Hospital. The results indicated that life skills education could significantly increase happiness in case group which confirmed the results of similar studies [22-27]. Mahdavi Haji et al. evaluated the effectiveness of life skills education on happiness, quality of life, and emotional regulation in students showing meaningful difference in all items in the case group [22]. Javadi et al. reported that life skills education could considerably improve nurses' quality of life in the case group [23]. Ghorbanshiroodi et al. studied life skills education on decreasing occupational stress and staff anxiety where it could decrease staff anxiety [24]. Ghavipankeh et al. examined the effect of problem solving skill on students' depression. Case group participated in a 6-session course in groups of 6 to 8 members in three weeks [25]. The average depression score decreased significantly in the case group.

In the present study four skills of effective communication, self-awareness, anger management, and coping with stress were presented. Self-awareness education helps the individuals recognize their strengths and weaknesses and find better recognition of themselves, trying to remove their weaknesses and improve the strengths. Techniques of coping with stress use more efficient ways to confront problems with less stress. According to anger management, if temper is not controlled it can negatively affect mental and physical health. And finally effective communication is about how to inform others of our needs and sensations in a way that while we meet our desire the other person is satisfied as well. These skills help to have an appropriate and wise behavior in different situations and adaptively communicate with one's self and others. Also they assist in solving problems with no aggression and feeling happy in life while being successful. On the other hand, group learning can have a positive effect in decreasing mental pressure. Congregating and feeling that others have the same problems while using their experience in coping with stress are effective in reducing stress and increasing happiness. Also muscle relaxation was practiced in these classes which decreases muscle tension following a stress. Regarding the effectiveness of these skills on nurses' happiness, it is recommended to put these skills in cultural and educational programs for the nurses.

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### Conflict of interest

The authors declare no conflicts of interest.

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