

The Effect of Coping Skills Training on Reducing Feeling of Loneliness in Male Students

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Abstract: In this research the efficacy of coping skills training on reducing feeling of loneliness was investigated. Sample population comprised all male students of first grade high school in high schools of Chelgerd. The study design was semi-experimental with pretest-post-test and control group. Revised UCLA Loneliness Scale (pretest) was administered for all (180) students. A sample of 24 individuals was enrolled from those obtaining a score of higher than mean score by one standard deviation. 12 individuals were randomly assigned as experimental group and 12 as control. Eight coping skills were trained to the experimental group throughout 10 sessions and at the end post-test was administered for both groups. Using independent t test, we examined the significance of mean difference between the scores of pretest and post-test obtained by the students in the experimental and control groups. t was significant with degree of freedom 22 and at the level of 0.01, meaning that coping skills training was effective on decreasing feeling of loneliness.

Key words: Feeling of loneliness • Coping • Coping skills

INTRODUCTION

Feeling of loneliness has been recently studied by behavioral sciences experts and was not addressed in detail till early 20th century. Zilburg is among the first who have studied feeling of loneliness psychologically [1]. Richman in 1959 provided the context for systematic research on this through publishing a paper on loneliness [2]. Robert Weiss has been called “the Father of Research on Loneliness” by Zick Rubin in 1979 due to his main contribution to research on loneliness [1]. The peak of research on loneliness was noted in early 1980s. Piplau and Perlman, by theory of cognitive inconsistency, defined loneliness in 1982 based on the inconsistency between a level of social contact an individual is seeking and that of social contact realized by him/her [3]. This definition has had a fundamental role in development of Revised UCLA Loneliness Scale (UCLA). Loneliness is correlated with future negative orientation [4], insecure

attachment and poor social skills [5], self-confidence and low academic performance [6], the number of internet pals [7], self-criticism [8], impatience, anxiety, anger, low positivism, low and negative self-esteem, poor social skills and avoidant thinking [9], anxiety and depression [10], feeling insecure and dislike [11] and narcissism, suicide, hypochondriasis and alcoholism [12]. Yum in a research indicated that lonely individuals, significantly lower compared to the non lonely, perceived themselves and their friends as exhibiting positive behaviors [13].

The progression of adolescents into autonomy, individuality and identity formation increases the risk of feeling isolated and irresponsible and hence acceptance is greatly needed and susceptibility to loneliness increases. The risk of loneliness during adolescence is higher than that throughout other age periods and failure to remove this feeling, prior to coming out of adolescence, could provide the context for instigating concerns on social relations and mental health in the future [14].

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Feeling of loneliness is transient for some people and a tragedy for some others, often accompanying them. In this situation, their communication with others minimizes and they feel that they have remained abandoned with their own thoughts [15]. The anxiety due to feeling of loneliness causes the individual to refrain from expressing such feeling and getting help from experts, remaining in a vicious circle. High frequency of young and adolescent population compared to other age groups in the country, the peak of loneliness in the adolescence and the association of loneliness with other psychological-social difficulties represents the significance of finding the approaches to coping with loneliness. The research conducted on coping styles has indicated that the most adaptive approach to coping with life difficulties is to adopt an active and self-reliant approach. Positive reevaluation, seeking social support, self-relaxation, extroversion and sociability are among positive and efficient coping skills [16]. The research has indicated that cognitive therapy and social skills training could decrease loneliness [1]. Understanding one's discomfort and recognizing appropriate interventional methods of decreasing real difficulties are important concerns of working professions. Paying attention to appropriate approaches to detecting and coping with difficulties of lonely individuals is important and necessary. The research conducted in Iran has mainly addressed the correlation between loneliness and other psychological-social difficulties. Therefore, the research on approaches to declining feeling of loneliness seems necessary.

The psychologists have offered various definitions of loneliness: Sullivan in 1953 attributed loneliness to being deprived of intimacy. May in 1958 perceived loneliness as due to alienation from society and self [1]. Bushholz *et al.* describe loneliness as a discomforting condition which is caused by a sense of enthusiasm toward others and is associated with negative feelings such as sadness and despair [15]. Peplau and Pearlman in 1982 believed that when the existing interpersonal relations are distant from the desired interpersonal relations, one feels lonely [3]. Rokach in 1998 stated that loneliness comprised six stages: pain and awareness (of an issue), denial, fear and realism, seeking reasons and lack of self-confidence, acceptance and adaptation [17]. Loneliness is an objective, observable situation and people enjoy pleasant subjective experiences providing the context for development and creativity, while loneliness brings about emotional painful experiences and the individuals may have this feeling when accompanied with others. Theorists have offered different approaches

to initiation and continuation of loneliness: Psychoanalytic approach: According to Zilburg in 1938, feeling of loneliness is derived from childhood. Inappropriate feelings about personal power, narcissism and willingness to being continually paid attention bring about loneliness [15]. Social needs approach: Richman in 1959 attributed loneliness to the inability to distinguish between the objective and subjective worlds [2]. Bowlby in 1969 attributed loneliness to failure to satisfy the need for secure attachment [18]. Existentialist approach: Mustakas in 1969 believed that "anxiety of loneliness" activates defensive mechanisms which make the individual estrange from the real life and hence prevents him/her from communicating with others, bringing about a sense of emptiness [19]. Cognitive approach: The difference between existing interpersonal relations and the expected ones causes loneliness [14]. Interactive approach: Loneliness emanates from the interaction between individual characteristics (disappointment, social anxiety and poor social skills) and his/her cultural-social background [13]. Booth has offered the dimensions of loneliness as follows [12]: Communicative failure dimension: The individuals with feeling of loneliness have less communication in their life and/or have networks of communication with peers but they do not enjoy these communications. The lowest rate of loneliness is seen in the individuals who have an extensive and logical network of a variety of friendly relationship. Social skills dimension: These individuals introduce themselves with no qualification in social skills and interpersonal communication and have less social risk taking. Cognitive dimension: The approach to thinking in the individuals with feeling of loneliness is objective and/or inflexible and limited. These individuals attribute having no interpersonal communication to their own inabilities. Affective dimension: These individuals have negative "self-expression" and feel invaluable, internally empty, unacceptable, separated and empty.

The difference between loneliness and depression: Feeling of loneliness is different from depression in some ways. In loneliness, the individual's dissatisfaction is focused on interpersonal issues, but in depression, there are comprehensive concerns regarding life. long term negative emotions (sadness and valuelessness) are most probably indicative of depression. Feeling guilty is mainly the subject of depression. Feeling of loneliness could play a causative role in initiating and maintaining depression. Rich and Scovel in 1987 found that initiation of loneliness at the onset of one term was followed by depression in subsequent terms [20]. Koenig and Abrams in 1999

indicated that feeling of loneliness in adolescence represented depression 2.5 years later [21]. Coping skills refer to special behavioral, psychological attempts made to dominate, tolerate, decrease, or minimize stressful incidences. Lonely individuals assess incidences negatively, are defective in social skills and can hardly tolerate being isolated [16]. Rokach believed the steps of dealing with loneliness as comprising: acceptance, resource reconstruction and attachment seeking [17]. Kleinke has offered the skills to cope with feeling of loneliness which has been also used in the present work as follows [16]:

Loneliness perceived as a changeable problem, learning to like oneself through using loneliness to do self-actualizing works, training the skill of taking the initiative, training social skills, controlling one's thought, improving conversation skills, learning to tolerate being isolated and skill of being responsive.

MATERIALS AND METHODS

To investigate the efficacy of coping skills training, a semi-experimental design of pretest-post-test with control group was used. To control confounding variables, the study samples were randomly enrolled and assigned into experimental and control groups. Sample population included all male students of high schools in Chelgerd (180 individuals) studying in 2005-2006. UCLA was administered for all students. Of the students obtaining a score higher than mean score by one standard deviation, 24 students were enrolled as study sample. Then, 12 were randomly assigned into experimental group and 12 into control.

The eight coping skills offered by Kleinke to cope with feeling of loneliness were trained to experimental group within 10 1.5-hour sessions with one-week interval. In each session, the purpose of skill was expressed, explained and demonstrated and role playing, feedback giving and duty assignment were done to implement the skill practically in the intervals between the sessions.

First Session: The loneliness perceived as a changeable problem; self talking when feeling lonely, alternative self-talks and feeling of loneliness as a changeable problem are discussed.

Second Session: To learn to like oneself through using loneliness to do self-actualizing works; the skill of members to develop hilarity in themselves, to do favorable works for personal growth and creativity.

Third Session: To train the skill of taking the initiative; to avoid excessive caution and feelings and thoughts concerning avoidance and to encounter people and situations are rehearsed.

Fourth Session: To train social skills, to pay attention to the words of the addressee and encourage him/her to express his/her ideas, eye contact, to give information on oneself to others.

Fifth Session: To train social skills, to talk (directly), To use the names to call, to give comments strongly and to express negative and positive feelings.

Sixth Session: To apply social skills of responsiveness, to define responsive and its benefits, to sympathize with others and to listen actively to others. Seventh session: To control the style of one's own thinking, to assume the responsibility of reticence, to examine internal and external evidence and alternative logical thoughts.

Eighth Session: To improve conversation skills, the effect of suitable conversation on others' assessments, to have realistic expectations and features of desired conversation are discussed.

Ninth Session: To tolerate being separated; initial negative assessment of being separated and unrealistic illogical expectations on social interactions are examined. Tenth session: To tolerate being secluded; self-relaxation and mental imagination are exercised.

Tools of Measurement: To measure the rate of loneliness, UCLA developed by Russell et al. in 1980 was used. The tool comprises 10 statements with positive tone, 10 statements with negative tone, each with four choices [22].

Reliability and Validity: The developers of this scale obtained its reliability 0.96 as a coefficient in two studies [1]. Davarpanah found a coefficient of 0.78 in standardization of this scale. In addition, factor validity of the test identified four factors in this scale. These factors included "seclusion", "sociability", "no intimate friend" and "no feeling of loneliness" [1].

After coping skills were trained to the experimental group, UCLA was administered for both experimental and control groups as post-test and the mean difference in the scores of pretest and post-test was compared between the two groups.

Table 1: The mean, standard deviation and range of scores of the participants in pretest.

	No.	Mean	Standard deviation	Minimum score	Maximum score	Range of scores
Feeling of loneliness	180	43.03	7.22	24	62	38

Table 2: The mean, standard deviation and range of scores of sample study in pretest

	No.	Minimum score	Maximum score	Mean	Standard Deviation
Feeling of loneliness	24	52	60	54.83	2.27

Table 3: Comparison of mean \pm standard deviation of loneliness scores between the experimental and control groups

	Group	No.	Mean	Standard deviation
Pretest	Experimental	12	55.42	2.19
	Control	12	54.83	1.74
Post-test	Experimental	12	50.25	2.26
	Control	12	53.33	2.22

Table 4: The results of independent t-test to compare mean differences of scores between pretest and post-test

Levene's test for significance of difference between variances					
F	Level of significance	T	Degree of freedom	Level of significance	The difference between mean differences
2.937	0.101	8.158	22	0.000	3.75

RESULTS

The participants from whom sample study was recruited were 180 first grade high school students and the data as follows in Table 1 were obtained after administration of pretest.

The scores of participants indicated that 16.34% of the participants reported some degree of loneliness, which was higher than the mean (43.03) by one standard deviation (SD) (7.22).

To compare the mean difference of the two groups, the difference between the scores of pretest and post-test was obtained for each of the participants in the experimental and control groups and the mean differences were calculated for each group separately.

Hypothesis: Coping skills training is effective on decreasing loneliness in the students.

These results were calculated using SPSS 14. At first, the difference between the score of pretest and post-test of each participant in the experimental and control groups was calculated. Then, the mean difference of pretest and post-test scores obtained by the participants of the experimental and control groups was compared using independent t-test.

As shown in Table 4, in examining the significance of mean difference of pretest and post-test scores in the experimental and control groups, t was obtained 8.158 with degree of freedom 22. As the calculated t (8.158) is higher than Table's t (2.508) at the level of 0.01 with

degree of freedom 22, null hypothesis is rejected and research hypothesis is confirmed; the difference between the mean scores of pretest and post-test in the experimental and control group is significant at the level of 0.01. That is, coping skills training is effective on decreasing loneliness.

Research Findings: The findings of this research indicated that the mean difference in pretest and post-test scores between the control and experimental groups was significant at 0.01 level. Therefore, this hypothesis stating that coping training skills is effective on decreasing loneliness in male students was confirmed. The coping skills used in this study were a combination of cognitive, behavioral, social and communicative skills, comprising the dimensions of loneliness.

Here, the studies in which similar results were obtained are mentioned: Piplau et al. found that coping skills for lonely individuals was training the approaches that increased the responsibility of social communication [3]. A part of coping approaches is training the individuals, so that they find a new insight toward feeling of loneliness and think that their feeling of loneliness is changeable. This is consistent Elis Wais theory, according to which more adaptive assessments cause the individual to feel to have a greater control over his/her life [15].

Moazzami found that coping skills training causes the individuals to exhibit less confusion symptoms while facing complicated situations [23]. Goswick and Jones in

1982 found that the primary reasons for feeling of loneliness were poor social skills [24]. Weiss in 1979 believed that the individuals who are not able to communicate with others feel lonely [25].

As mentioned, the coping skills used in this study were a combination of cognitive, behavioral, social and communicative skills. In the referred studies, skill training has been raised independently, but in the present work, the combined efficacy of skills training was confirmed. Findings of present study indicated that 16.34% of the participants reported degrees of loneliness, which was higher than study sample mean by one standard deviation, meanly that they have reported a more painful and lengthier experience of loneliness. The previous works have also obtained similar findings, including: Rubenstein et al. in 1979 found that 15% of the individuals felt lonely most of the times or always [26] andersson indicated that 15-30% of the individuals had a continued experience of loneliness [27], Ostrov and Offer in 1987 found that 10-20% of adolescents had a feeling of painful and continual felling [28]. Davarpanah indicated that 15.9% of the study sample reported some degree of loneliness, which was higher than the mean score of study sample by one SD [1].

Of the studies that reported different results from those of the present work the following could be referred: otrov and Offer in 1987 found that more than 50% of the adolescents reported a repeated feeling of loneliness [28]. Parlee in 1979 found that 97% of adolescents feel lonely sometimes or often [29]. The reason for this inconsistency among the findings seem to be the fact that previous works have examined a wide spectrum of loneliness (feeling lonely sometimes or often), but in the present work, those with a score higher than mean by one SD have been considered as having a feeling of loneliness.

CONCLUSSION

The findings of the present study offer coping skills training as an effective way of dealing with feeling of loneliness. Therefore, coping skills training is recommended to be implemented within preventive projects in the school and the course of training coping skills to deal with loneliness should be held for the school advisers. The present study was conducted in one particular region of the country and characteristics of our participants seem to be different from the students in other regions of the country. Therefore, further similar research is needed to investigate the efficacy of social

skills training for male and female high school students across whole country. It is recommended to investigate the effect of social skills and cognitive therapy separately on decrease in feeling of loneliness. In addition, the rate of loneliness should be compared among students of different grades and courses in high schools.

Since the sampling was done in a small city, study of other groups is needed to generalize the findings to other regions. The present work was conducted on the male first grade students of public high schools and the findings should be cautiously generalized to the students of non-profit and public exemplary schools.

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