

**The effect of social and communication skills training in reducing high-risk behaviors of adolescences**  
**Case study: adolescents of Kerman juvenile detention center**

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***Abstract***

The purpose of this study was to investigate the effect of social and communication skills training on reducing high-risk behaviors in adolescences in Kerman in 2021. The statistical population of this study consisted of adolescents of Kerman juvenile detention center, with the total number of 43 individuals, who were tested by all-counting sampling method using quasi-experimental research method. All subjects were pre-tested using a high-risk behaviors questionnaire and after teaching social and communication skills to the experimental group, which included 22 persons, the post-test was performed. Data were analyzed using MANCOVA index in the SPSS software, ver21. The results of the hypothesis test showed that social and communication skills training has been effective in reducing the suicidal tendency and attempt of adolescences in Kerman juvenile detention center. That is, the F-ratio is equal to 96.11, with 95% confidence.

***Keywords:*** Social skills. Communication skills. Suicide attempt. Suicidal tendency. Adolescences in juvenile detention center.

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## **1. Introduction**

Adolescence is a period of development that is associated with rapid physical, psychological, social and cultural changes. Behavioral patterns formed during this period will strongly affect the future of a person. Accordingly, some of the behavioral problems occurring during the adolescence will show themselves as stable features in later life stages (Ahmadi & et al , 2015 : 4). Because of self-centeredness and lack of proper understanding of behaviors, adolescence is an important stage to begin high-risk behaviors (Han , 2012). During this phase of life, the adolescent may tend to engage in risky and harmful behaviors to prove oneself to family, friends and the community and to gain a foothold among them (Kloep, 2009). Erickson states that adolescence is a period in which one has to face identity crisis and try to deal with it, that is, when one integrates one's ideas about oneself and what others think of him/her, resulting in a cohesive and stable image of oneself (Schultz & Schultz 2019 : 25).

During this period, adolescents face risks such as companionship with delinquent peers and performing risky behaviors. Adolescence is one of the most important phases in the process of human development (MC Cauley & et al , 2016 ; Dariotis & Johnson , 2015; Arria & et al 2014). Stepping into this period usually begins with puberty (MC Cauley, 2016). The flourishing of sexual desire, the consolidation of occupational and social interests, and the desire for freedom and independence are important features of adolescence. Physical, mental and personality changes in this period raise new demands. On the one hand, the pressure of instincts, needs and desire to follow the values of adolescence, as well as acceptance and absorption in peer groups, group pressures, desire to express oneself and establishing an independent life are enough to put the adolescent in a mental crisis and a psychological disorder. On the other hand, lack of facilities, unhealthy emotional relationships, lack of attention to the desires, values and opinions of adolescents, as well as inexperience and lack of sufficient knowledge can lead to complications such as feelings of fruitlessness, emptiness, and inadequacy (Henneberger & et al , 2016). As a result, a tendency to social deviations, including high risk behaviors will be created in oneself (Brown & et al , 2015).

According to the results of related studies, twenty-five to fifty percent of all children and adolescents between the ages of ten and seventeen in the United States are at risk of educational, emotional, economic, and social limitations, which can lead them to risky behaviors (Zarei Zavaraki & Molazadegan, 2012).

## **2. Review of Literature**

Various studies worldwide have shown that most high-risk behaviors, including smoking, drinking, and drug use amongst young people begin before the age of 18 (El Mhamdi & et al., 2011). Vojdani quoted Thomas as saying that studies conducted in Iran has also revealed that high-risk behaviors like smoking, hookah use, alcohol consumption, and drug use have been prevalent among adolescents aged 14 to 18 years (Vojdani, 2018: 1139).

Given the young population of Iran and the fact that adolescents are particularly vulnerable to high-risk behaviors, it is obvious that any damage and insufficiency in physical and mental health reducing the ability of this motivator and influential group will inevitably result in slowing the society progress. Moreover, lack of physical and mental health in adolescents will decrease their academic performance, and in long term will negatively affect healthy people of the society (Yaryari & et al., 2015; Pop & et al., 2016). Sexual maturity and the onset of sexual activity as well as lack of knowledge and skills needed to make the right decisions, a pattern of thinking in which meeting immediate needs takes precedence over trying to achieve long-term goals, and initiating behaviors that may form unhealthy and problematic habits for all life are challenges an adolescent may face (Parajapati & et al., 2011).

When a teenager's unpreparedness for the tools and skills needed to deal with problems is accompanied by other characteristics of the adolescence, in many cases, he/she may confront dangerous and troubled behaviors and tasks (Rashid, 2015 :32). Adolescence is an important stage in the transition from parental control to independence, during which adolescents may choose friends not being accepted by their parents, may have clothes being disliked by them, or may compare their families with those of others (Marzban & et al., 2016 :2). An important issue for sociologists is social order and cohesion. However, it must be borne in mind that not all society members always conform to the social norms that create social order, and some of them may commit deviant

behavior (Ahmadi ◊ 2015:53). An act is considered a deviation when it is socially defined as a deviant behavior and the general culture of the society considers this act as a deviation and punishes anyone who commits such an act (Ahmadi ◊ 2017:6). Social deviance is often defined as a behavior that is contrary to the consensus of society and is defined as inconsistency with a norm or set of norms accepted by the majority of society. Thus, from the view point of sociology of deviance, social deviance is a continuum of a behavior that violates the law, such as murder and embezzlement, and/or violates the sociocultural norms without formal or obvious offense, such as youth run away from home (Ahmadi◊ 2015:20). Some deviant behaviors are related to a particular age group. Deviant behavior of adolescents who have not reached the legal age (under 18) is called delinquent behavior, and adolescents who commit these behaviors are called young delinquents. The term was formally and legally coined in 1899, and at the same time, the first criminal law was introduced in Chicago, USA (Shoemaker ◊ 2018 : 15 - 16).

The young population and the delay in the process of socialization in relation to the new world order in the transitional society of contemporary Iran, has led to the growth of the issue of delinquency among young people and adolescents. Sociology of deviance has begun to focus and study on juvenile delinquency when a wide range of abnormal behaviors such as drug use, vandalism on public and private property, post-football hooliganism, alcohol abuse, illicit and unsafe sexual behavior, and running away from home and school spread among teenagers (Ahmadi ,2017: 129). There are different types of deviant behaviors in youth, which according to their depth, severity and consequences, are divided into serious delinquencies such as rape, armed robbery, alcohol and drug abuse, and delinquencies like running away from home and school, vandalism and petty thefts.

A type of deviant behaviors, which is called high-risk behaviors, is discussed in this study. High-risk behaviors are behaviors that increase the likelihood of negative and destructive physical, psychological and social consequences for an individual. A relatively limited number of high-risk behaviors, which mainly begin in adolescence and young adulthood, are the leading causes of death and disease in industrialized and developing countries

(Marzban & et al † 2016). Many high-risk behaviors, such as smoking, alcohol and drug use, and unsafe sex, occur during adolescence and young adulthood. Studies have shown that most high-risk behaviors, such as smoking, drinking, drug use, and unsafe sexual behaviors, occur in adolescence and early adulthood, beginning before the age of 18. In Iran, most cases of sexual negligence (55.6%) occur between the ages of 16 and 21 years. In Iran, the average age of smoking initiation is 16.6 years and the highest proportion of addicts (45.7%) have started using drugs between the ages of 17 and 22 years. Today, having social and communication skills is a necessary and basic element of social life and can play an important role in preventing high-risk behaviors, particularly among adolescents, who are in a period of transition associated with various crises (National Youth Organization † 2020). Meanwhile, studies show that appropriate therapeutic interventions, before and after the action, can greatly reduce adolescent high-risk behaviors such as addiction, suicide and escape (Rahimi & et al † 2016 : 45).

Many studies have been conducted on recognizing the personality and cognitive characteristics of such individuals as well as environmental risk factors to develop appropriate therapeutic interventions. In most of these studies, it has been found that these individuals have particular cognitive characteristics which can be a significant risk factor for their actions. These characteristics include lack of dreaming, lack of problem-solving skills, cognitive petrification, frustration, negative opinion towards oneself and the environment, lack of proper communication with others, and so on (Rickelman & Houfek † 1995). Trainings can reduce the proportion of people who did not smoke but later become regular smokers before the training by almost 67% (Botvin & et al † 1997).

At-risk people, through life skills training, learn how to be positive and adaptable to other people, their community, culture and environment, how to maintain their mental health, and how to deal with the current problems that surround them. Researchers recommend therapy through skills training because it has no adverse effects and directly addresses the problems of the person at risk (Refahi † 2008). In a study, it was found that community-based educational programs, by creating a suitable platform for public participation, can be a

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model for preventing drug abuse and reducing related high-risk behaviors as a result of reducing costs and complications caused by this problem (Yazdan Panah & et al , 2011). In another study, it was concluded that using life skills can reduce stress, anxiety, and emotional reactions, in general, in adolescents (Haj Amini & et al , 2009). Social skills are defined as learned adaptive behaviors that enable a person to interact with different people, react positively, and avoid behaviors that have negative consequences (Kartiedge & Milbern , 2016). Social skills are behaviors whose development can affect relationships between individuals, as well as their mental health and useful performance in society. According to Harjie, social skill is a set of purposeful behaviors, related to each other and appropriate to the situation that is learnable and under the control of the individual (Hargie & et al 2013:13). Weaknesses in social skills lead to behaviors such as delinquency, maladaptation, academic failure, drug abuse, and addiction. Having social and communication skills provides the ground for active participation in society and causes individual to show effective social reactions in the face of real difficult social situations.

In fact, having social skills realizes one's potential abilities and is necessary to create, maintain and organize a human relationship. Accordingly, social skills are very diverse and there is no single classification for them. In some classifications, social skills include nine dimensions as follows: assertiveness skills, skills related to fostering the sense of cooperation, responsibility and altruism, self-governance skills, skills related to social understanding and recognizing community values, social law skills, job seeking and retention skills, leisure skills, coping skills, and communication skills. However, in the present study, these skills are considered separately, not as a subset of social skills. Communication skills are part of life skills, and the ability and capacity to communicate leads to success in life (Ahmadi & Moini , 2015).

Communication skills are generally related to the process of communication between at least two people and is referred to a set of behaviors that help a person to make a relation between his/her emotions and needs and achieve interpersonal and social goals. Communication skills include those skills through which individuals can engage in interpersonal interactions and the communication process, the process by which individuals share verbal and

non-verbal messages with each other. Having these skills can prevent young people and adolescents from engaging in risky behaviors. Communication skills include a variety of skills. Active listening ability, emotional regulation skills, ability to receive and send clear communication messages and being active and decisive in communication, verbal and non-verbal skills, translingual skills, ability to initiate communication, communication with strangers, friendship skills, communication skills with the opposite gender, and social interaction development skills are among the communication skills (Ahmadi & Moini , 2015).

Some studies have examined the relationship between living in urban environments and high-risk behaviors and the results showed that living in urban environments is associated with more risky behaviors. Considering the young population of Iran and that adolescents are the most vulnerable to high-risk behaviors, it is obvious that any loss and inadequacy in physical and mental health, and the subsequent decrease in the ability of this motivational group, will inevitably result in a slowdown in the progress of the society. Moreover, lack of physical and mental health in adolescents in the long run may also have a negative impact on the health of people in the community (Esmail Zadeh & et al 2014 :75). As we face an anonymous phenomenon in urban environments, particularly in large cities, and the population density and heterogeneity increase, informal social controls are weakened and formal controls cannot respond to the large population of large cities; so the occurrence of delinquent and high-risk behaviors increases.

The city of Kerman is one of the largest cities in Iran, with a population of over seven hundred thousand people, located in a special geographical position as the capital of the largest province in the country. Kerman has been a destination for the flood of immigrants from other cities following the Bam and Zarand earthquake .Cultural and ethnic diversity was evident in this immigrant population, and this factor itself accounts for criminal tendencies. Signs of tendency to taking risk in young people can be seen in the prevalence of extreme sports such as free rock climbing, the use of hallucinogenic drugs such as ecstasy and energizing drugs.Unsafe sexual activity, alcohol consumption, violence, suicide and self-harm (Ball & et al , 2012 : 18).

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In this situation, equipping young people with skills such as social and communication skills reduces the level of risk taking and puts their potential capabilities into action. Acquiring skills has been a priority in young people demands, after education, employment and getting rich (National Youth Organization ◊ 2020). Thus, social and communication skills training strengthen youth problem-solving processes and reduces high-risk behaviors and risk factors that are a major threat to young people. This study aims to teach these skills to young people and adolescents involved in a variety of high-risk behaviors, ie violent behaviors, so that they become aware of the danger of these behaviors and finally to reduce and eliminate this social problem. In previous study, the relationship between skills and high-risk behaviors of young people was examined in general, but in the present study the emphasis was on all high-risk behaviors and the effect of training on such behaviors. Social pressure theories deal with factors in the society that oppress some people and force them to behave in a perverse way (Agnew ◊ 2012).

Robert Merton attributes this pressure to one's inability to achieve socially acceptable goals. However, Albert Cohen related this pressure to the failure to reach a high position in society. Cloward and Ohlin believed that lack of illegal opportunities to achieve the goal is the pressure on people and their drive to misbehavior (Thio◊ 2018: 17). Among the social learning theorists, we can name Sutherland, who proposed the differential association theory and believed that people behave defiantly because they have more deviant relationships than non-deviant ones. People's association with deviant ideas or individuals who pursue misbehavior is the main cause of their misbehavior. Daniel Glaser who proposed the theory of differential identity also believed that interaction with real and virtual persons who misbehave is not harmful on its own, unless it reaches a point where one knows oneself as one of the persons who misbehave and identifies with them (Glaser ◊ 1956).

In their theory of differential reinforcement, based on the theory of reinforcement in psychology, Burgess and Akers say that the continuation or cessation of any behavior depends on encouragement or punishment, that is, encouragement leads to the continuation of certain behavior and punishment will stop it; and in fact, reinforcement is the main cause of behavioral deviance

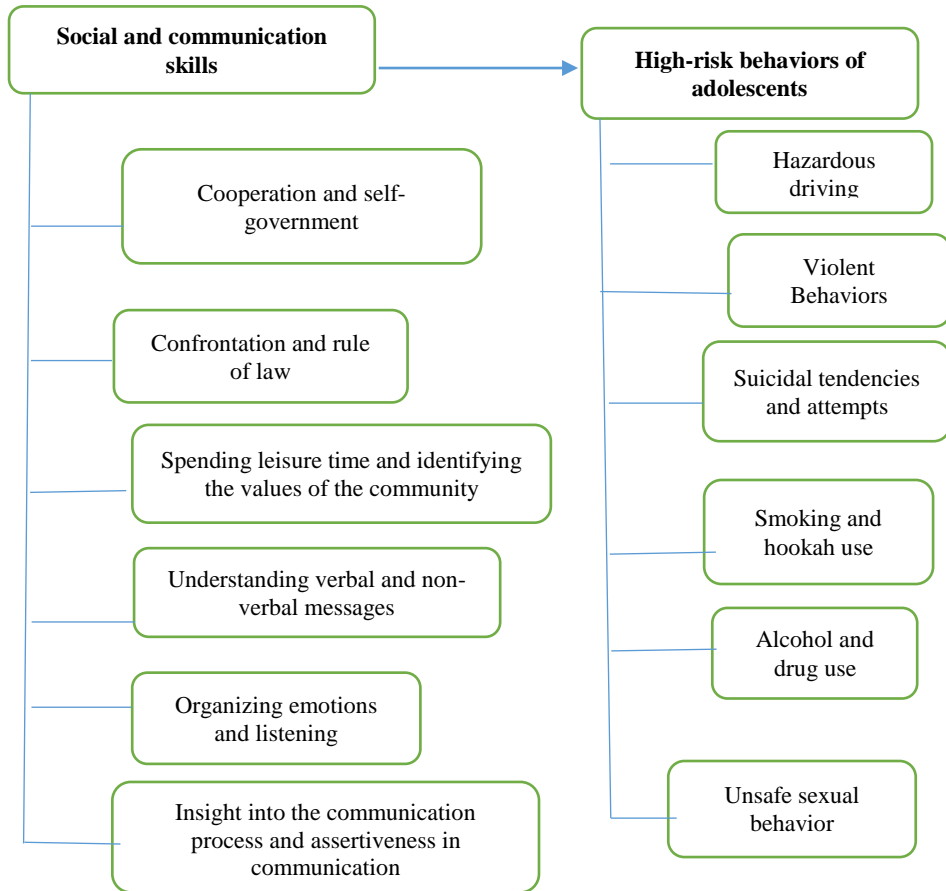


(Sedigh Sarvestani ◊ 2009 : 50 ). Park's ecological theory with an urban sociological approach, in the Chicago school, explained juvenile delinquency, which is based on the premise that delinquency is related to some urban characteristics like language, ethnicity, immigration, residential areas, and population density. Park believed that urban areas hinder the motivations and instincts of residents and leads to social deviations (Ahmadi◊ 2015). In labeling theory, there is a completely different sociological approach that emphasizes the role of social labeling in the spread of crime and deviation. The basic premise of labeling theory is that society's definition of some human behaviors is the basis of social deviation (Ahmadi◊ 2015).

Regarding social skills as an independent variable, there are two main types of theories: psychological theories and social theories. Psychological theories include expectation, attribution, and hierarchy theories. In expectation theory, it is emphasized on the relationship between expectations related to verbal and non-verbal behavior (Wilson & Sabby ◊ 2003 :11). In attribution theory, people are optimistic about situations. They attribute their failure or success to various factors. In fact, attributing is a kind of causal judgment about behavior or events. For example, a person who did not score well on a test may attribute his/her failure to his/her unpreparedness or the difficulty of the test. However, people feel proud when they attribute their success to internal factors (Wilson & Sabby 2003: 16 - 15).

In hierarchy theory, people involved in communication perform action plans skillfully. With reference to the theory of cybernetic control, emphasis is placed on self-regulatory systems. Accordingly, people try to regulate their behavior and communication according to the feedback they receive from others (Wilson & Sabby ◊ 2003: 24). Instead of emphasizing the individual as the unit of analysis, social theories focus on social groups. The relational dialectical theory of Baxter and Montgomery is one of the social theories that states that actions are sensitive to needs and contradictions. This theory emphasizes relationships that revolve around the dynamic interaction of conflicting tendencies get organized when they are displayed in interaction (Wilson & Sabby ◊ 2003 : 29 - 30).

According to the mentioned theories, the theoretical framework of the research can be designed in the form of an explanatory model.



**Figure 1: Explanatory model of the research**

Due to the importance of the issue of high-risk behaviors in adolescents, several studies have been performed in this field. Therefore, herein we have tried to review a brief history of the conducted studies. In a study, Alizadeh et al. studied the effectiveness of social adequacy training on the tendency to high-risk behaviors of adolescent boys in welfare centers in Mashhad and Sabzevar. The results showed a significant effect on the post-test scores of the subscales of tendency to risky behaviors, with a 5% error rate. The post-test scores of the subscales explain the tendency to hazardous driving, propensity to

violence, tendency to smoke, drugs and alcohol, tendency to sexual intercourse and behavior, and tendency to the opposite gender. The main hypothesis of the study, ie social adequacy training has an effect on the tendency to high-risk behaviors of adolescent boys in welfare boarding schools, was confirmed (Alizadeh & et al · 2020). In a case study performed by Khajeh Nouri and Hasheminia, the relationship between leisure time and delinquency in high school students in Shiraz was examined. Results of their study showed that there was a negative relationship between organized leisure activities and delinquent behaviors, while there was a significant positive relationship between unorganized leisure activities and delinquency.

The results of the regression model with four variables of wasting time, gender, unsupervised socialization and organized leisure time all together explained 23% of the changes in the delinquency variable (Khajeh Nouri & Hasheminia · 2010). Shahbazian Khoniq et al. performed a research entitled "Study of the role of moral and social intelligence in high-risk behaviors of students of Kurdistan University of Medical Sciences in the academic year 2016-2017". Based on correlation coefficients, the results showed that except for the relationship between the parameter of compassion with alcohol consumption and the parameters of honesty and forgiveness with a tendency to high-risk sexual behaviors, there were significant negative relationships between other parameters of moral intelligence and high-risk behaviors ( $p \leq 0.05$ ). The results of multiple regression analysis also showed that the parameters of moral intelligence and social intelligence were able to significantly predict all parameters of high-risk behaviors (Shahbazian Khonigh & et al · 2017).

In a study entitled "School Violence: The role of empathy, communication skills and conflict resolution in reducing adolescent violent behaviors", Kordnoghahi et al. (2017) examined the origins of school violence. The results showed that the covariance matrix of the data was homogeneous. The findings of multivariate analysis of covariance were presented to examine the effect of experimental action (communication skills training) on dependent variables (empathy, effective communication, and conflict resolution). Pillai's trace (most conservative) and Wilks' lambda (most common) were also presented for

each pre-test and group. Therefore, considering the significance of Pillai's trace and Wilks' lambda ( $p \leq 0.05$ ), the effect of communication skills training was confirmed (Kordnoghi & et al · 2017). Rahimi et al. have studied the effect of life skills training on reducing risky behaviors of at-risk male high-school students. Results of their study showed that life skills training had significantly reduced the attitudes of at-risk students towards drug use and their feelings of depression, as well as the problems of male students in terms of courage, self-control, and the level of excitement (Rahimi & et al 2016).

In a study, Rezai and Sahebdel evaluate the effectiveness of spiritual intelligence skills training in reducing high-risk behaviors of male high-school students. Based on the results of their study, self-awareness training reduced the risk of high-risk behaviors in the experimental group, with a significance level of 95%, using the statistical method of analysis of covariance and independent t-test (Rezai & Sahebdel · 2016).

In a case study investigating the relationship between social skills and high-risk behaviors of young people in Shiraz, Ahmadi and Moini showed that there was a significant relationship among income, attachment to family and friends, commitment to norms, participation, belief in moral principles, social skills and high-risk behaviors. There were also significant differences among gender, marital status, social class and family structure in terms of high-risk behaviors; While there were no significant relationships between age, education and high-risk behaviors. The regression equation related to multivariate analysis, independent variables for predicting the dependent variable of high-risk behaviors, showed that the total of four variables of commitment to norms, gender (male), belief to ethical principles and social skills accounted for 43% of the changes in dependent variable (Ahmadi & Moini · 2015). Based on the purpose of this study, which is to evaluate the effectiveness of social and communication skills training on high-risk behaviors of adolescents, the following hypotheses were developed:

- Social and communication skills training is effective in reducing the violent behaviors of adolescents.
- Social and communication skills training is effective in reducing the suicidal tendency and attempt of adolescents.

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- Social and communication skills training is effective in reducing adolescent smoking and hookah use.
  - Social and communication skills training is effective in reducing alcohol and drug use in adolescents.
  - Social and communication skills training is effective in reducing unsafe sexual behavior of adolescents.
  - Social and communication skills training is effective in reducing cyberspace behaviors (watching porn movies) of adolescents.
  - Social and communication skills training is effective in reducing adolescent hazardous driving.

### **3. Methodolgy**

In this study, the quasi-experimental method has been used. The statistical population of the study consisted of 43 people of the adolescents of Kerman juvenile detention center in 2021. Considering the small number of subjects in this study, all-counting method was applied and so all of the 43 subjects were assessed. The questionnaire tool (pre-test-post-test), as a very structured instrument for collecting data, was used in this study, and each respondent were asked the same set of questions (De Vaus, 2015: 56). High-risk behaviors including 40 items in 7 areas including hazardous driving, violent behaviors, suicidal tendency and attempt, smoking and hookah use, alcohol and drug use, unsafe sexual behavior and cyber behaviors (pornographic movies) were measured through a range of responses (never, once or twice, sometimes and most of the time). The validity of the research was guaranteed by formal validity and through referring to and exchanging opinions with experts. Cronbach's alpha was used to measure the reliability of the measurement tool. Cronbach's alpha coefficient for research variables was at an acceptable level and for the main variables of the study, ie high-risk behaviors, was equal to 0.91, which showed a high reliability for the scale designed to measure high-risk behaviors.

Social and communication skills training was performed in this study and so an educational program was presented. The program and steps for social and communication skills training were as follows:

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The teaching method was such that the researcher (trainer) first stated the topic of each session and its purpose and then presented the topic in about 20 minutes. The skills were then presented as examples to the subjects. After that, the subjects should perform the practical activities presented in the class and join group discussion. The researcher should participate in group discussions and provide the subjects with necessary guidance. Necessary feedback was also given to the group by the researcher. This training course was offered one session per week in a twelve-week period. One month after the last session of the social and communication skills training (independent variable), each group was retested (follow-up test).

#### Protocol for social and communication skills training

Session 1: Introducing and getting to know the members of the group, stating the rules of the group, discussing the importance of social skills

Session 2: Teaching the methods of exchanging daily compliments, proper starting, continuing and ending a conversation, and listening, with practice

Session 3: Teaching how to demand from others and the skills related to expressing positive and negative emotions

Session 4: Teaching how to express specific emotions, such as anger and sadness, and explaining self-control using patterns and practicing

Session 5: Appropriate decisions, how to say no, with practice and homework

Session 6: How to be open to criticism (accepting), apologize skills, with practice

Session 7: Training and practicing participation and cooperation and how to cope with problems and crises in relationships with peers and family members

Session 8: Responsibility, expressing a positive opinion about (one)self through practice

Session 9: How to deal with and solve the problems

Session 10: Explaining how to accept and cope with the rules and regulations at home, school or community

Session 11: Assertiveness

Session 12: Summarizing and evaluating the results of the sessions

Moreover, a post-test was performed one month following the end of the sessions.

This study was a field research and for the theoretical section library was used to collect data.

#### **4. Findings**

One of the methods of collecting, organizing, and analyzing data is navigation, which was used in this study (De Vau, 2015 :44). The navigation method provides information that is less detailed, but we can be relatively sure that it fits over a wide area (Gidenz, 2019: 729). Quasi-experimental method has been used in this research. because the subjects are human (adolescents) and effort to study social and communication skills training is a variable to increase adolescents' awareness to reduce their risky behaviors, including suicidal tendency and attempt. There are two types of experimental researches: cohort and case-control study (Naderi & Seifnaraghi, 2015 : 92 – 93). In this study, which is a type of analytical observational study, a reference population or part of it was selected and after examining the characteristics of the population, two separate groups were formed, one with exposure to risk factor and another with no exposure (The group under skills training and the group without skills training). These two groups were examined and evaluated without any special restrictions over a given period of time (Tabibi & et al, 2016 : 240).

The descriptive findings of the study showed that out of the 22 participants in the experimental group, 1 was 11 years old, 3 were 16 years old, 8 were 17 years old, 5 were 18 years old, and 5 were 19 years old. Out of the 21 participants in the control group, 9 subjects were 16 years old, 8 were 17 years old, and 4 were 19 years old. In terms of education, from the participants in the control group, 4 persons had primary education, 2 were middle school, 13 were high school, and 2 persons did not declare their education. In the experimental group, 4 persons had primary education, 7 were middle school, 9 were high school and 2 were high school graduates. In terms of marital status, 18 participants in the control group were single and 3 were married. The experimental group consisted of 20 single and 2 married persons. In the control

group, there were 13 Fars, 1 Turkish, 1 Kurdish, and 6 Baluch participants. In the experimental group, there were 16 Persian and 3 Baluch persons. Three participants of the experimental group did not specify their ethnicity. Eighteen participants in the control group lived with their parents, 1 with his/her father and 2 with their mothers. In the experimental group, 19 persons lived with their parents, 1 with his/her father and 2 with their mothers.

Tables 1 and 2 show that social and communication skills training has been effective in reducing high-risk behaviors in adolescents.

**Table 1 - Levin test results, equality of error variances in dependent variables**

Variables	F	Degree of freedom 1	Degree of freedom 2	Significance level
Violent Behaviors	3.94	1	34	0.068
Suicidal tendency and attempt	3.22	1	34	0.076
Smoking and hookah use	3.25	1	34	0.074
Alcohol and drug use	4.1	1	34	0.062
Unsafe sexual behavior	2.91	1	34	0.089
Cyberspace behaviors	3.87	1	34	0.072
Hazardous driving	4.00	1	34	0.066

According to the present design, which was a pre-test and post-test, multivariate analysis of covariance was used to analyze the data and control the effect of the pre-test. In this type of analysis, the following conditions must be met in order to be sure of the results. One of the assumptions of the multivariate analysis of covariance test is to examine the homogeneity of variance-covariance matrices, for which Box 1 test has been used. The value of this test ( $P = 0.215$ ,  $F = 1.35$  and Box's  $M = 8.802$ ) was calculated and since the significance of the box test is more than 0.05, it can be concluded that the variances-covariance matrices are homogeneous. Levin homogeneity test was used to examine the homogeneity of variances of the two groups in the post-test stage.

As presented in Table 1, since the results of the Levin test are not significant for any of the variables ( $P > 0.05$ ), the assumption of variance homogeneity is confirmed. Considering to the establishment of the above assumptions, we are allowed to use multivariate analysis of covariance.



**Table 2 - Results of the multivariate analysis of covariance for comparison of groups in dependent variables with pre-test control**

Variable	Test type	Value	F	Degree of freedom for hypothesis	Degree of freedom for error	Significance level	Effect size
	Wilks Lambda	0.612	2.539	7	28	0.037	0.038

As presented in Table 2, the corresponding multivariate statistic, Wilks Lambda, is significant at the level of 95% ( $P < 0.05$ ). Thus, the statistical zero assumption is rejected. It is found that the seven linearly- dependent variables, the post-test rate of the variables of violent behaviors, suicidal tendency and attempt, smoking and hookah use, alcohol and drug use, sexual behavior, cyber-related behaviors and hazardous driving, after adjusting for differences of seven covariates, and pre-tests of violent behaviors, suicidal tendency and attempt, smoking and hookah use, alcohol and drug use, sexual behavior, and cyberspace behaviors are affected by the independent variable (social and communication skills training).

**Table 3 - Test of equality of regression lines slope for experimental conditions (suicidal tendency and attempt)**

Source	Sum of squares	Degree of freedom	Mean square	F	Significance level
Pre-test	90.64	1	90.64	6.79	0.073
Group and pre-test	3.27	1	3.27	6.11	0.068
Error	520.89	39	16.36		
Total	752.578	43			

Tables 3 and 4 show that social and communication skills training has been effective in reducing suicidal tendency and attempt. Given that the multivariate test was significant and the linearly-dependent variable was affected by the independent variable, we examined whether each of the dependent variables was affected by the independent variable. Thus, univariate analysis of covariance was used. One of the data prerequisites for covariance is that covariates must have a definite linear relationship with the dependent variable and use of discrete variables like gender as the covariate must be avoided. Both of these prerequisites are observed in the present study. One of the tests performed at the beginning of analysis of covariance is test of equality of regression lines slope for experimental conditions. In other words, the

interaction between the experimental condition and the covariate (pre-test) should not be significant.

Since the value of the significance level is equal to (0.068) which is more than 0.05, the slope of the linear regression is not significant. The results of analysis of covariance are listed in Table 4 below.

**Table 4 - Results of covariance analysis of suicidal tendency and attempt in the experimental and control groups**

Source	Sum of squares	Degree of freedom	Mean square	F	Significance level
(Pre-test)	63.174	1	63.174	7.79	0.065
Group	94.753	1	94.753	11.96	0.022
Error	324.17	40	8.1		
Total	752.578	43			

According to the information in Table 4,  $P < 0.05$ ,  $F = 11.96$ , after eliminating the pre-test effect, there is a significant difference between the experimental and control groups in terms of the suicidal tendency and attempt, and the opposite hypothesis is confirmed. Considering the low average of suicidal tendency and attempt in the control group, compared to the experimental group, social and communication skills training has been effective in reducing the suicidal tendency and attempt.

## 5. Conclusion

Given the fact that adolescents and young people in any society are the managers, officials, administrators, and producers of the future society, it is very important to pay attention to strategies to reduce high-risk behaviors at adolescence. The results of the hypothesis test showed that there was a significant relationship between social and communication skills training and reducing high-risk behaviors such as suicide. Skills training could reduce the effect of these behaviors. It can be deduced from the study results, as in previous studies, social and communication skills training has been generally effective in reducing high-risk behaviors. This research is consistent with previous studies; however, in terms of sub-hypotheses like suicidal tendency and attempt, it was inconsistent with the results of studies by Alizadeh et al., Khajeh Nouri and Hasheminia, Shahbazian Khoniq et al., Rahimi et al., Rezaei and Sahebdel, Ahmadi and Moeini.

As mentioned earlier, the theoretical framework of this research is primarily based on the theory of social pressure, whose theorists, including Robert Merton, attribute this pressure to a person's inability to achieve socially acceptable goals. Albert Cohen attributes the failure to reach a high position in society to pressure. Cloward and Ohlin proposed that lack of illegal opportunities to achieve the goal is the pressure on a person and his/her drive to misbehavior. Sutherland, in the differential association theory, stated that people behave defiantly because they have more deviant relationships than non-deviant ones. People's association with deviant ideas or individuals who pursue misbehavior is the main cause of their deviant behavior. Moreover, Chicago School sociologists studied urban issues at two macro and micro levels. Their research includes macro theories that show how crime figures differ among different communities, as well as micro-level theories that focus on the social psychology currents that underlie these macro-level issues.

The theory of social disorganization, developed by Park and two other follower of Chicago school named Shaw and McKay, explains that the social problems of Chicago were due to uncontrolled patterns of immigration and the creation of natural areas, in which people are isolated from the general culture of society. Additionally, the basic premise in the theory of labeling is that the definition that society provides of some human behavior is the basis of social deviation. Since these goals are important in the normal development of adolescents, high-risk behaviors help adolescents and young people to achieve these goals. Conversely, the negative consequences of high-risk behaviors can jeopardize many developmental issues, preventing competence, maturity, desirable social roles, and a healthy transition to adulthood.

According to various theories in the literature, it seems that high-risk behaviors of adolescents at different levels of crimes are derived from the environment and social status of their friends and peers, and a favorable situation for adolescents can prevent many dangers in their later ages. It can be concluded from the results of the present study that social and communication skills training has been significantly effective in reducing high-risk behaviors of adolescents. Additionally, as the hypothesis test shows, the seven linearly-dependent variables, post-test rate of variables of violent behaviors, suicidal

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tendency and attempt, smoking and hookah use, alcohol and drug use, unsafe sexual behavior, cyber behaviors (watching pornographic movies) and dangerous driving, after adjusting for differences of seven covariates tests and pre-tests of suicidal tendency and attempt are influenced by the independent variable (social and communication skills training). The main purpose of this study was to teach social and communication skills to adolescents in the Juvenile detention center to reduce high-risk behaviors. The training program taught adolescents how to use the skills of assertiveness, decision-making and critical thinking to resist the temptation or drug use suggestion by peers. The aim was to design a single primary prevention program. Skills training was effective and adolescents' high-risk behaviors like suicide has been affected by the independent variable (social and communication skills training). Economic conditions or residential area of the person is one of the parameters that can be mentioned for the lack of effect of skills training on some behaviors. Many adolescents in the Juvenile detention center were also from low-income families.

Another parameter disrupting the effect of training on some behaviors is the location (situation) of the statistical sample of the research. This group of adolescents did not have access to some behaviors such as sexual behaviors and alcohol consumption and did not have access to cyber world. In general, among different institutions, family acts as a major variable in the presence or absence of delinquency. Because it is the first place a person faces and grows up there. Therefore, family plays a very important role in internalizing the norms of society and teaching proper social and communication skills. However, if the family fails to perform its functions well, many deviations and delinquencies will occur. Family structure, particularly a broken family in which one or both parents are absent due to events such as death, divorce and other cases, is one of the factors influencing the behavior of young people.

The more conflicts between parents, the more stressful the home environment, the weaker the parents' relationship with their children, and the weaker parenting patterns exist, the higher the rate of adolescent delinquency and risky behaviors will be. Emotional unity of family members, loving and respectful behavior of parents toward their children, and in marital

compatibility make adolescents and young people significantly less likely to engage in delinquent and high-risk behaviors. Lack of social and communication skills to perform the right behavior leads to delinquent acts and high-risk behaviors by individuals. Equipping individuals with social and communication skills enables them to react appropriately and rationally in different situations and to prevent behaviors that have dangerous and harmful consequences. Social and communication skills training helps at-risk adolescents develop techniques for establishing or maintaining positive social relationships with family members, peers, and teachers. Social and communication skills training can be long-term effective in preventing antisocial behaviors among adolescents. Therefore, paying attention to social and communication skills can be very effective in reducing high-risk behaviors.

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