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The Effectiveness of Teaching Ten Life Skills on Improving the Quality of Life in Working and Street Children

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ABSTRACT

Objective: This study aims to investigate the effectiveness of a life skills training program in improving the quality of life of working and street children in Isfahan, in light of the growing prevalence of child labor in the country and the psychological, social, and physical consequences of early entry into the labor market.

Methods: A quasi-experimental pre-test–post-test design was employed. Using purposive sampling, 30 working and street children were recruited and received life skills training across nine 30-minute sessions. Data were analyzed using analysis of variance (ANOVA).

Results: Life skills training was associated with measurable improvements in quality-of-life indicators among participants.

Conclusions: Life skills training plays a fundamental role in improving quality of life among working and street children, supporting its use as an intervention for this vulnerable group. Given the statistically significant gains observed in the experimental group relative to controls, structured life skills programs — addressing self-awareness, empathy, communication, and problem-solving — appear to offer a feasible and effective approach for community-based organizations and welfare institutions working with at-risk children. These findings support the broader integration of life skills training into social protection policies and rehabilitation services for working and street children, while highlighting the need for larger-scale, longitudinal studies to confirm the durability of these effects and to refine program design across diverse cultural and institutional settings.

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Introduction

Child labor is often used to refer to work that deprives a child of their childhood, potential, dignity, and rightful place, and refers to work that is psychologically, physically, socially, or morally harmful to children and prevents them from attending school (France & Candela, 2020). This phenomenon is one of the pervasive problems in most developing countries. In Iran too, this phenomenon has expanded across major cities in recent decades and has been identified as one of the fundamental social harms (Ramos, 2018). In today's world, both in developed and developing countries, we are witnessing a growing incidence of working children. Due to unwanted social, familial, cultural, and economic factors, working children are forced into early entry into the adult world and must raise themselves in order to support themselves. Because of their weak physical and psychological position, these children are more exposed to harm and victimization than other individuals, and even more than ordinary children.

A child who enters the labor market under the age of 18 is exposed to numerous forms of harm, including aggression, abuse and sexual assault, humiliation and threats, and sometimes malnutrition and sleep disorders; the likelihood of their tendency toward substance abuse, theft, and various forms of delinquency also increases (Yohn et al., 2019).

Childhood is an age during which the effects of maltreatment are highly evident, and children must learn various life skills in order to be able to resolve the issues and problems they will encounter in the future. Therefore, teaching skills — particularly life skills — is among the fundamental principles of working with these children, since the goal of life skills is to change destructive behavior, such as high-risk behaviors, into constructive behavior in the child.

By developing a life skills program, children can be helped to pass through this stage safely (Levin et al., 2022). Life skills refer to establishing appropriate and effective interpersonal relationships, fulfilling social responsibilities, making sound decisions, and resolving conflicts and disputes without resorting to actions that harm oneself or others. In general, life skills are skills taught with the aim of enhancing psychosocial abilities, enabling the trained individual to effectively face the demands of life (Malekpour et al., 1403 [2024/2025]).

Today's children are the builders of tomorrow's society and constitute a major portion of the population of human societies. The health and illness of this large segment play an important role in the health and illness of tomorrow's society and future generations. It is therefore necessary to

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pay greater attention to the mental and physical health of this large group, and to take fundamental steps toward the prevention and treatment of their psychological and behavioral disorders. Studies conducted across various cultures have shown that a significant percentage of school-age and preschool children suffer from various impairments in life skills. In the absence of timely skills training, the likelihood of serious behavioral problems, poor social skills, and academic difficulties in children's lives is high. Accordingly, organizing appropriate training programs for this group of children is unavoidable. Early life experiences lay the foundation for individuals' mental health or illness in adulthood; therefore, employing effective educational interventions during childhood not only improves the child's current social adjustment and skills but also brings about a significant reduction in future behavioral and psychological disorders and high-risk behaviors, such as alcohol use, risky driving, substance and internet addiction, and violent behaviors.

Promoting life skills among working and street children is of particular importance, as these children may face greater challenges and require specific support and training. This can lead to positive outcomes for their future lives. Promoting life skills helps working children become better acquainted with their emotions, control their emotions, and find the best solutions to problems. Furthermore, strengthening life skills such as problem-solving, effective communication, and cooperation with others helps them cope better in difficult situations and build healthier relationships with others. Overall, life skills in working and street children can help improve their functioning across various environments and improve their quality of life. Likewise, through assertiveness skills and the ability to express feelings and emotions, they can develop self-awareness and control over their own behavior — particularly high-risk behavior — thereby reducing the future prevalence of such behaviors.

Malekpour et al. (1403 [2024/2025]), in a study, demonstrated that a life skills package — by familiarizing students with their strengths and weaknesses, effective communication and empathy skills, emotion management, problem-solving skills, and creative thinking — can be used as an effective method for promoting the social adjustment of elementary school students. Zirakpour and Najjarpour (1400 [2021/2022]), in a study titled "Examining the Effectiveness of Group-Based Life Skills Training on Interpersonal Problems and Feelings of Loneliness among Second-Cycle High School Female Students in Tabriz," showed that life skills training was

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effective in reducing interpersonal problems and feelings of loneliness in the experimental group, and that this reduction remained stable at a one-month follow-up. Thus, life skills training can reduce students' interpersonal problems and feelings of loneliness. Hojjat et al. (1395 [2016/2017]) found that group assertiveness training was effective in improving self-esteem and reducing feelings of loneliness among female students with an addicted parent. It can therefore be concluded that assertiveness training can serve as a useful intervention method for problems of self-esteem and loneliness. In the study by Sobhi Gharamaleki, Hajloo, and Mohammadi (1395 [2016/2017]), findings indicated that life skills training increases social skills and peer relationships and reduces peer rejection, antisocial behaviors, impulsive behaviors, and dominance-seeking behaviors. Savari and Manshdavi (1394 [2015/2016]), in their study, examined the effectiveness of self-awareness skills training in reducing internet addiction and loneliness and increasing self-efficacy among second-cycle high school female students. The results showed that self-awareness training reduced participants' internet addiction. Findings from the study by Abolzaid, Abdelmoneim, and Harfoush (2019) showed that problem-solving training led to statistically significant improvement in the experimental group in terms of interpersonal problem-solving skills and self-esteem compared to three control groups. Hamed (2024), in a study on a life skills training program aimed at preventing substance abuse — a preventive approach — showed that social and psychological factors influence substance abuse.

The findings, conclusions, and considerable experience the organization gained from running two life skills training programs for substance abuse prevention are as follows: in combating substance abuse, the use of life skills training as part of prevention strategies is considered a major success. This approach goes beyond mere awareness of drugs and focuses on equipping individuals with skills for making good choices. By teaching various skills such as how to communicate effectively, solve problems, manage stress, and act assertively, individuals are helped to better cope with life's challenges. Life skills training also helps individuals better understand themselves and think critically about how drugs are portrayed in society and the media. In this way, they can make informed choices based on facts, rather than being influenced by peer pressure or misinformation.

The points mentioned above demonstrate the necessity of conducting this study. The life skills training package in this study was developed with a focus on quality of life and high-risk

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behaviors in working and street children. A search of scientific databases revealed that, to date, no life skills training package has been specifically applied to improve the quality of life of working children and reduce their high-risk behaviors. Therefore, given the topics and research discussed regarding the effectiveness of life skills training, and on the other hand, given the existing research gap, the main problem addressed by this study is examining the effectiveness of a specialized life skills training package for children on the quality of life and reduction of high-risk behaviors among working children.

Hypotheses:

1. Life skills training has an effect on the quality of life of working and street children.
2. Life skills training has an effect on reducing the dimensions of high-risk behaviors in working and street children.

Material and Methods

This study employed an experimental, quasi-experimental design with a pre-test–post-test format.

Population and Sample

The statistical population of this study consisted of all working and street children aged 9–12 years in the city of Isfahan. Sampling was conducted using a convenience sampling method, drawing from children housed at the Sāyebān-e Mehr Center for Working and Street Children, within the 9–12 age group, who had been collected by the municipality and referred to the Welfare Organization (Behzisti). The sample consisted of an experimental group and a control group, each comprising 15 participants, on whom the study was conducted.

Procedure

After selecting the sample size and randomly assigning participants to two groups of 15 (experimental and control), the children were invited to participate, informed of the study's objectives, and their cooperation was obtained. The pre-test (Quality of Life Questionnaire and High-Risk Behaviors Questionnaire) was then administered. Subsequently, the children received life skills training over 10 sessions of 30 minutes each, held once per week. Following completion of the training period, the Quality of Life and High-Risk Behaviors questionnaires were re-administered, and the results were analyzed.

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Data Analysis: SPSS version 23 was used for data analysis. Descriptive statistics, including frequency tables, means, and modes, were used, while covariance analysis (ANCOVA) was used as the inferential statistical method for data analysis.

Measures

Pediatric Quality of Life Inventory (PedsQL) for children aged 8–12 years: This questionnaire was designed by Varni et al. (2003) to assess quality of life in children aged 8–12 years and consists of 23 items. Items are scored on a Likert-type scale ranging from Never (0) to Always (4). The questionnaire measures children's quality of life across four subscales: physical functioning, emotional functioning, social functioning, and school functioning. This scale is a psychometrically sound instrument for assessing quality of life across various populations. Higher scores indicate more favorable quality of life.

Intervention

The intervention consisted of a life skills training package for children and adolescents approved by the Iranian Welfare Organization (Behzisti), delivered across nine sessions as summarized in Table 1.

Table 1. Life Skills Training Package for Children and Adolescents (Approved by the Iranian Welfare Organization)

Session	Title	Description
1	Group member orientation	Introducing group members to one another; introducing the concept of life skills; defining quality of life and its dimensions; use of group games
2	Self-awareness training	Awareness of the role of self-awareness in a healthy life; identifying certain personal characteristics, abilities, and weaknesses; identifying one's own interests; use of group games and self-awareness worksheets
3	Empathy skills training	Ability to understand others' thoughts and feelings and to value others; familiarity with methods of expressing empathy; identifying barriers to expressing empathy (e.g., blaming); use of related empathy exercises
4	Training in necessary interpersonal relationship skills	Familiarity with different communication styles and methods; identifying the characteristics of a good relationship; types of verbal and nonverbal messages; use of practice exercises
5	Training in skills for establishing effective relationships	Training in selecting the best communication style for different situations through role-play and group activities; empowering participants to establish effective relationships; use of practice exercises
6	Recognizing emotions, anger management, and saying "no"	Recognizing one's own emotions; identifying signs of anger and the role of thoughts in generating and maintaining anger; identifying irrational and unhelpful thoughts during anger; use of related practice exercises
7	Assertiveness skills and problem-solving skills training	Familiarity with problem-solving skills and the importance of applying them; different approaches to dealing with life problems (emotion-focused, problem-focused); using brainstorming to find better solutions when facing problems; practice
8	Decision-making skills	Defining decision-making; familiarity with the role and important factors in decision-making; awareness of correct and incorrect decision-making approaches; familiarity with factors influencing logical and sound decision-making; practice
9	Critical thinking skills	Familiarity with critical thinking as a correct method of evaluating issues; components

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of critical thinking; practice

Ethical Considerations: This study was conducted in accordance with the ethical principles of the Declaration of Helsinki and was approved by the Research Ethics Committee of Isfahan University. Given that participants were minors, informed written consent was obtained from their legal guardians or the responsible authorities at the Sāyebān-e Mehr Center and the Welfare Organization (Behzisti) prior to data collection, and verbal assent was obtained from the children themselves. Participants and their guardians were informed about the objectives of the study, the voluntary nature of participation, and their right to withdraw at any stage without any negative consequences for the services they received. Confidentiality and anonymity of participants' data were maintained throughout the research process, and all information was used solely for research purposes. To uphold ethical standards, the control group was offered the life skills training program after completion of the study.

Results

Main Hypothesis: Life skills training has an effect on quality of life in working and street children.

The results of the multivariate analysis of covariance (MANCOVA) for quality-of-life scores at the post-test stage in the experimental and control groups are presented in the table below.

Table 2. Results of Multivariate Analysis of Covariance for Quality-of-Life Scores and Reduction in High-Risk Behaviors in the Experimental and Control Groups at the Post-Test Stage

Effect	Test	Value	F	Hypothesis df	Error df	Sig.	Effect Size	Statistical Power
Pre-test quality of life	Pillai's Trace	0.033	0.432	2	25	0.654	0.033	0.112
	Wilks' Lambda	0.967	0.432	2	25	0.654	0.033	0.112
	Hotelling's Trace	0.035	0.432	2	25	0.654	0.033	0.112
	Roy's Largest Root	0.035	0.432	2	25	0.654	0.033	0.112
Group	Pillai's Trace	0.298	5.304	2	25	0.012	0.298	0.803
	Wilks' Lambda	0.702	5.304	2	25	0.012	0.298	0.803
	Hotelling's Trace	0.424	5.304	2	25	0.012	0.298	0.803
	Roy's Largest Root	0.424	5.304	2	25	0.012	0.298	0.803

Based on the findings presented in the table above, across all four multivariate tests, the mean scores of at least one of the study variables at the post-test stage differed significantly between

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the experimental and control groups ($p < 0.05$). The results showed that 0.298, or approximately 30%, of the individual differences in the overall improvement of the study variables at the post-test stage were accounted for by the difference between the two groups. In other words, life skills training led to improvement in at least one of the study variables — including quality of life — at the post-test stage. A statistical power of 80% indicates that the statistical precision of this test is acceptable.

Sub-Hypothesis 1: Life skills training has an effect on quality of life in working and street children.

The results of the univariate analysis of covariance (ANCOVA), conducted to examine the difference between the two groups in quality of life at the post-test stage, are presented in the table below. In this analysis, pre-test scores were controlled, and post-test means were compared after removing the effects of the pre-test.

Table 3. Results of Univariate Analysis of Covariance Examining Between-Group Differences in Quality of Life at the Post-Test Stage

Source	Sum of Squares	df	Mean Square	F	Sig.	Effect Size	Statistical Power
Pre-test quality of life	281.054	1	281.054	0.295	0.592	0.011	0.082
Group	5031.979	1	5031.979	5.28	0.03	0.169	0.7
Error	24774.328	26	952.859				
Total	200278	30					

Based on the findings presented in the table above, the effect of pre-test quality of life scores on post-test scores was not significant ($p > 0.05$). After controlling for this effect, the results showed a significant difference in mean quality of life scores between the experimental and control groups at the post-test stage ($p < 0.05$). The findings indicate that approximately 17% of individual differences in quality of life at the post-test stage were attributable to between-group differences, i.e., the effects of life skills training.

Table 4. Adjusted Mean Quality of Life Scores for the Two Groups Across the Study Stages

Variable	Group	Mean	Standard Error	95% Confidence Interval
				Lower Bound — Upper Bound
Quality of Life	Experimental	103.84	7.97	87.44 — 120.24
	Control	77.88	7.97	61.48 — 82.29*

The results in the table above show that the quality-of-life scores for both the experimental and control groups fall within a 95% confidence interval, and zero does not fall within this interval's

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upper and lower bounds. The chart comparing mean quality of life scores between the two groups at the pre-test and post-test stages is presented in Figure 1.

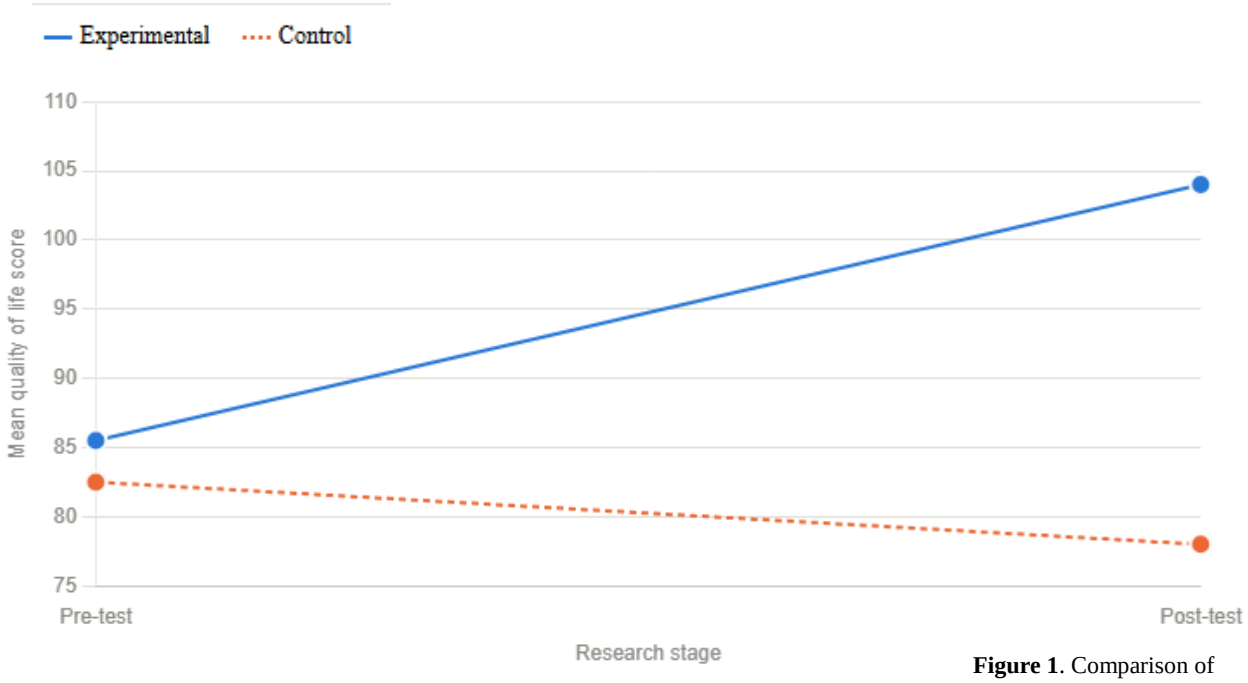

Figure 1. Comparison of Mean Quality of Life Scores Between the Two Groups at the Pre-Test and Post-Test Stages

Discussion

The findings of the present study, by confirming the results of previous research at both the international and national levels, once again attest to the importance and effectiveness of life skills training in improving quality of life and preventing high-risk behaviors among working children. The consistency of these results with the findings of Zirakpour and Najjarpour (2022) and Savari and Manshdavi (2015) at the international level, as well as the research of Hojjat et al. (2016) and Abolzaid et al. (2019) at the national level, indicates a strong consensus regarding the positive impact of life skills training on various aspects of life among vulnerable children.

Specifically, this study showed that life skills training — by focusing on strengthening components such as self-awareness (recognizing one's own strengths and weaknesses, values, and beliefs), empathy (the ability to understand and share others' feelings), communication skills (establishing effective and constructive relationships with others), and problem-solving (the ability to identify and find appropriate solutions to problems) — leads to a marked improvement

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in quality of life indicators among working children. This improvement can manifest across various dimensions of their lives, including mental health, social relationships, and academic performance.

In addition, the findings of this study indicate that life skills training plays an effective role in reducing high-risk behaviors among this group of children. High-risk behaviors can include violence, substance use, delinquent behaviors, and exposure to abuse. By equipping children with the skills necessary for informed decision-making, emotion management, resisting negative pressures, and finding constructive solutions to problems, the likelihood of their involvement in such behaviors is significantly reduced.

From a theoretical perspective, this study underscores the importance of educational interventions during childhood as a long-term investment in children's psychological and social development. Childhood — particularly for working children, who are exposed to numerous forms of harm — represents a golden opportunity for laying the foundations of mental health and adaptive behavior. Life skills training during this period can act as a strong protective factor, preventing many social harms from emerging in the future. This perspective is consistent with cognitive and social developmental theories that emphasize the importance of early life experiences in shaping an individual's personality and behavior.

Furthermore, the findings highlight the importance of incorporating educational programs into social work support policies. The results show that even across different social and economic contexts, life skills training can have significant positive effects in reducing behavioral disorders.

Finally, the results of this study, while confirming previous findings, underscore the need for greater attention to the design and implementation of life skills training programs for working children. These programs should be designed and implemented comprehensively, continuously, and in a manner tailored to the specific needs of this group of children. Furthermore, the active participation of families, schools, and support organizations in this process can substantially contribute to increasing the effectiveness of these interventions. Future research could examine the long-term effects of such training, as well as identify more effective factors in the design and implementation of these programs.

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The results obtained from this study show that life skills training can improve the quality of life of working children and reduce high-risk behaviors among them. Based on this, the following recommendations are proposed:

1. **Expanding life skills training programs:** Government agencies and related organizations (such as the Welfare Organization and municipalities) should implement these programs extensively in centers that house working children.
2. **Integration into social policy:** Incorporating life skills training as part of preventive policies aimed at reducing social and psychological harms among working children is essential.
3. **Interdisciplinary collaboration:** Combining expertise from social work, psychology, and educational sciences can lead to the design of more comprehensive and effective programs.

Limitations

This study is subject to several limitations that should be considered when interpreting its findings. First, the sample was selected through convenience (non-random) sampling from a single center (the Sāyebān-e Mehr Center) in Isfahan, and the relatively small sample size (15 participants per group) limits the statistical power and generalizability of the results to other working and street children populations, both within Iran and internationally. Second, the study relied on self-report questionnaires (PedsQL) completed by children aged 9–12, which may be subject to social desirability bias or limited comprehension of certain items despite the instrument's established psychometric properties. Third, the absence of a follow-up assessment after the post-test means that the long-term stability of the observed improvements in quality of life could not be evaluated. Fourth, because random assignment to groups was constrained by the practical realities of working with an at-risk population in a single care center, the possibility of pre-existing group differences beyond those captured by the pre-test cannot be fully ruled out. Finally, contextual and environmental factors specific to Isfahan and to the particular care center — such as the children's living conditions, family circumstances, and prior exposure to social services — may limit the extent to which these findings can be generalized to working and street children in other cities or under different institutional arrangements.

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Data availability statement

The original contributions presented in the study are included in the article/supplementary material, further inquiries can be directed to the corresponding author.

Ethics statement

The studies involving human participants were reviewed and approved by ethics committee of Islamic Azad University.

Author contributions

All authors contributed to the study conception and design, material preparation, data collection and analysis. All authors contributed to the article and approved the submitted version.

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Conflict of interest

The authors declare that the research was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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