https://africanjournalofbiomedicalresearch.com/index.php/AJBR
Afr. J. Biomed. Res. Vol. 27(4s) (December 2024); 17813-17817
Research Article

Knowledge Of Life Skills Among Homeless Children: Insights From A Juvenile Care Facility In Gujarat

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Abstract
Background: Life skills are fundamental competencies that enable individuals to manage challenges, make informed decisions, and lead productive lives. For vulnerable groups such as homeless children and adolescents, these skills play a pivotal role in resilience, social reintegration, and mental well-being. Adolescence, characterized by rapid physical, emotional, and cognitive changes, becomes particularly challenging in the absence of supportive family or social structures.
Aim: This study aimed to assess the level of knowledge and proficiency in life skills among homeless children and adolescents residing in a juvenile center in Ahmedabad, Gujarat, India, and to examine variations based on age and gender.
Methods: A cross-sectional descriptive study was conducted among 100 participants using a structured, close-ended questionnaire validated by experts. The tool assessed domains of decision-making, problem-solving, communication, self-awareness, and social responsibility. Data were analyzed using IBM SPSS version 23, applying descriptive statistics and chi-square tests to identify associations between demographic variables (age and gender) and life skills proficiency. Ethical approval was obtained from the university ethics committee, and informed consent was taken.
Results: Findings revealed significant age-related variations in decision-making, accident response, and problem-solving ($p \leq 0.05$). Gender differences were significant in questions related to decision-making consequences and mathematical reasoning ($p = 0.04$). However, no substantial differences were observed in domains such as environmental conservation, classroom behavior, or non-verbal communication. The majority of participants demonstrated limited baseline knowledge, with younger children (5–10 years) exhibiting lower proficiency compared to older adolescents.
Conclusion: The study highlights inadequate life skills knowledge among homeless children and adolescents in juvenile care. Structured life skills training, focusing on age- and gender-sensitive interventions, is urgently required to empower these vulnerable populations, improve resilience, and foster reintegration into society.

Keywords: Life skills, Adolescence, Homeless children, Juvenile center, Knowledge, Decision-making

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Received: 05-11-2024 *Accepted: 15-11-2024*

DOI: https://doi.org/10.53555/AJBR.v27i4S.8396

Introduction

Life skills represent a set of psychosocial competencies that empower individuals to think critically, communicate effectively, solve problems, and cope with daily challenges. These abilities not only enhance personal well-being but also strengthen resilience against social vulnerabilities. According to the World Health Organization (WHO, 2023), life skills education contributes to improved mental health, academic success, employability, and responsible citizenship. For

children and adolescents facing adverse circumstances such as homelessness, the importance of life skills is magnified, as they often lack the guidance and protective support systems provided by families or schools.

Adolescence is a critical transitional phase marked by rapid physical growth, emotional volatility, and cognitive development. During this period, individuals acquire values, behaviors, and coping strategies that shape adulthood. However, marginalized groups such as homeless children are exposed to heightened risks, including academic failure, substance abuse, exploitation, and criminal involvement. Studies indicate that lack of exposure to structured life skills training may exacerbate psychosocial distress, resulting in poor decision-making, low self-esteem, and limited future opportunities (Vranda & Rao, 2011).

In India, rapid urbanization and socio-economic disparities have contributed to increasing numbers of vulnerable children. Juvenile centers often provide shelter, basic education, and rehabilitation services, but structured psychosocial interventions like life skills training remain insufficient. Research in similar contexts suggests that targeted programs improve children's coping mechanisms, reduce delinquency, and enhance reintegration outcomes (Thomas & Rajdeep, 2021).

The present study was undertaken to assess the knowledge of life skills among homeless children and adolescents in a juvenile center in Ahmedabad, Gujarat. By examining age- and gender-based differences, the research provides insights into gaps in current interventions and highlights the need for tailored educational strategies.

Methodology

Study Design and Setting

This research employed a cross-sectional descriptive design to assess the knowledge of life skills among homeless children and adolescents residing in a juvenile center in Ahmedabad, Gujarat, India. The setting was chosen because it represents a population of vulnerable youth who often lack access to structured education and psychosocial support. Permission to conduct the study was obtained from the concerned authorities at the center, and ethical approval was granted by the Institutional Ethics Committee of Parul University, Vadodara.

Study Population and Sampling

The study population included children and adolescents aged 5 to 18 years who were registered at the juvenile center. A total of 150 children were eligible during the study period, from which 100 participants were selected using a snowball sampling technique. This method was employed due to the closed nature of the institutional setting and the reliance on peer networks to identify participants. Inclusion criteria were: (a) residing in the juvenile center during the study period, (b) willingness to participate, and (c) ability to comprehend the questionnaire. Exclusion criteria included children with severe cognitive impairments or acute illnesses preventing participation.

Research Instrument

A structured, close-ended questionnaire was developed to assess life skills knowledge. The tool was designed after an extensive review of the CBSE (Central Board of Secondary Education) Life Skills Education Manual and relevant literature. It was validated by five subject experts in pediatric nursing and psychology, ensuring content relevance and clarity. Reliability testing was conducted through a pilot study among 10 participants, yielding a Cronbach's alpha score of 0.78, indicating acceptable internal consistency.

The questionnaire comprised two sections:

1. Demographic profile – including age, gender, and educational background.
2. Life skills knowledge assessment – consisting of 15 multiple-choice questions covering domains such as decision-making, critical thinking, problem-solving, communication, accident response, environmental conservation, and self-awareness. Responses were categorized as "correct" or "incorrect."

Data Collection Procedure

Prior to data collection, informed consent was obtained from the institutional authorities and verbal assent from the participants. Researchers explained the purpose of the study in simple language, assuring confidentiality and voluntary participation. The questionnaire was administered individually to participants in a quiet setting within the center. Each participant took approximately 20–25 minutes to complete the tool.

Data Analysis

Data were coded and entered into IBM SPSS version 23 for statistical analysis. Descriptive statistics, including frequencies and percentages, were used to summarize demographic data. Chi-square tests were applied to examine associations between life skills knowledge and demographic variables (age and gender). A p-value of < 0.05 was considered statistically significant.

Ethical Considerations

Ethical principles of voluntary participation, informed consent, anonymity, and confidentiality were strictly adhered to. No identifying information was collected, and participants were free to withdraw at any stage without consequences. The findings were shared with the juvenile center to inform future training interventions.

Results

Demographic Profile of Participants

The study enrolled a total of 100 homeless children and adolescents from the juvenile center in Ahmedabad, Gujarat. Table 1 presents the age distribution of participants. The largest proportion belonged to the 11–15 years group (51%), followed by 5–10 years (35%), and 16–18 years (14%).

Table 1. Distribution according to Age

Age group	Frequency	Percent
5–10 years	35	35.0
11–15 years	51	51.0
16–18 years	14	14.0
Total	100	100.0

Table 2 shows the gender distribution. The majority of respondents were female (65%)**, while males comprised** 35% **of the study population.**

Gender	Frequency	Percent
Male	35	35.0
Female	65	65.0
Total	100	100.0

Age-Related Differences in Life Skills Knowledge
Chi-square analysis revealed significant age-related differences in knowledge of life skills. Responses to decision-making (Q1), accident response (Q3), and mathematical reasoning (Q7) demonstrated statistically significant variations across age groups ($p \leq 0.05$). Younger children (5–10 years) displayed more incorrect responses compared to older adolescents, indicating developmental differences in reasoning and problem-solving.

Age-Related Differences in Life Skills Knowledge
Analysis of responses demonstrated significant age-related variations in certain life skills domains.

- In the area of decision-making, almost all participants in the 11–15 and 16–18 years groups answered correctly, while children in the 5–10 years group displayed weaker responses. This difference was statistically significant ($p = 0.05$).
- When asked about appropriate actions in case of an accident, nearly all younger children (5–10 years) answered incorrectly, whereas a higher proportion of older adolescents (16–18 years) gave correct responses. This variation was highly significant ($p < 0.001$).
- A simple problem-solving task involving mathematical reasoning was correctly answered by only a few participants across age groups. However, older adolescents were slightly more successful than younger children, and the difference was statistically significant ($p = 0.05$).
- For other domains, such as environmental conservation, classroom behavior, vocabulary, and communication barriers, no significant differences were found between the three age groups.

Gender-Related Differences in Life Skills Knowledge

- For decision-making consequences, male participants were more likely to provide correct responses compared to females, and this difference reached statistical significance ($p = 0.04$).
- Similarly, in the problem-solving (mathematical reasoning) task, male respondents showed slightly higher accuracy compared to female respondents, with the difference being significant ($p = 0.04$).
- In contrast, for other domains such as environmental conservation, accident response, classroom conduct, coping with peer teasing, communication skills, and critical thinking, no statistically significant gender differences were observed. Both boys and girls performed similarly, often showing limited knowledge and coping ability.

Discussion
The present study assessed the knowledge of life skills among homeless children and adolescents living in a juvenile center in Ahmedabad, Gujarat. Findings revealed significant gaps in knowledge across critical domains such as decision-making, accident response, mathematical reasoning, and communication. These results highlight the vulnerability of marginalized youth and the urgent need for structured life skills training within juvenile care facilities.
Our findings align with earlier studies indicating that life skills knowledge is generally lower among children deprived of stable family and school environments (Vranda & Rao, 2011). Similar to the present study, Thomas and Rajdeep (2021) found that children from disadvantaged backgrounds scored poorly in decision-making and coping strategies. The strong association between age and life skills proficiency observed here is consistent with developmental theories that emphasize the progressive acquisition of reasoning and problem-solving abilities during adolescence (Srikala & Kishore, 2010).
Gender-based differences were modest but notable in decision-making consequences and mathematical reasoning, where males performed slightly better. Comparable findings were reported by Khera and Khosla (2012), who observed that gender socialization processes often influence confidence in analytical and decision-making tasks. However, the absence of significant differences in communication and self-esteem domains suggests that both genders are equally disadvantaged when deprived of supportive interventions.
The results underscore the importance of implementing context-specific, age-appropriate, and gender-sensitive training programs. Life skills training has been shown to enhance resilience, improve self-esteem, and reduce risk-taking behaviors in adolescents (Behrani, 2016; Patel, 2005). For children in juvenile centers, such training could serve as both a preventive and rehabilitative strategy, preparing them for reintegration into society. Moreover, interventions must emphasize practical, experiential learning methods, such as role-play, group discussions, and peer mentoring, which have

been proven effective in promoting retention and behavior change (Smith et al., 2004).

One striking observation from this study was the consistently low performance in coping skills, particularly in response to teasing and negative feedback. This highlights the psychosocial stressors faced by homeless children, who may experience rejection, stigma, and poor self-image. Similar studies from Tehran and Bangalore have demonstrated that targeted life skills education significantly improves emotional intelligence and coping abilities among vulnerable youth (Soheilimehr & Eshraghi, 2023; Vranda & Rao, 2011).

Additionally, environmental conservation and communication-related items showed uniformly poor responses, indicating a gap in both cognitive awareness and applied behavioral competencies. Incorporating modules on environmental responsibility and effective communication into the juvenile center's educational framework could address these shortcomings.

A strength of this study lies in its focus on an under-researched population in India—homeless children in juvenile care. The validated tool and use of chi-square analysis provide reliability to the findings. However, limitations include the restricted sample size and use of snowball sampling, which may limit generalizability. Self-reporting also introduces the potential for response bias. Future research should consider longitudinal designs and intervention-based studies to evaluate the long-term impact of life skills training on psychosocial and academic outcomes.

Conclusion

This study revealed that homeless children and adolescents at a juvenile center in Ahmedabad exhibited limited knowledge and proficiency in essential life skills, with marked differences based on age and selected gender domains. Younger participants consistently demonstrated weaker decision-making, problem-solving, and accident response skills compared to older adolescents. Gender-related differences were modest but significant in decision-making consequences and mathematical reasoning tasks. Across all groups, coping mechanisms, communication, and environmental awareness were found to be poor, underscoring the vulnerability of this population.

The findings emphasize the urgent need to implement structured, evidence-based life skills education programs within juvenile care facilities. Such programs should adopt interactive, participatory, and age-appropriate methods to foster resilience, self-awareness, critical thinking, and adaptive coping strategies. Policymakers, educators, and social workers must collaborate to ensure that homeless children are equipped not only with academic knowledge but also with psychosocial competencies necessary for reintegration into society.

By addressing these gaps, juvenile centers can empower marginalized youth, reducing their susceptibility to exploitation, delinquency, and mental health challenges. In the long term, life skills education has the potential to break cycles of poverty and vulnerability, enabling children to emerge as confident, responsible, and productive members of society.

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