

Research Paper

## Assessing The Role of Counselling in Enhancing Quality of Life Among Adolescent Cohorts

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### ABSTRACT

This research investigates the influence of counselling interventions on the quality of life (QoL) among adolescents. Quality of life, a multidimensional construct encompassing physical health, psychological well-being, social relationships, and overall life satisfaction, is a crucial indicator of adolescent well-being and development. Counselling, as a form of psychotherapeutic intervention, offers a promising avenue for addressing psychosocial challenges and promoting holistic well-being among adolescents. Using a quantitative research approach, this study employs pre- and post-intervention assessments to measure changes in various domains of quality of life among adolescents who receive counselling. A group of 30 participants are selected from diverse backgrounds and settings, reflecting the heterogeneity of the adolescent population. The Quality of Life Scale, developed by Dubey and Dwivedi, was utilized to assess happiness before and after the six-days counselling intervention, with each session lasting one hour per day. The Counselling interventions are tailored to address individual needs and concerns, with a focus on enhancing coping skills, emotional regulation, interpersonal relationships, and overall psychosocial functioning. Statistical analyses, including paired-sample are conducted to evaluate the impact of counselling on different dimensions of quality of life. The results indicate that there is significant impact of counselling in increasing happiness among adolescents. The study aims to contribute empirical evidence supporting the effectiveness of counselling in improving the quality of life among adolescents, with implications for mental health interventions, school-based counselling programs, and youth development initiatives. By elucidating the mechanisms underlying the relationship between counselling and adolescent quality of life, this research seeks to inform evidence-based practices aimed at enhancing adolescent quality of life.

**Keywords:** *Role of Counselling, Quality of Life, Adolescent Cohorts*

Adolescence marks a critical period of transition and development characterized by rapid physical, emotional, and cognitive changes. As adolescents navigate the complexities of this developmental stage, their quality of life (QoL) emerges as a crucial indicator of overall well-being and adjustment. Quality of life encompasses various domains, including physical health, psychological well-being, social relationships, and

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overall life satisfaction, reflecting the subjective experiences and perceptions of individuals regarding their overall life circumstances. For adolescents, factors such as academic stress, peer relationships, family dynamics, and identity formation significantly influence their quality of life and subjective well-being.

While adolescence is often characterized by excitement and exploration, it also presents numerous challenges and stressors that can impact adolescent well-being. Issues such as academic pressure, social anxiety, bullying, family conflict, and mental health concerns are prevalent among adolescents and can have detrimental effects on their overall quality of life. Furthermore, the transition from childhood to adulthood involves significant changes in social roles, responsibilities, and expectations, adding further complexity to adolescents' experiences and perceptions of well-being.

Given the multifaceted nature of adolescent well-being, there is growing recognition of the importance of addressing psychosocial factors and promoting holistic development during this critical period. Counselling, as a form of psychotherapeutic intervention, offers a promising avenue for supporting adolescents in navigating the challenges of adolescence and promoting positive outcomes across various domains of life. Counselling interventions are tailored to address individual needs and concerns, providing adolescents with support, guidance, and strategies for coping with stress, managing emotions, and building healthy relationships.

The potential benefits of counselling on adolescent quality of life have been recognized in both research and practice. Previous studies have demonstrated associations between participation in counselling and improvements in various domains of adolescent well-being, including mental health, academic achievement, social competence, and overall life satisfaction. Counselling interventions have been shown to enhance adolescents' self-esteem, resilience, coping skills, and emotional regulation abilities, leading to positive changes in their quality of life and subjective well-being.

Despite the growing evidence supporting the efficacy of counselling in promoting adolescent well-being, there remains a need for further research to elucidate the specific mechanisms underlying the relationship between counselling and adolescent quality of life. While some studies have focused on examining the immediate effects of counselling interventions on specific outcomes, such as reducing symptoms of anxiety or depression, fewer studies have explored the broader impact of counselling on adolescents' overall quality of life and subjective well-being. Moreover, the factors that contribute to the effectiveness of counselling interventions in improving adolescent quality of life remain relatively understudied, warranting further investigation.

The findings of this research have the potential to inform counselling practices, mental health interventions, and youth development programs aimed at promoting adolescent well-being and resilience. By elucidating the mechanisms underlying the relationship between counselling and adolescent quality of life, this study seeks to advance our understanding of the factors that contribute to positive outcomes in adolescence and inform evidence-based practices for promoting holistic development and well-being among adolescents.

## REVIEW OF LITERATURE

Shiri et al., (2022) explored how acceptance and commitment therapy (ACT) impacted anxiety, depression, and quality of life in 16–18-year-old female students with mild to moderate anxiety. After six group counselling sessions, participants experienced reduced anxiety and depression immediately post-intervention and at an 8-week follow-up, alongside enhanced overall quality of life. These findings advocate for the use of ACT in high school settings to effectively address anxiety-related issues in adolescents.

Krause et al., (2021) examined outcomes following psychotherapy for adolescent depression through qualitative analysis of 102 interviews with adolescents, parents, and therapists. Seven outcome domains and 29 categories were identified, with mood improvement being the most discussed. However, other important areas like family functioning and coping were also highlighted. While recent treatment studies mainly focus on symptomatic change, this study emphasizes the need for broader outcome measurement reflecting stakeholder priorities for a more comprehensive understanding of treatment effectiveness.

Karimlou, et al., (2019) investigated the impact of counselling on health-promoting lifestyle and quality of life among middle-aged women in Tabriz, Iran. A total of 102 participants were randomly assigned to either the intervention or control group. The intervention group received three 45-minute sessions of health-promoting lifestyle counselling, while the control group received routine care. Assessments using the Health Promoting Lifestyle Profile-II (HPLP-II) and SF-36 quality of life survey were conducted before, four weeks, and eight weeks after the intervention. Results revealed significant improvements in health-promoting lifestyle and quality of life in the intervention group compared to the control group. Counselling emerged as an effective strategy for enhancing the well-being of middle-aged women.

Ravens-Sieberer. et al., (2021) reported that during the COVID-19 pandemic, the German COPSYS study investigated the mental health impact on children and adolescents. Two waves of a nationwide longitudinal survey were conducted in May/June 2020 and December 2020/January 2021, involving 1923 participants aged 7-17 and their parents (retention rate: 85%). Assessments included HRQoL, mental health problems, anxiety, depressive symptoms, and psychosomatic complaints. Findings indicated a decline in HRQoL and an increase in emotional problems, peer-related issues, anxiety, depression, and psychosomatic symptoms. Socially disadvantaged children and those with mentally burdened parents faced greater risks, while females and older individuals experienced fewer mental health problems. Positive family dynamics and social support were protective factors. Strategies promoting health, prevention, and intervention are essential for safeguarding children and adolescents' mental well-being during the pandemic.

Fernandes, et al., (2023) systematic review aimed to determine the prevalence of depression and its relationship with quality of life (QOL) among high school and university students. Thirty-six studies meeting eligibility criteria were analysed, with twenty-six included in meta-analysis. Results indicated a 27% prevalence of depressive symptoms among students, with high school and university students at 25% and 27%, respectively. Most studies suggested a correlation between depression and low QOL. A limitation is the challenge in generalizing results due to a predominantly health student sample. Future research should focus on severity, duration, and patterns of depressive symptoms to deepen understanding of depression-QOL relationship in this population.

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The present research seeks to address these gaps in the literature by investigating the impact of counselling on quality of life among adolescents. This study aims to examine how participation in counselling interventions influences various domains of adolescent well-being, including physical health, psychological functioning, social relationships, and overall life satisfaction. In this manner the objective of the research is framed which is presented below.

### **Objective:**

The objective of the present research paper is as follows:

- To study the effect of counselling on quality of life for adolescents.

### **Hypothesis:**

The hypothesis of the present research paper is as follows:

- There is significant effect of counselling on quality of life of adolescents.

## **METHODOLOGY**

### **Sample**

The sample comprises 30 adolescents selected through convenience sampling from Udaipur, located in Rajasthan.

### **Tool:**

The Quality of Life Scale, devised by B.L. Dubey and Padma Dwivedi, evaluates quality of life consisting of 24 items, employing a five-point response scale from "strongly agree" to "strongly disagree." Higher scores signify better quality of life. The scale demonstrates strong reliability, reliability coefficient of 0.87 through split half reliability. Moreover, it exhibits high validity.

### **Procedure:**

The Quality of Life Scale was administered for pre-testing, followed by post-testing after six counselling sessions. Each counselling session, lasting one hour, amounted to six hours of intervention. One session was conducted each day, resulting in the completion of counselling over the course of six consecutive days.

### **Counselling Schedule**

<b>Day 1: Session I</b>	
Assessment and Goal Setting	10 mins
Psychoeducation on Quality of Life	20 mins
Identifying Strengths and Resources	30 mins
<b>Day 2: Session II</b>	
Cognitive Restructuring and Positive Thinking	60 mins
<b>Day 3: Session III</b>	
Emotional Regulation and Coping Skills	60 mins
<b>Day 4: Session IV</b>	
Social Skills and Relationship Building	60 mins
<b>Day 5: Session V</b>	
Health Promotion and Lifestyle Changes	30 mins
Environmental Modification and Advocacy	30 mins
<b>Day 6: Session VI</b>	
Goal Implementation and Action Planning	40 mins
Evaluation and Follow-Up	20 mins

### *Procedure of Counselling*

Improving quality of life among adolescents through counselling involves a comprehensive and tailored process aimed at addressing various domains of well-being and fostering holistic development. Here are the steps involved in counselling to improve quality of life among adolescents:

1. *Assessment and Goal Setting*: The counselling process had begun with an initial assessment to understand the adolescent's current quality of life, identifying strengths, challenges, and areas for improvement. Collaboratively, the counsellor and adolescent had established personalized goals for counselling, focusing on specific domains of well-being such as physical health, psychological functioning, social relationships, and overall life satisfaction.
2. *Psychoeducation on Quality of Life*: Psychoeducation had formed the foundation of counselling for improving quality of life, providing adolescents with an understanding of the various factors that contribute to well-being and life satisfaction. Adolescents had learned about the multidimensional nature of quality of life, including physical, psychological, social, and environmental dimensions, and how these factors interacted to influence overall well-being.
3. *Identifying Strengths and Resources*: Counselling had emphasized the identification and utilization of adolescents' strengths, talents, and resources to enhance their quality of life. Adolescents had explored their personal assets, interests, and values, gaining insight into areas where they excelled and strategies for leveraging these strengths to overcome challenges and achieve their goals.
4. *Cognitive Restructuring and Positive Thinking*: Cognitive-behavioural techniques had been employed to challenge and reframe negative thought patterns and beliefs that may have impacted adolescents' quality of life. Adolescents had learned to identify and replace irrational thoughts with more balanced and positive perspectives, fostering optimism, resilience, and adaptive coping strategies.
5. *Emotional Regulation and Coping Skills*: Counselling had focused on developing adolescents' emotional regulation skills and coping strategies to manage stress, anxiety, and other negative emotions. Adolescents had learned relaxation techniques, mindfulness practices, and problem-solving skills to cope with life's challenges effectively and maintain emotional well-being.
6. *Social Skills and Relationship Building*: Counselling had addressed interpersonal skills and social relationships, which were essential for enhancing quality of life among adolescents. Adolescents had learned effective communication skills, empathy, and assertiveness techniques to build positive relationships with peers, family members, and other significant individuals in their lives.
7. *Health Promotion and Lifestyle Changes*: Counselling had incorporated health promotion strategies and lifestyle changes to improve adolescents' physical health and overall well-being. Adolescents had learned about the importance of nutrition, exercise, sleep, and self-care practices in maintaining optimal health and vitality, as well as strategies for incorporating healthy habits into their daily routines.
8. *Environmental Modification and Advocacy*: Counselling had explored ways to modify adolescents' environments and advocate for changes that promoted their well-being and quality of life. Adolescents had identified environmental stressors and barriers to well-being, brainstormed solutions, and developed action plans for creating supportive and empowering environments in their schools, communities, and homes.
9. *Goal Implementation and Action Planning*: Adolescents had worked collaboratively with the counsellor to implement their goals and action plans for improving quality

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of life. Counselling sessions had provided opportunities to monitor progress, troubleshoot challenges, and adjust strategies as needed to ensure continued growth and success.

10. *Evaluation and Follow-Up*: The counselling process had concluded with evaluation and follow-up to review achievements, assess outcomes, and plan for ongoing support and maintenance of gains. Adolescents had been encouraged to continue practicing the skills and strategies learned in counselling, seek support from trusted individuals, and take proactive steps to enhance their quality of life and well-being over time.

### RESULTS AND DISCUSSION

*Table 1 Showing Skewness and Kurtosis measures for Pre and Post testing for dimensions of Quality of Life*

	Pre-test		Post-test	
	Skewness	Kurtosis	Skewness	Kurtosis
<b>Quality of Life</b>	-0.332	-0.229	0.503	-0.017

Table 1 demonstrates that the skewness and kurtosis measures for both Pre and Post testing across the quality of life scale are below 1, suggesting a normal distribution of the data. Therefore, the paired 't' test is employed to compare Quality of Life at pre and post-testing situations of counselling and presented in table 2.

*Table 2 Comparison of Quality of Life at Pre and Post-testing Situations of Counselling*

		Mean	N	Std. Deviation	Mean Difference	't'	p value
<b>Quality of Life</b>	Pre-test	65.367	30	6.239	6.267	11.252	0.000
	Post-test	71.633	30	4.414			

Table 2 shows that the mean scores for the quality of life were 65.367 at the pre-testing situation and 71.633 at the post-testing situation. The 't' score calculated was 11.252, which was found to be significant at the 0.01 level ( $p=0.000$ ,  $p<0.01$ ). This indicates a significant difference in the quality of life between the pre-testing and post-testing situations. Moreover, the mean scores indicate that quality of life improves after counselling sessions for adolescents.

Counselling offers adolescents a pathway to enhancing their quality of life through various interventions and support mechanisms. Firstly, counselling provides a safe and confidential space for adolescents to explore their thoughts, emotions, and experiences, allowing them to gain insight into their challenges and strengths. By addressing issues such as stress, anxiety, depression, or relationship difficulties, counselling equips adolescents with coping strategies and emotional regulation techniques, empowering them to navigate life's challenges more effectively.

Moreover, counselling helps adolescents develop essential life skills, such as problem-solving, communication, and decision-making, which are crucial for building resilience and adapting to changing circumstances. Through psychoeducation and skill-building exercises, adolescents learn to set realistic goals, manage time efficiently, and make healthy lifestyle choices, contributing to their overall well-being and satisfaction with life.

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Additionally, counselling fosters positive relationships and social connections, which are vital components of quality of life for adolescents. By improving interpersonal skills and enhancing social support networks, counselling helps adolescents cultivate meaningful friendships, develop empathy, and strengthen family bonds. These connections provide adolescents with a sense of belonging and support, enhancing their emotional well-being and overall satisfaction with life.

Furthermore, counselling promotes self-awareness and self-acceptance, encouraging adolescents to explore their values, interests, and aspirations. By helping adolescents align their actions with their core values and pursue activities that bring them joy and fulfillment, counselling contributes to a sense of purpose and meaning in life. Adolescents are empowered to make informed choices, pursue their goals, and live authentically, leading to greater contentment and satisfaction.

### CONCLUSION

On the basis of the analysis of results the hypothesis “*There is significant effect of counselling on quality of life of adolescents*” is **accepted**. Counselling plays a vital role in improving the quality of life for adolescents by addressing mental health concerns, fostering skill development, nurturing positive relationships, promoting self-discovery, and empowering adolescents to lead fulfilling and meaningful lives. By providing support, guidance, and resources, counselling equips adolescents with the tools they need to overcome challenges, build resilience, and thrive in various aspects of their lives. Counselling had effectively supported adolescents in improving their quality of life, fostering resilience, and empowering them to lead fulfilling and meaningful lives.

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### Conflict of Interest

The author(s) declared no conflict of interest.

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