

## **Effectiveness of life skills training based on the teachings of the Quran on the risk behavior and commitment to school in girl students**

**Seyedeh Fezzeh Hosseini**

Affiliation: MSc student of educational psychology, Adib – mazandaran Institute of Higher Education, Sari, Iran  
Email: [fezzeh.hosseini80@gmail.com](mailto:fezzeh.hosseini80@gmail.com)

**Seyedeh Olia Emadian\***

Affiliation: Department of Psychology, Sari Branch. Islamic Azad University, Sari, Iran.  
Email: [emadian2012@yahoo.com](mailto:emadian2012@yahoo.com)

### **Abstract:**

The purpose of this study was to investigate the effectiveness of life skills education based on the teachings of the Quran on high risk behavior and school commitment in female students of Nur schools. The research method was quasi-experimental with pretest-posttest design and follow-up with control group. The statistical population of the study was the female students of Nur high schools in 97-98 school year. Using purposive non-random sampling method based on Krejcie and Morgan's table, 201 students were selected and responded to Mohammadzadeh et al. (2011) Iranian Adolescents Risk Scale. Thirty students who received the highest scores from the pre-test of this questionnaire were randomly divided into two experimental and control groups ( $n = 15$ ). After pre-test in the experimental and control group, the experimental group received 12 hours of one-

hour life skills training based on the teachings of the Quran and the control group received no intervention. Responded to Rezai School of Sharif et al. (2014). One month after the completion of the training program, the two groups received post-test and follow-up. Multivariate analysis of variance with repeated measures was used to analyze the data. The results showed that life skills training based on the teachings of the Qur'an was effective on risky behavior and commitment to school and reduced risky behavior ( $p < 0.01$ ) and increased commitment to school ( $p < 0.01$ ). Has been. But it has not been at risk for other components of behavior. The results of the follow-up of the experimental group's scores after one month indicated the persistence of the intervention effect.

**Keywords:** life skills based on the teachings of the Qur'an, risk behavior, Commitment to School, Female Students.

### **Introduction**

Adolescence is the period of major physical, psychological, and major changes in social interactions and relationships and behavior (World Health Organization, 2001; quoted by Khalili Sadrabad et al., 2016). During this period, adolescents face widespread physical and cognitive changes on the one hand and face individual, social, occupational, and family problems on the other hand. Some

adolescents go through this phase with parental support and family integrity, and enter youth period beside their families; but for some teens who don't have a good social support network in the family and the environment, suffer from emotional and behavioral disorders and do not receive the appropriate coping skills to reduce stress and manage life's problems (Akrodudo, 2010). The reasons for these teenagers' risky behaviors can be different, including motivation of excitement seeking, inadequate fears, and reflection of the imagination makes them think of themselves as vulnerable against damages and injuries (Kaplan 3, 2015; Ganji translation, 2016). According to the World Health Organization, combating high-risk behaviors and unhealthy habits at early ages has a significant impact on the health of people in adulthood and aging (Dupoi 5, 2001). Therefore education about healthy lifestyles and avoidance of such behaviors in early adolescence should be considered.

Rashid's (2015) findings on 1022 students aged 15-18 years in Tehran showed that smoking hookah experience with 51.5%, smoking experience with 35.2%, sexual relationship experience with their own desire with 30.4%, beating Outdoor with 28.1% and alcohol consumption experience with 28.4% were the most common high-risk behaviors among students, respectively. Although, crack and heroin use with 1.5%, cocaine use with 2%, methadone use with 2.9% and opium use with 3.3%, have had the lowest prevalence of high risk behaviors among students, respectively. School is the most important place where students live there after home and it has an important role in shaping their values, norms and social opportunities. It is generally agreed that schools are large social environments in which learning occurs both inside and outside

the classroom (Skerman, 2002). In addition, school is an important source of providing adolescent attachment (Lesner et al., 2010). The way of the teacher's teaching, the positive atmosphere of the classroom and institute, the teacher leadership, the encouragement and punishment of the institute, and the extracurricular activities all create a positive attitude for the students toward the school. Having a sense of belonging and bonding with the school, in addition to creating a healthy environment for students to become independent and socialize, has positive social outcomes. Too (Sadegh, Biranvand, 2016). Conversely, poor bonding with school is associated with low academic achievement and behavioral problems (Liljeberg, Auckland, Fritz, and Clintberg, 2010; cited by Sadeghi, Biranvand, 1986).

In other words, attachment to the school is defined as attachment and commitment to the school, whose its attachment dimension refers to the emotional relationship with the school and the commitment dimension is depend on investing in the group (Libby 9, 2004). One of the applications of today's world-wide psychology is to apply the principles of psychology, find new ways of living and to prevent personal, family, occupational, and social problems.

- |                             |                            |
|-----------------------------|----------------------------|
| 1- Word Health Organization | 2-                         |
| Okorodudu                   |                            |
| 3- Kaplan                   | 4-                         |
| risk behavirs               |                            |
| 6- Scherman                 |                            |
| 5- Dreup                    |                            |
|                             | 8- Liljborg,               |
|                             | Eklund, Fritz & Klintoborg |
|                             | 7- Oelsner                 |
|                             | 9- Libbey                  |

Life skills training programs are one of the applications of various fields aimed at

promoting mental and physical health and preventing psychological and social harm. These skills enhance individuals' ability to deal effectively with the demands of life associated with today's stress and anxiety and act as a primary preventive factor (Wilford 2, 2005). Based on what has been said, the researcher intends to examine the effectiveness of life skills training based on Quran teachings on high-risk behaviors and commitment to school.

### **Statement of the problem**

The sudden and widespread changes that occur in the physical, psychological and social aspects of adolescent life bring about a critical stage that will naturally lead to problems and inconsistencies. Therefore, the basic and scientific understanding of this stage is important and very sensitive in preventing the disorders and problems caused by this crisis by providing the adolescents with the necessary information and skills to deal with the problems caused by these changes. One of the precautionary programs in this area, which is considered in the world, is the teaching of life skills to adolescents (Tudeh Ranjbar, Iraqi, 2006). The World Health Organization has defined life skills as: Ability to perform consistent and positive behavior so that one can cope with the challenges and necessities of their daily lives (Keikha, 2016). Although life skills is a popular topic today, it is rooted in Islamic teachings, and religious instruction has more and necessarily completely focused on life skills. Religious teachings and the school of Islamic psychology is considered both theoretical and practical aspects in order to create human growth. In the theoretical dimension, a study of the principles of Islamic psychology and the mainstream of human psychology reveals the fact that man is in a state of mental health, and always in a dynamic state of growth. And in the practical

dimension, the man can guarantee the reduction of mental disorders and the maintenance of their mental health by practicing religious beliefs, adhering to the Qur'an and the way of the Prophet, and also moving toward the perfection of humanity, by acquiring virtue and avoidance of delusions (Kazemi and Bahrami, 2014; Soleimani Najafabadi, Chobgin, Ghaderi Najafabadi, Haddadi, 2015). High-risk behaviors are any persistent behaviors that cause actual and potential harm to the health and cause injury and damages such as: Drugs consumption, alcohol, smoking, high risk sexual behaviors and staff like that (Monastario 4, 2007). There are many factors that influence the formation of these behaviors, as the previous studies have emphasized the role of individual (gender and age, environmental), (geographical situation) and social (family, health care, education, and community) factors in this field. In addition, genetics has been proven to be involved in the formation of high-risk behaviors (Steptoo and Wardell, 2011). A review of various studies suggests that there is no definitive approach in the field of high-risk behaviors. Various theories have formed about this issue. Some theories emphasize cognitive factors such as low cognitive development, lack of risk perception, poor judgment and decision making in explaining such behaviors. Some other theories consider the factors of emotion-seeking, impulsivity, and lack of emotion management. Others emphasize on social and environmental factors such as disorders resulted by social change and environmental factors such as disorders resulted by social change, social class, poor social control, social learning, social stress and guilty friends. Also, some models like different factors, emphasize on tendency of high-risk behaviors (Adibnia et al., 2016). For this reason, hygienic related rules and programs and health promotion in

Iran need urgent attention, because this age group forms a large part of the population and most of the behavioral patterns from adulthood begin and stabilize during at this time (Wilson, Mabala 1, 2013). Teaching life skills based on the teachings of the Qur'an in the school setting can increase one of the components of a school-based bond, which is commitment to school. In fact, commitment is a kind of investment that one has in social contracting. Highly committed students accept the goals, norms, and ethics of the school. This dimension is a combination of behavior and belief (Maddox & Prince 2, 2003). Therefore, this kind of school and its connection with students can prevent behavioral problems in adolescence. Considering the issues raised and the Islamic country of Iran, and the culture, beliefs and values of the people, it is necessary for scholars to rely on the teachings of the Qur'an on the one hand and to keep these teachings in line with their age on the other hand to apply these teachings to meet the different needs of humanity. So the question arises, does life-skills training based on the teachings of the Qur'an affect school-based high-risk behaviors and commitment?

### **Importance and necessity of research**

Religion has existed and is present in all times and societies from beginning to modern and postmodern in different forms. Since socio-cultural environments influence religion, so religion does affect socio-cultural environments. Religion can often be a powerful determinant of social phenomena, shape institutions, influence values, and influence relationships (Zuckerman, 2003). Religious beliefs are one of the most important factors that can avoid society from corruption. In expressing the importance of teaching life skills based on the teachings of the Qur'an, the World Health Organization refers to the physical, mental, social and

spiritual in defining the dimensions of human existence and the fourth dimension, that is, the dimension of spirituality, is concerned with the growth and development of man. Spiritual health consists of self-perceptions and a combination of personality factors and fundamental beliefs about being and knowing the meaning of life that are related to various aspects of life including social, physical, and psychological aspects (Fry, Dalman, Pinen). , 2005). This research is necessary and important as it intends to investigate and study the effects and results of Quran life skills education based on a view of Iranian-Islamic culture and the principles of the Qur'an. In the works of Islamic scholars, one example of the healing of the Qur'an is the healing of the soul from psychological and moral atrocities. The Qur'an teachings are the charter of how to live and guarantee a healthy life (Soleimani Najafabadi et al., 2015). Meanwhile, teaching life skills to adolescents and youth against high-risk behaviors must be taken into consideration. According to World Bank forecasts in relation with World Development Indicators, in 2005 about 8.5 million of our population includes 14- to 18 year-old adolescents, that equals 2.5% of the total population. (Soleimani Nia, Jazayeri, Mohammad Khani, 2005). Studies have shown that most of the high-risk behaviors including smoke consumption, alcohol, drugs, and unsafe sexual behaviors begin before the ages of 18 (Bergman, Scott , 2001). Therefore, considering the young age structure of the country and considering that adolescents constitute the most vulnerable segment of society against the high-risk behaviors. Obviously, any impairment in mental-psychological health and, consequently, a decrease in the abilities of this layer, will inevitably slow the progress of society and on the other hand, their physical and mental health may have a negative impact on the health of individuals in the long

term (Soleimani and et al, 2005). Considering the important role of schools in providing mental health for adolescents and students, life skills training is considered to be an effective way toward the developing healthy personality and providing and maintaining students' mental health. In this way that, instead of focusing only on enhancing students' academic performance, schools should also emphasize on their psychology provision and maintenance, because if the above goal is achieved, many educational and academic problems will also decrease spontaneously (Nastasia, 1998; quoted by Keikha, 2016). Teaching life skills based on the teachings of the Qur'an in the school environment can increase one of the components of school bonding, namely, commitment to school. School is a place where students live and play an important role in shaping people's values, norms and social opportunities. Catalano and Hawkins (1996) see schools as a major factor in socialization. The fundamental and positive significance of the term commitment to school in youth is that it is the most important link to school (Jimbersen, Campos, & Greif, 2003). It is also cited as the most important indicator of compatibility with lives among youth and teenagers (Archambault, Genz, Fallowgany, 2009). Commitment is a type of investment that one has in social contracts. High-commitment students accept the school's goals, norms, and ethics, this dimension is a combination of behavior and belief (Maddox & Princes, 2003). And in expressing the importance of the lack of commitment to school, many studies show that lack of commitment to school, can increase adolescence problems such as the risk of academic failure, drug abuse, unwanted pregnancies, and crime. (Segaton, Heydarall, Netsel-Larsen, & Lin, 2014). In general, the importance of paying attention to the issue of commitment to school arises

where from the student's perception of attachment to school has important implications for their behaviors at school as well as out of school (Sharif et al., 2012).

## **Literature and Background**

This section examines the research background on the impact of life skills training based on Qur'an teachings on high-risk behavior and school commitment. Life skills training has been effective in a variety of programs. Mohsen, Toji Ranjbar, Fatemeh, Iraqi (2018), performed a study entitled examined the impact of life skills training on adolescent mental health and teenagers' source of control in a pilot study with pretest-posttest control group of 276 boy students of first grade high school in the 97-96 school year, that shows life skills training, especially problem-solving skills, are effective in increasing mental health, especially in reducing anxiety and depression.

Mohammad Rezaei et al. (1977) in a study on the effect of recitation of Quran on adolescent's risk of high risk behaviors by semi-experimental method with pretest-posttest with control group and experiment on high school students (first and second year) Ardabil District 1 and 2, showed that listening to recitation of the Qur'an - listening along with the meanings - reduces the risk of high school adolescents being exposed to high-risk behaviors.

Afsar Khalili et al., (2017), in a study entitled developing a social-educational immunization program with Islamic teaching approach and evaluation and its impact on high-risk behaviors of students in a semi-experimental method with a pre-test post-test with a control group on third year high school students of public high schools of Yazd city, academic year 93-94, showed that

educational-social immunization based on Islamic teachings can be used as an intervention to reduce the risky behavior of students.

Rasool Najafabadi et al (2017), in a study entitled impact of islamic life skills on depression, anxiety and stress in women with chronic mental disorders by semi-experimental method with pre-test - post-test on 34 women referred to “ Parastoo” Neurological Rehabilitation Center of Najaf Abad who were hospitalization in this center in winter 2012, showed that life skills training with Islamic approach is effective in significantly reducing depression, anxiety and stress in patients with chronic mental disorders.

Seyed Alireza Afshani, Sharmani Amani, Akram Mir Mangareh (2014), in a study entitled Religion and Risky Behaviors, using a descriptive survey and a cross-sectional study on 320 students of Yazd University, showed that increasing religiosity decreases high-risk behavior.

Atefeh Allameh et al. (1396) in a study comparing feelings of loneliness and school bonding in boy students with aggressive and normal behaviors in elementary school of Ahwaz using 150 students in a science-comparative research and multistage random sampling (125 normal students and 125 aggressive students) in the academic year 93-94, showed that aggressive students have a weaker school bond and feel more alone.

Ramin Habibi Kalibar et al. (1977), in a study entitled describing students' high-risk behaviors based on religious orientation and spiritual health, using descriptive-correlational cluster sampling method and Cochran formula on 361 students of Shahid Madani university of Azerbaijan in the academic year 1997-98, showed that internal

religious orientation and spiritual health components can predict students' high-risk behaviors.

Stone, Becker, Hoyer, Catalo (2012), Drop, Johnson & Bindell (2011), Enzlichept, Erenson, Goode & McKee (2006), Brooks (2003), Sinha, Kennan & Goals (2007), cited above, that religious people are physically healthier and have less risky behaviors. McAliffe et al. in their research (2014) found that using life skills training, especially problem solving skills, reduced suicidal thoughts, depression, and anxiety. Nan and Macro et al. (2003) concluded that the two types of public and private religiosity have a significant negative relationship with smoking. Koenig et al. (2001), Wallace et al. (2003) concluded in their research, that there is a negative relationship between the two variables of religiosity and smoking. Wang and Ho Lacumb (2010), in their research, showed that high levels of commitment to school correlated with academic achievement at school, and non-commitment students reported various numbers of poor performance and behavioral problems.

With a brief overview of the research can be said that the life skills training, mostly implemented in adolescence, has had a positive impact on various aspects of mental health. Various life skills such as problem solving, decision making, coping with stress, anger control, assertiveness in saying no, etc. effected on reducing smoking, high risk behaviors, violence, anxiety, depression, suicide and even chronic diseases such as schizophrenia. Thus, a review of the study and research backgrounds can conclude that life skills training based on Quranic teachings is effective in reducing high-risk behaviors and increasing commitment to school.

### **Research goals**

This research follows the following goals:

### **General goals:**

The examination of effectiveness of life skills based on Quran Teachings on high-risk behaviors and commitment to School.

### **Detail goals:**

- 1- The examination of the effectiveness of life skills training based on Quran teachings on high risk behaviors.
- 2- The examination of the effectiveness of life skills based on Quran teachings on commitment to school.

### **Research hypotheses**

#### **The main hypothesis:**

Teaching life skills based on the teachings of the Quran has an impact on high-risk behaviors and commitment to female students' school at Noor high schools.

#### **Subsidiary Hypotheses:**

- 1- Life skills training based on the teachings of the Qur'an affects the high-risk behaviors of female students in Noor schools.
- 2- Teaching life skills based on the teachings of the Qur'an has an impact on the commitment of female students to the school in Noor vocational schools.

### **Research Methodology**

The present method is practical according to the purpose and has been implemented in a quasi-experimental design with pretest-posttest and follows with control group design. The statistical population of this study includes all female students (15-18 years old) of Noor vocational schools in the school year of 2018-2019, that their number was 413 people based on statistics resulted from the Noor Educational and training

office. Non-random sampling is purposeful. 201 students were selected, based on the Krejcie and Morgan table. These art students responded to the Mohammadzadeh et al. (2011) test of Iranian adolescents' risk scale. Thirty students who got the highest score on this questionnaire were randomly divided into two experimental and control groups ( $n = 15$ ). To conduct the research, after coordinating with the school principal, all students, under the same conditions and at the same time, answered a pre-test on the risk taking of Iranian adolescents (Mohammadi Zadeh et al., 2011). Next, students with the highest scores were selected and divided into two experimental and control groups ( $n=15$ ). Then both groups were given 12 one-hour sessions of life skills training based on Quran teachings. After the last training session, in addition to the post-test, the School Bonding Questionnaire (SBQ) of Rezaei Sharif (2012) was administered on both groups to measure school commitment. At the end of the interventions, both groups were followed for 6 weeks to determine the effectiveness of life skills training based on Quran teachings over a longer period of time.

#### **Research tools**

##### **Adolescent Risk Taking Questionnaire**

To measure risk taking, Iranian adolescents' risk scale was used (Mohammadi Zadeh et al., 2011). To assess the vulnerability of Iranian adolescents, 50 items were first adjusted and evaluated by experts. The final version of this questionnaire has 38 questions and 7 components. Its purpose is to measure adolescents' risk-taking in different dimensions (drug addiction, alcoholism, smoking, and violence orientation, tendency to sexual relationship and behavior, risky driving orientation). In this study, high-risk behaviors are the scores that the subjects obtained from the Iranian Adolescent Risk Scale (LARS),

Mohammadi Zadeh et al., (2011). The questionnaire consists of seven scales that the drug orientation scale includes 8 questions, the alcoholism scale contains 6 questions, smoking and violence scale includes 5 questions, the sexual orientation scale includes 4 questions, and the driving orientation scale includes 6 questions. All the items were in the same order, there was no need for inverse scoring. The scoring method is based on a five-point Likert scale that includes: strongly disagree (1), disagree (2), so so (3), agree (4) strongly agree (5). To get points for each dimension, calculate the sum of the points related to each of the questions of that dimension together. Higher scores in each dimension will indicate the tendency of the respondent to that, and vice versa. The total score on the questionnaire will be from 38 to 190, higher scores indicate higher risk of responding adolescents, and vice versa. To validate the formalization of the scale by six youth psychologists and specialists, their evaluated and proposed corrections was applied to the scale. Validity has also been investigated through exploratory factor analysis. To determine the sample size adequacy, Kiers-Meyer-Olkin (KMO) and Bartlett's sphericity test were used. And both items indicate the scale's (IARS) suitability. In the Reliability Survey (IARS) for internal consistency, Cronbach's alpha coefficient and Pearson's correlation coefficient were calculated for each item with the corresponding subscale. The construct validity with principal components indicated that this questionnaire was a seven-dimensional scale, which explained 64.84% of the variance of risk taking. Cronbach's alpha for the whole scale was 0.94 and for its subscales ranged from 0.93 to 0.74 that indicates a good reliability of the scale. Mohammadizadeh, Ahmadabadi, Heydari, (2011).

#### School Bonding Questionnaire ( SBQ):

To measure the level of school commitment in students, subscale of commitment to school was used from the questionnaire of bonding to

school made by Rezai Sharif et al. (2014). The School bonding Questionnaire is designed for the grades of elementary, secondary and high school students. The questionnaire initially had 70 items and was administered to a sample of 1,000 people to make the necessary corrections and finally, after the factor analysis, 40 final questions were obtained. The 40-item School Bonding Questionnaire in six components examines and assesses the extent of attachment to teacher, school attachment, school staff attachment, school participation, school belief, school commitment. The questionnaire scoring is based on a five-point Likert scale that includes: never (1), sometimes (2), rarely (3), often (4), always (5). In this study, the standard school bond score is a score that one gives to a 40-item question. A minimum score of 40 and a maximum of 200 is the sum of the scores. The lower scores show the weaker bond and higher scores indicate the higher bond with school in different dimensions, which the considerable dimension is commitment to school, in this study. The meaning of commitment to school is the score that subjects obtained from the school commitment subscale, by Rezai Sharif School Bonding Questionnaire (SBQ) (2012). The questionnaire consists of seven components, the first component which is attachment to teacher has 9 questions, the school attachment component has 10 questions, the school staff attachment component has 6 questions, the school participation component has 7 questions, the school belief component has 6 questions, and the school commitment component has 3 questions. Reliability and Validity: In this study, Rezaei Sharif et al. (2014) investigated the predictive validity of the questionnaire in order to receive the reliability of questionnaire and content validity. Content validity was assessed through a survey of 5 psychologists and a valid instrument was identified.

To calculate the predictive validity, the correlation between academic average and school bonding was 0.31. To ensure reliability,



the internal consistency of the whole questionnaire and its components through the Cronbach's alpha for the whole questionnaire were reported 0.93, teacher attachment 0.88, school attachment 0.80, school staff attachment 0.81, school participation 0.73, belief in school 0.73, commitment to school 0.70 (Rezai Sharif, 2012).

Methods of data analysis:

Statistical methods were used to investigate the research hypotheses as follows

Descriptive statistics methods: tables and graphs of mean and standard deviation

Inferential statistics methods: According to the research design which was pre-test, post-test and follow-up, frequent analysis of variance was used to analyze the data. In this type of analysis, the M Box test assumptions must be considered to verify the homogeneity of the variance-covariance matrices, in order to be sure of the results.

Findings:

Table 1: Mean and standard deviation of pre-test and post-test of high risk behaviors and its components in three groups of test, control and follow up

numbers	Standard deviation	mean	group	stage	variable
۱۰	۲۱/۶۲۰	۱۰۹/۰۷	experimental	Pre-test	High risk behaviors
۱۰	۱۸/۳۰۴	۸۹	control		
۱۰	۱۹/۶۱۷	۹۸/۱۳	experimental	post-test	
۱۰	۲۰/۸۹	۹۰/۳۳	control		
۱۰	۱۹/۵۰۸	۱۰۴/۴	experimental	Follow-up	
۱۰	۲۰/۶۴۸	۷۷/۵۳	control		

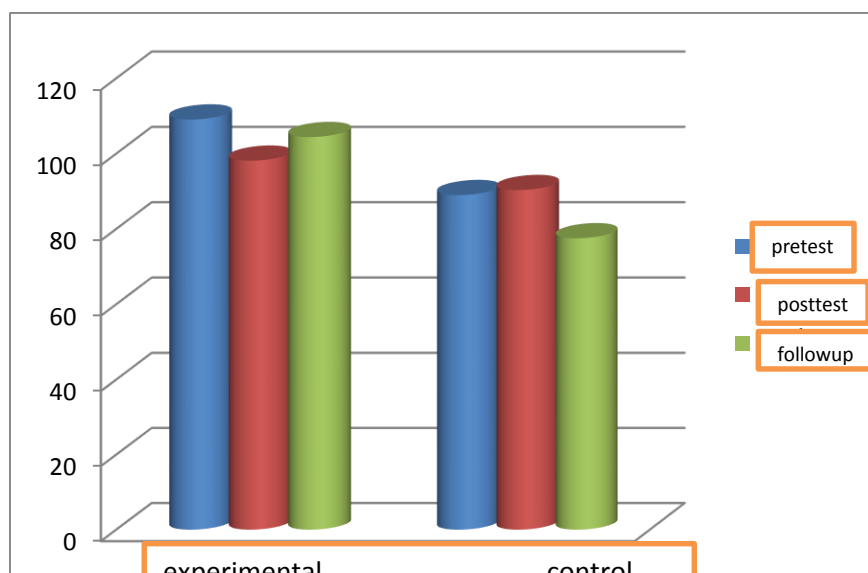


Diagram (1): Column diagram of comparing the mean of pre-test and post-test of high risk

behaviors in three groups of test, control and follow up

As it can be seen, the table and diagram (1) shows that the mean score of high risk behaviors of students before and after intervention in the experimental group was 109.07 and 98.13 and in the follow up phase was 104.4 and in the control group of students 89 and 90/33 and in follow up is

77/53, respectively. In other words, the results of the table and graph show that the mean score of the experimental group in the pre-test phase and in the post-test phase was different and decreased in the high-risk behaviors of the students, this difference remains at the follow-up stage.

Table (2): Results of the MB Box test on the assumption of equality of covariances of the two groups in high risk behaviors

Meaningful level	Freedom degree 2	Freedom 1 degree	F	M Box
٠/٥١	٥٤٨٠/٣٠٢	٤	٠/٨٧٨	٥/٩٤٩

As can be seen in table (2), the variance-covariance matrix or the relationships between the dependent variables were significantly different in the three groups of

society ( $p < 0.05$ ). Therefore, this condition of homogeneity of the covariance matrix is correctly observed.

Table 3: Multivariate analysis test results with frequent measures for intergroup effects and interaction

Effect level	Sig	error df	df hypothesis	F	value	Test name
٠/٢٤٥	٠/٠٢٢	٢٧	٢	٤/٣٩٢	٠/٢٤٥	Regularity test
٠/٢٤٥	٠/٠٢٢	٢٧	٢	٤/٣٩٢	٠/٧٥٥	Lambda Wilks test
٠/٢٤٥	٠/٠٢٢	٢٧	٢	٤/٣٩٢	٠/٣٢٥	Hotelling effect test
٠/٢٤٥	٠/٠٢٢	٢٧	٢	٤/٣٩٢	٠/٣٢٥	Test the biggest root

Table (3) shows the results of multivariate analysis of variance with frequent measures with intra-item factor of measuring the high risk behaviors score in 3 consecutive times and shows the inter-item factor group. As can be seen, the measurements of the risk behaviors score were significantly different at three consecutive times. In other words, there was a significant difference between factor scores (pre-test, post-test and follow-up) in risky behaviors variable ( $P < 0.01$ ).

Also, there was a significant interaction between factor scores and groups in high risk behaviors score ( $P < 0.01$ ). These results indicate the effectiveness of life skills training based on the teachings of the Quran in reducing high-risk behaviors of students. Therefore, the multivariate test showed that in the post-test and follow-up compared to the pre-test, the scores of high-risk behaviors of students in the experimental group were significantly changed.

Table (4): Results of analysis of variance between subjects and intra-subjects by frequent measures in three time measures of high risk behaviors score in experimental and control groups

Eta coefficient	Meaningful level	F	Mean squares	Fredom degree	The sum of the squares	Changes source
•/•.٧٩	•/•.١٢	٢/٣١٩	٩١٤/٤٥٩	١/٩•.٨	٩٨٧/٨٢٢	Factor
•/•.١٥	•/•.٤٥	٣/٢٨٨	٨٧١/٢٣٥	١/٩•.٨	١٤٠•/٩٢٢	Factor and Group
			٢٩٤/٩٩٢	٤•/•.١٤	١١٩٢٩/٨٨٩	Error (operating)

The results in Table 4 show the difference between the three time measures in the high risk behaviors score. As it can be seen, there was a significant difference between the factor scores (pre-test, post-test and follow-up) in the high risk behaviors score ( $p < 0.01$ ). Also, there was a significant difference between the factor scores (pre-test, post-test and follow-up) in the high risk behaviors score ( $p < 0.01$ ). These results state that teaching life skills based on the teachings of the Qur'an has been effective in reducing the risky behaviors of students. Also, the multivariate test showed that in the post-test

and follow-up compared to the pre-test, the score of risky behaviors in the experimental group was significantly reduced. Following a significant difference of 3 scores of the pre-test, post-test and follow-up in the experimental group ( $p < 0.01$ ). Significant pairwise comparisons between the three pre-intervention, post-intervention and one-month later stage, were performed between both control and experimental groups through paired comparisons of mean difference by Bonferroni post hoc test. The results of the follow-up test are presented in table (5).

Table 5: Bonferroni follow-up test results on high risk behaviors

Meaningful level	Standard deviation	Mean difference	
•/•.٣٥	٢/٧٣٥	٤/٨	Pretest*posttest
•/•.٤٥	٤/٣٩٣	٨/•.٩٧	Pretest*follow up
•/•.٤١	٣/٩٧٧	٣/٢٩٧	Posttest*follow up

Table (5) shows that at the level of ( $p < 0.05$ ), in the experimental group, the difference between the high risk behaviors scores

between pre-test and post-test and follow-up were significant.

Table 6: Mean and standard deviation of pre-test and post-test of school commitment in three groups of experimental, control and follow-up.

numbers	Standard deviation	mean	group	stage	variable
۱۵	۳/۱۱۴	۱۰/۱۳	experimental	Pre test	Commitment to school
۱۵	۳/۵۵۵	۱۱/۲۷	control		
۱۵	۲/۶۸۵	۱۲/۲۷	experimental	Post test	
۱۵	۳/۶۹۹	۱۰/۶	control		
۱۵	۳/۴۳۲	۱۰/۲۷	experimental	Follow up	
۱۵	۳/۶۴۱	۱۱/۴	control		

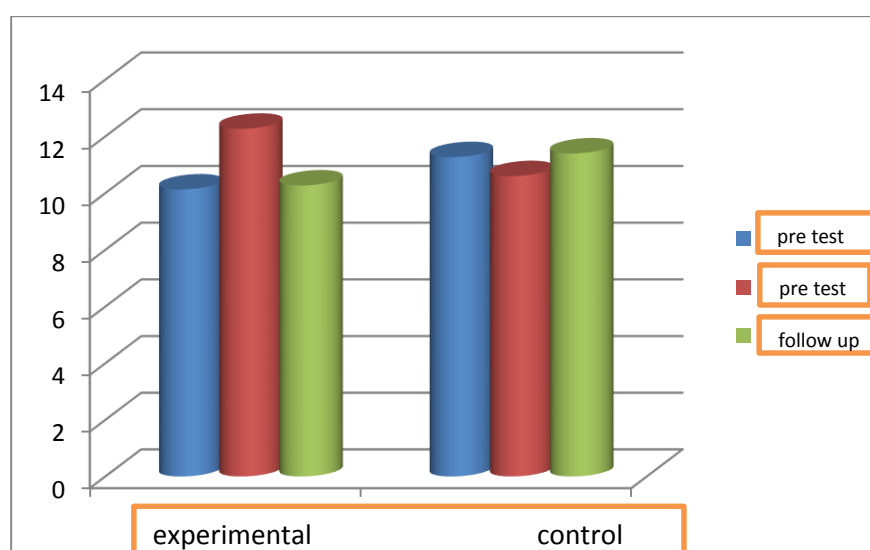


Diagram (2): Column

diagram comparing mean pre-test and post-test commitment to school in three groups of experimental, control and follow-up

The results of table (6) and diagram (2) show that the mean score of commitment to the students' school before and after the intervention in the experimental group was 10.13 and 12.27, and in the follow-up phase

was 10.27, and in the control group students 11.27 and 10.6, and in follow-up was 11/4, respectively. In other words, the results of the table and graph show that the mean score of the experimental group in the pre-test phase and the post-test phase in the variable of commitment to the school students is different and has increased and this difference remains in the follow-up phase.

Table (7) of the results of the MB Box test on the assumption of equality of covariances between the two groups in the school commitment variable

Meaningful level	Freedom 2 degree	Freedom degree 1	F	M Box
۰/۲۶۳	۵۶۸۰/۳۰۲	۶	۱/۲۸	۸/۶۹۹

As it can be seen in Table (7), the variance-covariance matrix or the relationships between the dependent variables were significantly different in the three groups of

society ( $p < 0.05$ ). Therefore, this condition of homogeneity of the covariance matrix is correctly observed.

Table (8): The results of multivariate variance analysis test with frequent measures for intergroup effects and interaction

Effect level	Sig	error df	df hypothesis	F	value	Test name
۰/۳۰۷	۰/۰۰۷	۲۷	۲	۵/۹۷	۰/۳۰۷	Regularity test
۰/۳۰۷	۰/۰۰۷	۲۷	۲	۵/۹۷	۰/۶۹۳	Lambda Wilks test
۰/۳۰۷	۰/۰۰۷	۲۷	۲	۵/۹۷	۰/۴۴۲	Hotelling effect test
۰/۳۰۷	۰/۰۰۷	۲۷	۲	۵/۹۷	۰/۴۴۲	Test the biggest root

Table (8) shows the results of multivariate analysis of variance with frequent measures with intra-item factor shows the measurement of school commitment score on 3 consecutive times. As it can be seen, the school commitment scores are significantly different in three consecutive time points. In other words, there was a significant difference between factor scores (pre-test, post-test and follow-up) in the commitment variable to school ( $P < 0.01$ ). Also, there was

a significant difference between factor scores and groups in school commitment score ( $P < 0.01$ ). These results indicate the effectiveness of life skills education based on the teachings of the Qur'an on students' commitment to school. Thus, the multivariate test showed that in the post-test and follow-up compared to the pre-test the extent of the students' school commitment score in the experimental group changed significantly.

Table (9): Results of analysis of variance between subjects and inter-subjects by frequent measures in three measures of school commitment score in experimental and control groups

Eta coefficient	Meaningful level	F	Mean of squares	Freedom degree	Sum of squares	Changes source
۰/۰۳۷	۰/۰۴۷	۱/۰۷۹	۴/۵۷۸	۲	۹/۱۵۶	عامل
۰/۱۴۲	۰/۰۱۴	۴/۶۱۹	۱۹/۶	۲	۳۹/۲	عامل و گروه
			۴/۲۴۴	۵۶	۲۳۷/۶۴۴	خطا (عامل)

The results in table 9 show the difference between the three times measurement, in the school commitment score. As can be seen, there was a significant difference between the factor scores (pre-test, post-test and follow-up) in the school commitment score ( $p$

$< 0.01$ ). There was also a significant difference between factor scores (pre-test, post-test and follow-up) in school commitment score ( $p < 0.01$ ). These results suggest that teaching life skills based on the

teachings of the Qur'an has been effective in increasing commitment to students' school.

### **Discussion and conclusion:**

The results of the first hypothesis indicated that there was a significant difference between the three times measurement (pre-test, post-test and follow-up) in high-risk behavior scores ( $p < 0.01$ ). These results indicate that life skills training based on Quran teachings after intervention has been effective on high risk behavior. Life skills based on the teachings of the Quran can familiarize students with cognitive, emotional, and behavioral processes by creating the necessary mental space and enable them to better understand how these components relate and compare their actions in the process of coping, and then learn how to manage and use cognitive, emotional, and behavioral skills. The study of the Qur'an verses suggests that many of these verses teach individuals a set of personal and social skills that are capable of controlling life's stresses and pressures, thinking carefully about the secrets of existence, communicating effectively with others, managing Personal life, empathy with others, and making the right decisions in life's problems help people to have a good and uninterrupted life. These findings are in the line with the results of the studies of Stone, Becker, Hoyer, Kanatallo (2012), Drop, Johnson, and Bindel (2011), Sinha, Kenan, and Goals (2007), Serajzadeh et al. (2013), Mohamad Rezaei et al. (1977), Habibi Kalibar et al (2017), Afsar Khalili et al (2016), Rasoul Najafabadi et al (2016), Seyed Alireza Afshani, Shermin Amani, Akram Mir Mangareh (2014), McAliffe et al (2014), Mohsen, Toode Ranjbar , Fatima, Iraqi (2017). This finding can be explained by the fact that religious people have less risky behaviors. Smith (2012) believes that religion can influence risky behaviors

including drug consumption and intend to them through a moral order, religion provides the individual with specific ethical guidelines to control himself and chastity, such as refusing to use alcohol and other materials. There also may be laws that prohibit smoking and other materials by referencing to religious orders. He believes that religion can prevent drug use through the skills and knowledge that one acquires through his life, religion, for example, can make a semantic system including the purposefulness of life, the sense of positive self-worth, and the self-worthy of respect. This semantic system can prevent risk-taking and emotion-seeking behavior, which also reduces the likelihood of a person using drugs. Life skills training is effective in reducing high-risk behaviors. The results presented in the tables related to the second hypothesis of the study indicated that there was a significant difference between the three times measurement (pre-test, post-test and follow-up) in commitment to school ( $p < 0.01$ ). These results indicate that life skills training based on Qur'an teachings has been effective on school commitment after intervention. The results of this hypothesis are also in line with the results of Masoud Sadeghi, Zeinab Biranvand (2016), Atefeh Allameh et al (2016), Wang and Ho Lokomb in (2010), Firouz Rad, Nayere Rostami (2015). This finding can be explained by the fact that the intervention of life skills training based on the teachings of the Quran has a positive and significant effect on the commitment to school. This intervention causes students to identify themselves as members of a group, and when they classify themselves as members of a group or social class, there will be a sense of belonging and bonding (Karcher 1, 2005; Tajfel & Turner 2, 2007). Adolescents have a strong psychological need for attachment and commitment, adolescents who have a strong attachment to school are more likely to be

motivated and successful in school (Alsner et al., 2015). This sense of joy at school has been a cause of positive excitement at school and as a result, the adolescent has a high academic self-efficacy in the classroom. Therefore, the students who have a higher academic self-efficacy consider their failure and success under their control and consequently, plan for their success. This self-control causes the adolescent to exhibit behaviors that lead to his or her happiness and success. Determinants of school commitment include instructional adjustment and positive relationships between student and teacher (Andman, 2002), and students with higher levels of commitment to school are more likely to accept school goals, norms, and ethics easier (Yernkiewicz and Jordano 4, 1992; Frey 1994; Simons Morton et al. 6, 1999; Maddox and Princes, 2003). The greater commitment the students have to the school, the less likely they go toward perverse friends and risky behavior. In life skills training, the main purpose is to change destructive behavior to constructive. These skills must start from pre-school and continue up to school, university, and even later steps in life in the community but unfortunately, because of parents' ignorance of the principles of parenting and the lack of attention to this crucial aspect of education, these skills are not institutionalized in the nature of the children from childhood and the ability of their learning disappears easily in childhood. So it is better to apply the life skills curriculum based on the teachings of the Qur'an at all levels of boys and girls. Future research should also include interviews if possible in addition to questionnaires. According to the results of this study, it is suggested that school authorities and teachers try to create a positive atmosphere in their schools so that students feel close to the teachers and consider themselves as a part of school. It is

better for principals and parents to use new and regenerative ways of controlling and supervising students in order to build a greater commitment and interest. Apply disciplinary rules base on the students' opinions and participation. It is suggested that research on life skills training based on the teachings of the Qur'an be compared with the life skills training according to the World Health Organization. Since the present study covers only the student population, it does not cover adolescents who have dropped out of school or are not in school; Studies have shown that the prevalence of high-risk behaviors is higher, among adolescents who have dropped out of school or completed high school, than other adolescents. In the case of large sampling, the detection of each type of risky behavior may be different, it is suggested that future research should examine and compare this issue with each other by providing sufficient sample size in each of the areas of high-risk behavior.

## References

- Adibnia, Faezeh, Ahmadi, Abdul Jawad, Mousavi, Seyed Ali Mohammad., Predicting the Risky Behaviors in Adolescents Based on Cognitive Emotion Regulation Strategies and Meta-cognitive Beliefs, *Journal of Psychological Research*, No. 50, summer 1397, 43-27.
- Afshani, Seyed Alireza, Amani, Sharmin, Mir Menghar, Akram, Religion and Risk Behaviors, *Journal of Social Development*, Volume 9, Number 2, Winter 2014, 158-131.
- Tojem Ranjbar, Mohsen, Iraq, Fatemeh, The Impact of Life Skills Training on Adolescent Mental Health and Source of Control, *Journal of Modern Advances in Psychology, Educational Sciences and Education*, Volume 1, Number 3, Summer 1977, 23-1.

Habibi Kalibar, Ramin, Shepherd Basim, Farnaz, Samimi, Zubir, Molla Mohseni, Mehri, Azizi, Somayeh, Explaining Students' Risky Behaviors Based on Religious Orientation and Spiritual Health, *Islamic Lifestyle Health*, Volume 2, Number 4, Autumn 1397, 209 - 204.

Khalili Sadr Abad, Officer, Sohrabi, Faramarz, Saadipour, Ismail, Delaware, Ali, Khoshnoushan, Zahra, Developing a Social-Educational Immunization Program Using Islamic Teaching Approach and Evaluating its Impact on High-Risk Behaviors of Students, *Journal of Social Sciences*, Issue 41, Spring 2016, 11-26.

Rad, Firouz, Rostami, Nair, Social Bonding and Attitude to Abnormal Behaviors, *Journal of Social Sciences*, No. 74, Fall 2016, 214-177.

Rashid, Khosrow, High-risk behaviors among male and female students in Tehran, *Social Welfare Quarterly*, No. 57, 2015, 31-55.

Rezaei Sharif, Ali, Hejazi, Elaheh, Judge Tabatabai, Mahmood, Ejei, Javad, Studying Students' Viewpoints about School Transplantation: A Qualitative Study, *Journal of School Psychology*, No. 61, 2012, 16-16.

Rezaei Sharif, Ali, Hejazi, Elaheh, Judge Tabatabai, Mahmood, Ejei, Javad, Making and Preparing a School Linkage Questionnaire in Students, *School Psychology Journal*, Volume 3, Number 55, Spring 2014, 55- 150.

Zuckerman, Phil, 2005, an Introduction to the Sociology of Religion, Khashayar Translation, Diyahi, Islamic Culture and Guidance Publication.

Sadook, Benjamin, Sadook, Virginia, Ruiz, Pedro, Kaplan Sadook Psychiatry Abstract: Based on D, S, M, Translated by Mehdi

Ganji, Volume III, Eleventh Edition, Savalan Publishing, (2015)

World Health Organization 2008, Life Skills Training Program, Qasem Abadi Translation, Robabeh, Mohammadkhani, License, Deputy of Cultural Affairs and Welfare Prevention Serajzadeh, Seyyed Hassan, Javaheri, Fatemeh, Khawaja Velayati, Somayeh, Religion and Health: The Effect of Religion on Health among a Sample of Students, *Journal of Applied Sociology*, Issue 10, Series 49, 2013, 77-55.

Soleimani Najafabadi, Rasool, Chobgin, Alireza, Ghaderi Najafabadi, Maryam, Haddadi, Mahboubeh, The Impact of Islamic Life Skills Training on Depression, Anxiety, and Stress in Women with Mental Disorders, *Journal of Psychology of Vedin*, Volume 10, Number 2, 2017, 40-17.

Sadeghi, Masoud, Biranvand, Zeinab, The Impact of Positive Group Attitude Training on School Bonding in High School Female Students, *Journal of Positive Psychology Research*, Vol. 3, No. 10, Summer 2016, 34 - 19. Allameh, Atefeh, Shiralinia, Khadijeh, Imani, Mehdi, Comparison of Loneliness and School Relatedness in Male Students with Normal Aggressive Behaviors, Volume 11, Number 46, Autumn 1396, 146-123.

Keikha, Zahra, The Impact of Life Skills Training on Enhancing Students' Mental Health, *Journal of Psychological Studies and Educational Sciences*, Volume 2, Number 1, Spring 2016, 49-42.

Mohammadi Zadeh, Ali, Ahmadabadi, Zohreh, Heidari, Mahmood, Formulation and Evaluation of the Psychological Properties of Iranian Adolescent Risk Scale, *Iranian Journal of Psychiatry and Clinical Psychology*, Volume 17, Number 2011, 133-222.



Anderman, E. M.(2002). School effect on psychoigical out comes dring adplescent. Journal of Educational

Psychology , 94(4) , 795-809

Archambault , I , Jansoz , M. , Fallu , J. S ., & pagani , L. S . (2009) . student engagement and its relationship with early high school dropout . Journal of Adolescence , 329, 651 – 670.

Bergman , M .Soott, J. (2001). Young Adolescents' Well-boing and Health- risk pehaviors : Gender and socioeconomic. Differences .Journal of Adolescence .240.183-197.

Brooks , M . V. (2003). Health – related hardiness and chronic illness . Nursing forum , 38 ,11 – 20.

Catalano , R. F., Oesterle. S., Fleming , C. B., & Hawkins, J.D.(2004). The importance of boning to school for healuy development : Findings from the social Development Research Group.

Catalano , R. F., R. ,& Hawkins. J. D. (1996).The social development model : A theory of antisocial behavior . In J. D. Hawkins (Ed). Delinquency and crime :current theories (PP.149-197). Cambridge, England: Cambridge Uniersity Press

Drerap , M. L ., Johnson , T . J . Bindl , S . (2011) . Mediators of the relationship between religiousness / spirituality and alcohol Problems in an adult community sample . Addictive Behaviors , 36 (12) ,1317 – 1320.

Frey BB, Daaleman TP, Peton V.Measuring a dimension of spirituality for health research : Validity of the spirituality index of well-being. Res Aging . 2005: 27(5): 556-77.

Inzlicht , M . , Aronson , J . , Good , C . , Mckay , L . (2006) . A particular resiliency to threatening enrronments . Journal of Experimental sOcial psychology , 42 , 323 – 339 .

Jimmerson, S.R .Campos. E.,&Greif , J. L. (2003). Toward an understanding of definitions and measures of school engagement and related

terms .The California school psychologist, 8,1-27.

Lilejeberg . J . F., Eklund J . M. Fritz ., m. v., & k linteberg, B. (2010). Poor school bonding and delinquency over time : Bidirectional effects and sex differences. Journal of adolescence xxx, 1-9.

Karcher, MJ. (2005). Connectedness ans school violence: aframework for developmental interventions. In: Cerler ER,(Ed). Handbook of school violence Binghamton. NY.Hawerth preis.

Maddox, S. J. & Prinz, R. J. (2003). School bonding in children and adolescents: Conceptualization, Assessment, and Associated Variables. Clinical Child and FamilyPsychology Review, 6 (1), 31-49.

Maddox, S. J. (2005). Assessment of school bonding in elementary school. Students.. Submitted in partial fulfillment of the requierments for the degree of doctor of philosophy. University of south Carrlina..

Oelsner, J. Lippold , Melissa A.& Greenberg , Mark ,T. (2010). Factors infiuenchng the development of school bonding among middle school students. The Juornal of Early Adolescence.xx(x)1-25

Okorodudu G N. Influence of parenting styles on adolescent delinquency in delta central senatorial district . Edo Journal of Counselling 200 : 3(1) : 58 – 86.

psychology . 50(4),443 – 960.

Sagatun,A.,Heyerdahl,S.,Wentzellarsen,.T.,&Lie n,L.(2014). Mentah healh problems in the 10 th grade and non-completion of upper secondary school:the mediating role of grades in a population-based longitudinal study. BMC Public Health, 14,16.

Scherman, V. (2002). School climate instrument : A Pilot study in pretoria and environs . A Published dissertation in Clnical Psychology , University of Pertoria.

Stephens, A. and Wardle, J. (2011). Health-related behavior: Prevalence and links with disease. *Health Psychology*. ed. J.W. in A. Kaptein: Blackwell.

Tajfel, H., Turner, G.C. (2007). An integrative theory of inter-group conflict, in approach to psychological education. *Journal of counseling psychology*, 74, 500-503.

Wellford, J. (2005). Life skills training. *Journal of International Relations*, 19, 687-711.

Willson, F., Mahabale M. (2013). Key concepts in public health. Fourth edition. Los Angeles. SAGE publication Ltd. P: 246.