

## **THE IMPACT OF LIFELONG TRAINING IN ADULTS SELF-ESTEEM AND QUALITY OF LIFE: THE RVCC PROCESS AND THE AET COURSE**

Filipa Santos, Universidade Portucalense, lipa\_santos88@hotmail.com  
Ana Conde, Universidade Portucalense, anac@upt.pt

**ABSTRACT:** The current increasing interest and visibility regarding adult education and the importance of preparing for change led us to conduct a cross-sectional study with two groups of adults, with the aim of assessing to what extent the participation in a range of instruction offers promoted by a New Opportunities Center, such as the Recognition, Validation and Certification of Competences (RVCC process) and the Adult Education and Training (AET course), would have a significant impact on quality of life and self-esteem of their students. In addition, we tried to identify the effect of occupational status at this level.

We used a convenience sample which consisted of 95 individuals of both sexes and whose ages varied from 21 to 69 years. The instruments which were used included a socio-demographic questionnaire, the Self-Esteem Scale validated for the Portuguese population and the Portuguese version of the Quality of Life Scale - short version - WHOQOL – Bref.

The results showed that there are significant differences between adults that finalized the RVCC process and those who haven't finished it, in terms of quality of life environmental domain, which is higher in the last group.

Moreover, we found that while among employed adults, those who have completed the AET Course have an overall higher quality of life than those who did not finish among unemployed adults the opposite was observed.

A better understanding about these adult education devices and their influence in psychological dimensions should be deeply understood and emphasized.

### **Introduction**

On the actual national scene we witness to the growing importance to preparing for change, through lifelong education and training. However, the scholar certification and qualification levels of the Portuguese population are still reduced, when compared with the European Union average. In the 4<sup>th</sup> trimester of 2010, the number of active adults with, at least, the 9<sup>th</sup> grade completed, is approximately 164.000 individuals. This means a decrease of about 5% compared to 2009 (INE, 2010).

In the qualifications structure of the Portuguese active population we found that Portugal has the lowest prevalence of formal schooling, showing a delay when compared with other European countries (OCDE, 2011). Despite the progressive educational changes

evidenced in the last 30 years, the qualification and schooling levels of the Portuguese population are still lower, which endangers the development, evolution and national competitiveness (Quintas, 2008).

Thus, it is imperative to build a system of education and training that can guarantee a flexible and oriented access to scholar and training for adults, where their potential is established. The main objective is to train for changes and to give the adults the opportunity to continue their studies, acquire more skills and become more competitive in the working market (Rico & Libório, 2009).

The lifelong learning arises in a perspective of social construction and as a continuous and uninterrupted process that includes the temporal dimension of learning. The learning process includes the active citizenship, the individual development and the social inclusion, emphasizing the work and employment dimension (Gomes, 2006).

Thereby, the lifelong training and education should be available for everyone, regardless of age, becoming an opportunity to highlight potentialities. So, this must be an individual right and, above all a social and individual responsibility (Quintas, 2008).

#### *The new opportunities initiative*

The New Opportunities Initiative emerges as a fundamental vehicle to the employment and professional training policies that have as main focus the qualification strategies. Thus, this Initiative intend to be a “strong and crucial impulse to qualification”, making the secondary level in school the minimum level of qualification of the Portuguese population. This reflects a strategic priority that potentiates an economic growth, a well-being and quality of life, because the knowledge and culture represent fundamental dimensions in the personal

accomplishment and in the social development (Liz, Machado & Burnay, 2009; QREN, 2007).

Subsequently, appear the New Opportunities Centers, whose main purpose is to ensure that all citizens aged over 18 years old has the opportunity to be certified and qualified, according to their profile, motivations, expectations and personal needs (Gomes & Simões, 2007).

One of the training offers is the RVCC process which consists in the recognition, validation and certification of competences acquired by the adults in formal, non-formal and informal learning contexts (Gomes & Simões, 2007). This process is always developed in a New Opportunities Center and intends to invest in the increment of the Portuguese qualifications, through the recognition and validation of competences that will allow their professional and personal evolution (Gomes & Simões, 2007).

A study done between 2001 and 2003 concluded that the RVCC process seems to have a positive effect in terms of professional insertion of the unemployed adults. Plus, around 30% of the adults who have finished a RVCC process and were unemployed at the beginning of this process, started to work until 6 months after certification (CIDEDEC, 2004).

Data from another investigation suggest that, after the participation in a RVCC process the probability to find a remunerated occupation increases significantly, because there is an approach to the working market, especially by the unemployed or inactive adults (Gomes, 2006).

The other training offer is the AET Course which emerged as an attempt to address the current problem of lack of education and professional qualifications lived in Portugal. It is a model of education and training with innovative and flexible solutions, since it has a high degree of freedom and autonomy in the construction and management of the adult's

curriculum. Thus, it privilege the participation of adults in decisions concerning the construction of the curriculum, always trying an approach to their personal interests, as well as to previously acquired knowledge and personal and professional experiences (Quintas, 2008).

Those courses are training offers aimed to individuals over 18 years old, non-qualified or without proper qualification for (re)integration or progression in the working market, because at certain point they have interrupted their training processes in the regular educative systems (Canelas, 2007).

#### *Adult education and training and self-esteem*

Self-esteem is considered a part of self-concept. As humans with rationalization skills, we have the ability to think about what we are, our body image, our behaviours and how other people see us. In this way, the human being creates a set of cognitions and feelings about himself (Secord & Backman, 1974; Neto, 1998). The self-esteem levels are, usually, relatively stable, but they can suffer some changes according to certain individual events and life experiences (Mruk, 2006).

According to the Motivation Theory, Maslow suggested a hierarchy that contemplate some human needs, including, the need of esteem. Then, the esteem plays an important role in the personal growth and development and emerges naturally, being a part of the natural cycle of human development. When this need is satisfied, sentiments as self-confidence, respect and acknowledgment for their own abilities tend to occur (Jarvis, 2010).

In the same way, Carl Rogers also defended that self-esteem is a basic human need and is essential to their healthy functioning. It appears naturally during human development,

providing a self-acceptance and congruence: as people know themselves, they begin to self-accept who they really are (Rogers, 2009).

Results from the External Evaluation of the New Opportunities Initiative in 2009 and 2010 point out to a strengthening of the adult self-esteem and the motivation to continue learning, in other words, “learning to learn”(Carneiro et al., 2010, p. 10). Furthermore, in interviews conducted with adults that have already finished an AET course is visible a reconnaissance of their own value, and they reveal the importance that this courses had in their lives and the consequent increase of the self-esteem and the sense of personal accomplishment (Carneiro et al., 2010).

Another study conducted using interviews pointed out that after the conclusion of the RVCC processes the most significant and positive modifications in adult’s lives occur in the personal dimensions. In other words, there is an increase of their self-confidence, self-appreciation and self-recognition of their own capacities. This happens because the adult becomes aware and remembers a set of previously skills acquired during their life course, which contributes to the construction of a positive self-image and, consequently, to enhance their self-esteem (Rico & Libório, 2009; Quintas 2008).

Vieira (2010) also concluded that the appreciation and recognition of the previous learning’s contributes significantly to improve the self-esteem and the self-image. Her findings indicate that the self-esteem levels were higher in the group of participants who finished or were about to finish the RVCC process, rather than in those who are only registered and haven’t yet initiated the process (Vieira, 2010).

However, there are other studies that have found little conclusive evidence about the positive impact of adult education and training in the self-esteem levels, namely, the study conducted by Merrifield, Smith, Rea e Shriver (1994), where were carried out a comparison

between the self-esteem level before and after the conclusion of the course. Although they found some positive results, they weren't statistically significant (Merrifield, Smith, Rea, & Shriver, 1994 cit in Lipnevich & Beder, 2007).

### *Adult education and training and quality of life*

From early, the concept of quality of life was controversial because there wasn't a consensual definition. Only in the 90's has been reached to the consensus that there are two fundamental aspects that should be highlighted in quality of life: its multidimensionality and subjectivity (Seidl & Zannon, 2004).

The World Health Organization defined the quality of life as "individuals' perception of their position in life in the context of the culture and value systems in which they live and in relation to their goals, expectations, standards and concerns" (WHOQOL, 1995). This definition represents the multidimensionality of this concept. Moreover, it shows the influence that different dimensions have in the subjective evaluation of quality of life (Canavarro et al., 2008).

Tuijnman (1990) conducted an investigation with the purpose of evaluate the impact of education and training programs in the adult quality of life. The results have shown that there were a positive impact in the group of adults who have attended to some training offer when compared to those who haven't, specifically in: work satisfaction, future employment perspectives and in the perceived well-being (Tuijnman, 1990).

Feinsteir e Hammond (2004) Feinsteir e Hammond (2004) also concluded that adult education plays an important role by contributing to small changes in adult's behaviors and attitudes, that lead to an improvement in quality of life (Feinster & Hammond, 2004).

In this way, lifelong education seems to be fundamental for an improvement of the quality of life, mainly because it promotes a good functioning, which will be reflected into many areas of people's lives: economically, socially, physically and emotionally (Schejbal & Wilson, 2008). Thus, we propose to assess to what extent the participation in a range of training offers promoted by a New Opportunities Center, such as the RVCC process and the AET course, would have a significant impact on quality of life and self-esteem of their students. In addition, we tried to identify the effect of occupational status at this level.

### **Method**

#### *Participants*

In this study, the sample was composed by 95 adults, from both sexes (♀=63.2% e ♂=36.8%), from which 16 finished the AET Course (♀=12 e ♂=4), 46 concluded the RVCC process (♀=25 e ♂=21), 14 haven't finished the AET Course (♀=13 e ♂=1), and 19 haven't finished the RVCC process (♀=10 e ♂=9).

In the total sample, we verified that the range of ages were from 21 to 69 years (M=40.76, SD=10.639). The higher percentage of participants were married, lived in the city, mainly in Porto area and, at the moment, were employed.

From the 46 individuals who have finished the RVCC process, 28 lived in the city and 18 in the village. And, from those 19 who haven't finished, 4 lived in the city and 15 in the village.

For the adults who have completed the AET Course (n=16), 14 of them lived in the city and 4 in the village and for those who haven't finished (n=14), 9 of them lived in the city and 5 in the village.

### *Instruments*

Socio-demographic questionnaire: To collect social and demographic data, we elaborated a questionnaire with 19 multiple choice questions that allowed us to gather relevant information about the adults (e.g. age, gender, occupational status, residence location, marital status) and distinguish those who have finished the training offer and those who haven't.

The Portuguese version of the World Health Organization Quality of Life – Bref Scale (WHOQOL-Bref) was used to evaluate the participants' different dimensions of quality of life (Canavarro et al., 2008).

The WHOQOL-Bref is a self-evaluation instrument composed by 26 multiple choice items, organized in a 5 point Lickert scale. The Rosenberg self-esteem scale evaluates the global level of self-esteem and is formed by 10 items, which includes questions about self-respect and self-acceptance. Five of those items were positively oriented and the other five were negatively oriented (Rosenberg et al., 1995).

### *Procedure*

Before the implementation of the present study, we asked permission to use the Portuguese versions of the instruments to the respective authors.

Before we started to collect the data, we informed the participants about the study objectives and the confidentiality of their data, always safeguarding that they were protected by an informed consent.

There was only one moment for the data collection, and the means to collect it were: in person, by telephone and through an online questionnaire.

## Results

According to the first aim of the study, we intended to compare if individuals who have finished a RVCC process have higher self-esteem and quality of life than those who haven't finished it, as well as studying the effect of occupational status at this level.

When we compare individuals who finished vs. haven't finished the RVCC process in terms of their self-esteem, we found out that there weren't significant differences between the groups ( $F(1,91) = .454$ ;  $p = .502$ ). Regarding the overall quality of life the results are similar, with no significant differences being found ( $F(1,91) = 1.058$ ;  $p = .306$ ). However, we found significant results in the environmental quality of life domain ( $F(1,91) = 5.809$ ;  $p = .018$ ), with those who haven't finished the RVCC process showing higher quality of life in the Environmental Domain, regardless their occupational status, than those individuals who have finished the RVCC process (cf. Table 1).

Table 1 – Environmental Domain Quality of Life (QoL): descriptive data

	Occupational Status	Finish RVCC process	Mean	SD	
Environmental Domain QoL	Employed	Yes	43.49	26.22	
		No	49.14	24.43	
		Total	45.82	25.46	
	Unemployed / Student / Domestic	Yes	31.50	32.12	
		No	59.78	29.61	
		Total	53.50	31.89	
	<b>Total</b>		<b>Yes</b>	<b>41.92</b>	<b>26.96</b>
			<b>No</b>	<b>53.70</b>	<b>27.01</b>
			Total	48.00	27.49

No significant results were found concerning the interaction of the variables Finish RVCC process and Occupational Status in self-esteem ( $F(1,91) = .875$ ;  $p = .352$ ), neither in overall quality of life ( $F(1,91) = .586$ ;  $p = .446$ ), nor in the different quality of life dimensions

(Physical Domain (F (1,91) =2.259; p = .136); Psychological Domain (F (1,91) =.607; p = .438); Social Relations Domain (F (1,91) =.151; p = .698); Environmental Domain (F (1,91) =2.582; p = .112)).

With respect to the second aim, we intended to compare if individuals who have finished a AET course have better self-esteem and quality of life than those who haven't finished it, as well as studying the effect of occupational status at this level.

No significant differences were found when we compare individuals who completed vs. those who haven't completed the AET course in their self-esteem (F (1,91) =.845; p = .360).

Regarding the overall quality of life we also haven't found statistically significant differences neither between the groups (F (1,91) =.833; p = .364), nor in the different quality of life domains (Physical (F (1,91) =.012; p = .914); Psychological (F (1,91) =.572; p = .451); Social Relations (F (1,91) =1.271; p = .262); Environmental (F (1,91) =.440; p = .509)).

Although, when we evaluate the interaction between the variables Finish AET Course and Occupational Status we found that there is a significant impact of this interaction in the overall quality of life (F (1,91) =4.607; p = .034).

Occupational Status	Finish AET Course	Mean	SD
<b>Employed</b>	<b>Yes</b>	<b>54.50</b>	<b>18.42</b>
	<b>No</b>	<b>45.44</b>	<b>25.27</b>
	Total	46.64	24.55
<b>Unemployed/ Student/ Domestic</b>	<b>Yes</b>	<b>34.78</b>	<b>30.47</b>
	<b>No</b>	<b>57.25</b>	<b>28.87</b>
	Total	51.42	30.40

Adults who finished the AET course and were employed (M=54.500; SD=18.417) had higher quality of life than those who finished the course but were unemployed (M=34.786; SD= 30.474). Still, while among employed adults the individuals who finished the course

have better overall quality of life than those who haven't finished, among the unemployed adults the opposite was observed (cf. Table 2).

Regarding the interaction between those variables (Finish AET course and Occupational Stratus) in self-esteem we haven't found statistically significant results ( $F(1,91) = .956$ ;  $p = .331$ ). The same occurred in the different quality of life domains (Physical ( $F(1,91) = 3.404$ ;  $p = .068$ ); Psychological ( $F(1,91) = .706$ ;  $p = .403$ ); Social Relations : ( $F(1,91) = .844$ ;  $p = .361$ ); Environmental ( $F(1,91) = .177$ ;  $p = .675$ )).

### **Discussion**

Although some previous studies (Carneiro et al., 2010; Rico & Libório, 2009; Quintas, 2008; CIDEAC, 2004; Vieira, 2010; Gomes, Coimbra & Menezes, 2007) found a positive impact of finishing a RVCC process or an AET course in adults self-esteem, many others (e.g. Merrifield, Smith, Rea, & Shriver cit in Lipnevich & Beder, 2007; Gomes, Coimbra, & Menezes, 2007) are inconclusive and found, similarly to the present research, no significant effect.

In most of studies where positive results were found, they adopted a qualitative methodology, and hence their conclusions were based only in the adult's reports. We know that the self-esteem levels and the individual self-perception are influenced by events and life experiences (Mruk, 2006; Rosenberg, Schoenbach, Schooler, & Rosenberg, 1995). In this way, we may suppose that the particular event of finishing a RVCC process or an AET course can't have an isolated impact in self-esteem.

Concerning to quality of life, we found that individuals who haven't completed the process had better Environmental quality of life than those who have already completed their process. In this domain we evaluated issues such as new information and competences

acquisition or availability for leisure activities. Thus we may suppose that, once there is a self-actualization and an acquisition of new informations, those adults of have already finished the RVCC process, eventually may be more aware to environmental issues, and consider that their quality of life in this area is smaller.

Moreover, we also know that the majority of adults who have completed the RVCC process live in cities, which may also have an influence on how they perceive their environmental quality of life. Cities, rather than villages, are locations with greater pollution, noise, traffic and sometimes with less security. Those are factor that my strongly contribute to the individual evaluation of quality of life.

On the other hand, in the AET courses we found results that corroborate the hypothesis previously stipulated. Among employed adults those who completed the AET course present better levels of overall quality of life than those who haven't and among the unemployed group we found the opposite. These results suggest that after the AET course conclusion individuals feel more prepared and qualified to (re)integrate the working market, once they have acquired new knowledge and employability skills. Besides, the AET courses are flexible solutions that promote the social and personal development which may interfere with the life satisfaction assessment. Plus, they foster the drawing of new goals in personal and professional path, career progression perspectives, as well as a more active attitude towards their own potential to continue to learn.

### **Conclusion**

This study allows us to contribute to a better understanding about the adult education and training phenomena. Considering the importance that the New Opportunities Initiative assume in our society, we thought that were truly imperative to assess the possible positive

impact in peoples lives, namely in their self-esteem and quality of life, as well as the effect of occupational status at this point.

In conclusion, the New Opportunities Initiative seems to provide the adults a progressive grown and some changes in their assessment lives, proving to be a promising system and founding new opportunities for those who attend their training offers. The inconclusive and non significant found results also suggest the need of better understanding these adult education devices and their influence in the evaluated psychological dimensions.

### References

- Canavarro, M., Simões, M., Vaz Serra, A., Pereira, M., Rijo, D., Quartilho, M., Gameiro, S., Paredes, T., & Carona, C. (2008). WHOQOL-BREF: Instrumento de avaliação da qualidade de vida da Organização Mundial de Saúde. In Gonçalves, M., Almeida, L., & Simões, M. (Eds.). *Avaliação Psicológica: instrumentos validados para a população portuguesa Vol. 2* (pp. 77-100). Coimbra: Quarteto.
- Canelas, A. (2007). *Cursos de educação e formação de adultos nível secundário: orientações para a acção*. Lisboa: Agência Nacional para a Qualificação. I. P.
- Carneiro, R., Valente, A., Liz, C., Lopes, H., Cerol, J., Mendonça, M., Carneiro, M., & Melo, R. (2010). *Iniciativa Novas Oportunidades: Resultados da avaliação externa (2009-2010)*. Lisboa: Agência Nacional para a Qualificação I.P.
- Feinster, L. & Hammond, C. (2004). The contribution of adult learning to health and social capital. *Oxford review of education*, 30, 199-221.
- Gomes, M. (2006). *Referencial de Competências-Chave para a educação e formação de adultos – Nível secundário*. Lisboa: Direcção-Geral de Formação Vocacional.
- Gomes, M., & Simões, F. (2007). *Carta de Qualidade dos Centros Novas Oportunidades*. Lisboa: Agência Nacional para a Qualificação. I. P.
- Instituto Nacional de Estatística (INE). (2010). *Estatísticas do emprego: 4º trimestre 2010*. Lisboa: INE. I. P.
- Jarvis, P. (2010). *Adult education & lifelong learning: theory and practice* (4<sup>th</sup> Ed.). London: Routledge Falmer.
- Lipnevich, A., & Beder, H. (2007). Self-esteem among adult literacy learners. *Adult basic education and literacy learners*, 1, 73-82.
- Liz, C., Machado, M., & Burnay, E. (2009). Percepções sobre a Iniciativa Novas Oportunidades. Lisboa: Agência Nacional para a Qualificação, I. P.
- Mruk, C. (2006). *Self-esteem research. Theory and practice: toward a positive Psychology of self-esteem* (3<sup>rd</sup> ed.). New York: Springer Publishing Company, Inc.
- Neto, F. (1998). *Psicologia Social: Volume 1*. Lisboa: Universidade Aberta.
- OCDE. (2011). *Education at a Glance 2011: OECD Indicators*. OECD Publishing.
- Quadro de Referência Estratégico Nacional. (2007). *Quadro de Referência Estratégico Nacional – Portugal 2007-2013*. Lisboa: Observatório do QCA III.

- 
- Quintas, H. (2008). *Educação de Adultos: vida no currículo e currículo na vida*. Lisboa: Agência Nacional para a Qualificação. I. P.
- Rico, H., & Libório, T. (2009). *Impacte do Centro RVCC da Fundação Alentejo na qualificação dos alentejanos*. Alentejo: Fundação Alentejo.
- Rogers. C. (2009). *Tornar-se pessoa*. Lisboa: Padrões Culturais Editora.
- Rosenberg, M. (1965). *Society and the adolescent self-image*. Princeton: Princeton University Press.
- Schejbal, D., & Wilson, D. (2008). The value of continuing education. *Continuing higher education review*, 72, 32-43.
- Secord, P., & Backman, C. (1974). *Social Psychology* (2<sup>nd</sup> Ed.). London: McGraw-Hill.
- Seidl, E., & Zannon, C. (2004). Qualidade de vida e saúde: aspectos conceituais e metodológicos. *Cadernos de saúde pública*, 20, 580-588.
- Tuijman, A. (1990). Adult education and the quality of life. *International Review of Education*, 36, 283-298.
- Vieira, S. (2010). *O impacto dos processos RVCC nível básico na auto-estima e auto-aprendizagem: um estudo quasi-experimental*. Tese de mestrado apresentada à Universidade Fernando Pessoa. Porto.
- WHOQOL Group (1995). The World Health Organization Quality of Life Assessment (WHOQOL): Position paper from the World Health Organization. *Social Science & Medicine*, 41, 1403-1409.
- WHOQOL Group (1998). Development of World Health Organization WHOQOL-BREF Quality of Life Assessment. *Psychological Medicine*, 28, 551-558.