

## Effect of Social Skills Training Program on Emotional Intelligence, Happiness, and Self-esteem among Adolescent Girls

Bothaina Elsayed Said Mohamed<sup>(1)</sup>, and Hayam Shaban Elsayed Shehata<sup>(2)</sup>

<sup>(1)</sup> Assistant Professor of Psychiatric Nursing, Faculty of Nursing, Zagazig University, Egypt, and <sup>(2)</sup> Lecturer of Psychiatric Nursing, Faculty of Nursing, Zagazig University, Egypt

### Abstract

**Background:** Social skills allow people to convey their wishes and emotions more effectively, improving their emotional intelligence and providing them with a greater sense of happiness and self-esteem. **Aim of the study:** This study aimed to investigate the effect of social skills' training program on emotional intelligence, happiness, and self-esteem among adolescent girls. **Subjects and Methods; Research design:** A quasi-experimental design was adopted to carry out this study. **Setting:** This study was conducted at El-Shaheed El-Sayed Fathy Gamaan governmental secondary school for girls in Abu Kabeir City, Al-Sharkia Governorate. **Subjects:** A purposeful sample of 73 adolescents in the pre-test as well as the same sample in the post-test was recruited. **Tools of data collection:** Five tools were used in this study: A socio-demographic data sheet, Matson Social Skills Questionnaire, Emotional Intelligence Scale, Oxford Happiness Questionnaire, and Rosenberg Self-Esteem Scale. **Results:** The majority of surveyed adolescents had low levels of social skills, emotional intelligence, and happiness at Pre-intervention. As well; more than two-thirds of them had low self-esteem levels. After the training program, there were highly statistically significant improvements in the mean score of social skills, emotional intelligence, happiness, and self-esteem. There was only a highly statistically significant positive correlation between the participant adolescent girls social skills score and happiness score before intervention. Moreover, social skills were highly positively statistically correlated with emotional intelligence, happiness, and self-esteem after the intervention. **Conclusion:** The social skills' training program for teenagers was successful in improving emotional intelligence, happiness, and self-esteem levels among them. **Recommendations:** There is a great need for ongoing monitoring of the adolescents who have participated in the social skills' training program to assist and enhance happiness, self-esteem, and emotional intelligence.

**Key words:** Social Skills, Emotional Intelligence, Happiness, Self-esteem, Adolescent girls

### Introduction:

Adolescence is a time when personalities are formed and when people transition from childhood to adulthood; it is marked by biological, cognitive, and social changes as well as numerous issues with decision-making<sup>(1)</sup>. More precisely, the change to secondary education grades a period of important change for teenagers. They must adjust to new physical, emotional, and reasoning changes in addition to entering a new scholastic setting. Given that self-esteem is developing, it is a particularly "high-risk" period<sup>(2)</sup>.

To educate people on social skills, a set of psychotherapy techniques known as social skills training has been developed. It is based on the social learning hypothesis. It teaches people how to better express their feelings, opinions, and wants to others. Programs that teach social skills

promote connection with others and are designed to help participants become more assertive and communicate more effectively<sup>(3)</sup>.

Emotional intelligence (EI) is known as the ability to reason about emotions and allow emotions to improve thinking. A person with high emotional intelligence has better interpersonal relationships, can deal with emotional issues more quickly and effectively than most people, is strong in verbal, societal, and other intellects, is less likely to engage in problematic behaviors, and stays away from destructive behaviors like smoking, drug use, and violence. Communication requires being able to read nonverbal cues that reveal people's emotions<sup>(4)</sup>.

Humans also benefit from emotional intelligence in terms of their physical and mental health, interpersonal relationships,

ability to resolve conflicts, success, and leadership qualities. People with higher EI are more conscious of their emotional states and stress responses. A healthier, more positive view of life is another benefit of higher EI. Better EI has a significant impact on social relationships because it allows a person to better understand and control their emotions. This enables him or her to interact with others more positively and comprehend their wants, feelings, and reactions<sup>(5)</sup>.

Happiness is described as a good feeling within that comes from how one feels and thinks about his/her life. As noted in this description, happiness is an all-encompassing concept supported by the two elements of emotion and intellect. While the intellect element is concerned with psychological well-being, the emotional element is focused on pleasure (an equilibrium of pleasant and unpleasant sentiments). The experience of happiness may be used as a basis for treating mental illnesses, encouraging optimism, building psychological resilience, and boosting defensive ability against stress, according to several researches<sup>(6)</sup>.

In addition to the way we are and behave, as well as the physical and psychological characteristics of our bodies, self-esteem is the total of attitudes that are based on perceptions, opinions, appraisals, sentiments, and behavioral tendencies directed at us<sup>(7)</sup>. In contrast, self-esteem relates to a person's total assessment of values and includes statements like "I am competent" as well as feeling like achievement, gloom, pride, or embarrassment<sup>(8,9)</sup>. Additionally, it refers to a consistent sense of one's value or deservingness as well as one's attitude towards or view of oneself, which may be positive (favorable or high), neutral, or negative (unfavorable or low)<sup>(7)</sup>.

School psychiatric nurses have ventured out into the community to improve the academic performance, social skills, and overall well-being of children and teenagers by encouraging education and community wellness<sup>(10)</sup>.

### **Significance of the Study:**

The transition from elementary to secondary learning is one of the greatest

traumatic events in teenagers' lifetime as a result of facing some thought-provoking chores that can be damaging to well self-esteem improvement especially further among women than men. As a result, individuals experience feelings of tension and anxiety as regards their social relations<sup>(11)</sup>. However, social skills play a significant role in preventing emotional and behavioral difficulties during teens. Social skills benefit in expressing emotion or sentiments, understanding others' emotions, and solve effectively relationship difficulties by taking others' viewpoints<sup>(12)</sup>. Therefore, this study will investigate the effect of social skills training program on emotional intelligence, happiness, and self-esteem among adolescent girls.

### **Aim of the study:**

The aim of this study was to investigate the effect of social skills training program on emotional intelligence, happiness, and self-esteem among adolescent girls.

### **Objectives:**

- Assess social skills, emotional intelligence, happiness and self-esteem among adolescent girls.
- Design, and implement the social skills' training program.
- Evaluate the effect of social skills' training program on emotional intelligence, happiness, and self-esteem among adolescent girls.

### **Research hypotheses:**

Social skills, emotional intelligence, happiness, and self-esteem levels among adolescent girls will improve after the training program than before.

### **Subjects and Methods:**

#### **Research design:**

A quasi-experimental design with pre/post-tests was applied. Because it relies on a non-random technique to assign subjects to groups, a quasi-experimental design is useful when real experiments cannot be conducted for ethical or practical reasons<sup>(13)</sup>.

#### **Study Setting:**

This study was conducted at El-Shaheed El-Sayed Fathy Gamaan governmental secondary school for girls in Abu Kabeir City, Al-Sharkia Governorate, Egypt, during the school year 2022-2023. It is composed of

two buildings the first building consists of three floors with fourteen classrooms and the second building consists of five floors with thirty classrooms which are well ventilated with suitable space and furniture for students; and included two courtyards and a large garden.

### Study Subjects:

A purposive sample of 73 adolescents in the pre-test as well as the same sample in the post-test was selected from the previously mentioned setting. The study sample size was calculated based on the followings: **Milani** <sup>(12)</sup> assumes; Mean  $\pm$ SD of happiness score among studied adolescents at before intervention stage of the study was  $47 \pm 9.6$  and Mean  $\pm$ SD of happiness score at after intervention stage of the study was  $52 \pm 6.92$ , the confidence level is 95% on two sides with the power of study at 95%. The sample size calculated using Open Epi. with the following Inclusion criteria: Ages from 16 to 18 years, students from the 1st, 2nd, and 3rd secondary school grades, and covenant of the female learners to contribute in the study.

Exclusion criteria: Students with any physical or mental disability.

### Tool for data collection:

Five tools were used to collect the study data:

**Tool I: Demographic data sheet:** Researchers designed this tool to assess the parents' and students' socioeconomic backgrounds. The scale had numerous items such as age, residence, academic year, parents' educational level and occupation, with which they live, social status, and income.

**Tool II: The Matson Social Skills:** This questionnaire was adopted from **Abd Elhamid** <sup>(14)</sup>. It was used to assess students' social skills. It is composed of 45 items divided into five subscales: peer relations (13 items), self-management (6 items), academic skills (8 items), compliance (8 items), and assertion (10 items).

### Scoring system:

The score ranged from 3 to 1 are scored as: 3= always, 2= sometimes, and 1= not occurring.

The sum of these five subscales' scores results in a final score that ranges from 45 to 135, with scores of 60% or more indicating high social skills.

### Tool III: Emotional Intelligence Scale:

This scale was produced by **Schutte et al.** <sup>(15)</sup> to measure the students' emotional intelligence. It is composed of 33 items, each of which is answered on a 5-point Likert scale ranging from strongly disagree to strongly agree.

### Scoring system:

Students should add a number at the beginning of all 33 items before reversing the numbers they wrote in response to items 5, 28, and 33 (1=5, 2=4, 3=3, 4=2, 5=1) to score their scale. Higher ratings are thought to indicate greater emotional intelligence.

**Tool IV: The Oxford Happiness Questionnaire (OHQ):** The questionnaire was developed by **Hills and Argyle** <sup>(16)</sup> at Oxford University. It contains 29 items.

### Scoring system:

Each item was scored on a six-point Likert scale, with 1 indicating "strongly disagree" and 6 indicating "strongly agree". Out of 29, 12 items (1, 5, 6, 10, 13, 14, 19, 23, 24, 27, 28, and 29) were reversed scored. The score ranged from 1 to 6 after summation of the total score of all items and divide by 29, the total scale score categorized as a score that less than 3.5 indicated unhappy, while a score of 3.5 or more indicated happy.

**Tool V: Rosenberg Self-Esteem Scale (RSES):** It is a self-report test of their self-worth. It was adapted from **Rosenberg** <sup>(17)</sup> and used to evaluate teenagers' overall feelings of self-worth and self-acceptance by evaluating positive as well as negative emotions about the self. This scale includes 10 items and is composed of five positively and five negatively worded items, reflecting a two-dimensional construct. Each question has a 4-point Likert scale response option, ranging from strongly agree to strongly disagree.

### Scoring system:

The five items for positive self-esteem were items no. 1, 2, 4, 6, and 7, and they were scored as follows: "3=strongly agree", "2=agree", "1=disagree", and "0=strongly disagree".

The remaining five items, which are no. 3, 5, 8, 9 and 10, are more indicative of low self-esteem and are scored in reverse order (0 = strongly agree, 1 = agree, 2 = disagree, and 3 = strongly disagree). The scale flows from 0 to 30. Scores below 15 indicate low self-esteem, while those between 15 and 25 are considered normal.

#### **Content Validity and Reliability:**

To assess whether the tools addressed the study goal or not, content validity was used to modify the training program and the tools. Three experts in psychiatric nursing and statistics proved the content validity of the tools used in this study. The results showed that the social skills scale, emotional intelligence scale, happiness scale, and self-esteem scale each had a Cronbach's alpha reliability coefficient of "0.92, 0.83, 0.72, and 0.81" respectively.

#### **Field work:**

The study lasted four months started from the beginning of February 2023 to the end of May 2023.

Data collection divided into four phases as the following:

#### **1. Assessment phase:**

After the tools were completed and the necessary official permissions had been obtained, the researchers began to seek out contributors who met the required qualifications. Before asking students to participate, they gave a brief explanation of the study's objectives and introduced themselves. They met with each student separately, and got their verbal consent to contribute. The student was allowed to read and clarify the tool items before being given the form to complete. Answering all of the inquiries and scales took between 30 and 35 minutes.

#### **2. Planning phase:**

The researchers developed the program sessions in the light of the findings from the assessment phase and reviewing of relevant literature. A booklet's objectives and content were tailored to the needs of the students. There were two main sections to this booklet.

Based on the assessment phase results and reviewing of pertinent literature, the researchers developed the program sessions. The objectives and content were

adjusted to meet the needs of the students, which were laid out in a booklet. There were two main components to this.

**First**, the theoretical section covered the fundamentals of social skills, such as their definition, components, and significance. It also covered assertive behaviors definition, components, and types of communication. As well, it includes the characteristics and components of emotional intelligence, the methods for developing emotional intelligence, the definition of happiness, and the definition and significance of self-esteem.

**Second**, a training section included advices on teamwork-building exercises, exercises to improve nonverbal communication (body language), techniques for boosting self-confidence, exercises to improve emotional intelligence, seven ways to happiness, using ones imagination to boost self-esteem, and five ways to do so.

#### **3. Implementation phase:**

Small group sessions were used to carry out the program. There were ten sessions, each with a title and goal. The length of each session varied depending on how well students retained the material and varied by their response, accessibility to time, and the subject matter of each session. From 30-35 minutes were spent on the theoretical part, and 35-40 minutes on the practical part. The lecture, role play, brain storming, and discussion method was used to impart knowledge and offer support. Additionally, self-designed pamphlets and leaflets were distributed after the session for further knowledge and understanding of the value of social skills.

#### **4. Evaluation phase:**

Immediately following the intervention, the evaluation (Post-test) was conducted to compare the development of social skills, emotional intelligence, happiness, and self-esteem using the same tools as the pre-test.

#### **Pilot study:**

A pilot study was carried out with the help of eight students (10% of the sample), who were chosen at random to confirm the clarity and understanding of the items as presented, as well as to estimate the time required to complete the tools. Because no changes were required, data from the piloted students were encompassed in the study.

### Administration and Ethical consideration:

Formal approval from the Research Ethics Committee of the Faculty of Nursing, Zagazig University with the code ID/Zu.Nur.REC#:0006 and the Director of the Education Department, Abu Kabir were obtained before conducting the study. Meetings and discussions were held between the researchers and the head teacher personnel to inform them of the research's goals and objectives, as well as to improve cooperation during the study's implementation phase. Students' oral agreements were also obtained before beginning data collection. The administrative personnel reactions were very favorable toward the study.

### Statistical Analysis:

The Statistical Package for Social Sciences (SPSS), version 20.0 for Windows (SPSS Inc., Chicago, IL, USA 2011) was used to collect, tabulate, and statistically analyse all data. Quantitative data were expressed using the mean and standard deviation, while qualitative data were expressed using absolute frequencies (number) and relative frequencies (percentage). The McNemar test was used to compare two dependent groups of categorical data. When appropriate, the percentage of categorical variables was compared using the Chi-square test or Fisher's exact test. The Spearman correlation coefficient was calculated to assess the relationship between study variables, with (+) indicating direct correlation and (-) indicating inverse correlation, and values near 1 indicating strong correlation and values near 0 indicating weak correlation. The internal consistency of the scales was evaluated using the Cronbach alpha coefficient. P-value < 0.05 was considered statistically significant, p-value < 0.001 was considered highly statistically significant, and p-value 0.05 > was considered statistically insignificant.

### Results:

**Table (1):** Shows that more than half of the participant students' age was from 17 to 18 years with a Mean  $\pm$  SD of  $16.81 \pm 0.84$ , 49.3% were from the first scholar year, and 52.1% of students reside rural areas, 80.8% of students were living with mother

and father. Concerning parents' socio-demographic characteristics, the same table also reveals that less than half of fathers had high education (46.6%), while less than half of the mothers had secondary education (45.2%). Concerning parents' jobs, more than three-quarters of fathers (78.1%) were employed, while slightly more than three fifths of mothers (61.6%) were unemployed, and the majority of parents were married (80.8%). More than half of them did not have sufficient income (53.4%).

**Table (2):** Denotes that, prior to intervention, 86.3% and 13.7% of the participants had low and strong social skills, respectively. Immediately after the intervention, 89.0% of the students achieved to a high level of social skills compared to 11% of students who still had a low level of social skills. The same table also shows that there was a highly significant improvement in the after-intervention mean score of social skills ( $117.94 \pm 10.79$ ) when compared to the before-intervention mean score of  $68.54 \pm 11.56$  at  $P < 0.001$ . Furthermore, this table reveals, the before-intervention levels of low and high emotional intelligence were got with 93.2% and 6.8%, of them respectively. While immediately the after-intervention; 91.8% of the participants occupied a high level of emotional intelligence, while 8.2% of them still had low emotional intelligence. Also, there was a highly significantly improvement in the after-intervention mean score of emotional intelligence ( $121.08 \pm 19.53$ ) when compared to the before-intervention mean score of  $58.02 \pm 11.72$  at  $P < 0.001$ .

**Table (3):** Demonstrates that the prior the intervention, 97.3% and 2.7% of the studied students were unhappy and happy, respectively; while immediately after the intervention, 74.0% of the students were happy while 26.0% of them still had unhappy. The same table also clarifies that there was a highly significant improvement in the after-intervention mean score of happiness ( $126.05 \pm 25.01$ ) when compared to the before-intervention mean score of  $59.30 \pm 14.08$  at  $P < 0.001$ . However, the before-intervention, 41.1% and 58.9% of studied students had low and normal self-esteem, respectively.

While, immediately the post- intervention; 79.5% of the students had a normal self-esteem level while 20.5% of them still had low self-esteem. Meanwhile, a highly significant improvement in the after-intervention mean score of self-esteem was  $33.71 \pm 3.74$  when compared to the before-intervention mean score of  $20.57 \pm 4.01$  at  $P < 0.001$ .

**Table (4):** Clarifies that there were no statistically significant relation between students' high social skills score and their demographic characteristics before intervention. The same table also reveals that students' high social skills score was statistically significantly related to age ( $p=0.022$ ), academic year ( $p=0.010$ ), mother job ( $p=0.020$ ), and income ( $p=0.035$ ) in the post-intervention.

**Table (5):** Presents that there was only a highly statistically significant relation between students' high emotional intelligence score and their income before intervention ( $p=0.001$ ). The same table also reveals that students' high emotional intelligence score was statistically significantly related to residence ( $p=0.026$ ), academic year ( $p=0.047$ ), father education ( $p=0.024$ ), and income ( $p=0.049$ ) in the post-intervention.

**Table (6):** Detects that there were highly statistically significant relations between students' happiness scores and their parents' social status and with who they were living with before and after intervention ( $p=0.001$ ). The same table also shows that students' happiness score was only highly significant related to residence ( $p=0.001$ ) in the post-intervention.

**Table (7):** Demonstrates that there were highly statistically significant relations between students' normal self-esteem score and their age and academic degree at pre-intervention as well as post-intervention ( $p= 0.001$ ). As well, the same table presents that students' normal self-esteem score was statistically significantly related to with who they were living in pre-intervention ( $p=0.020$ ) and post-intervention ( $p=0.001$ ). In addition, it was statistically significantly related to their mother's job post-intervention ( $p=0.036$ ).

**Table (8):** Presents that, only a highly statistically significant positive correlation was detected between participant students' happiness score and social skills score before intervention ( $r=0.421$  at  $P<0.001$ ). The same table also reveals that social skills were statistically significantly positively correlated with emotional intelligence score ( $r=0.853$  at  $P<0.001$ ) and happiness score ( $r=0.591$  at  $P<0.001$ ), and self-esteem score ( $r=0.690$  at  $P<0.001$ ) after the intervention.

### Discussion:

Regarding social skills score, the current study observed that the post-intervention mean score of social skills improved significantly when compared to before intervention, as the majority of adolescent girls had high social skills in post-intervention compared with more than tenth only of them who had high social skills before the intervention. This could be a result of the program encouraging students to engage in social activities, enhancing their social skills, and completing tasks that will enable them to be imaginative and successful in their social lives.

These study findings matched with those of a previous similar study carried out by **Karimzadeh et al.** <sup>(18)</sup>, who demonstrated that the experimental group of teachers' social skill levels significantly increased as a result of the social skill training. On the same line, an Indian study done by **Alexander and Mohapatra** <sup>(19)</sup> reported that the participants' social skills significantly improved as a result of the program. As well, **Pourpeyghambar** <sup>(20)</sup>, who conducted a similar study in Iran and discovered that the average score and level of social skills among high school female students improved after the test compared to before it. Conversely, **Ensari** <sup>(5)</sup> revealed that there was no improvement in social skills from the pre-test to the post-test ( $M = 3.56$  and  $3.54$ , respectively);  $t(78) = 0.51$ ;  $p = 0.61$ . This might result from the use of a different social skills scale.

The current study result clarified that there was a significant enhancement in the after-intervention mean score of emotional intelligence when compared to that before the intervention, as most adolescent girls had high emotional intelligence post-program compared to a minority of those who had high emotional intelligence before the

program. This could be explained by the fact that social skill training includes exercises that teach students how to identify the appropriate emotions to be used in various situations, how to cope with stress better, how to be admired by their peer and how to have fewer behavioral issues to promote healthy thinking and behavior.

The present study result was in accordance with that of the study of **Alexander and Mohapatra** <sup>(19)</sup>, which proved that the participants' emotional intelligence significantly differed following social skills training ( $p < 0.001$ ). As well, the study of **Vila et al.** <sup>(21)</sup> indicated that after the program, secondary school students showed an improvement in their emotional intelligence. Conversely, **Ensari** <sup>(5)</sup> revealed that emotional intelligence did not significantly rise between the pre-test and the post-test ( $M = 3.46$  and  $3.50$ , respectively),  $t(82) = -0.97$ ,  $p = 0.33$ .

The current study finding demonstrated that there was an improvement in happiness scores post-program, as slightly less than three quarters of girls were happy after the implementation of the program compared to that of it before the program as it was three percent only. This could be because the communication skills in social training increase the level of extroversion over some time. Students who demonstrate social competence in a variety of settings exhibit more sociable and adaptable behaviors, are more well-liked by their peers, and are more successful in developing satisfying interpersonal relationships. They consequently have a healthy sense of self-esteem thanks to the support and criticism they get from others, which lead to a sense of happiness.

These results are in line with those of **Hojjat et al.** <sup>(22)</sup>, and **Sabzi and Foulad** <sup>(23)</sup>, with an important variation in the students' happiness scores between the pre and post-test. Thus, social skill development programs can be said to result in higher levels of happiness. Additionally, these findings are concurring with those of a study conducted by **Kheirkhah** <sup>(24)</sup> which showed that teaching social skills to students increased their happiness.

Also, the study performed by **Milani** <sup>(12)</sup> showed that social skills education makes the experimental group happier than the control group.

Regarding the score of self-esteem among adolescent girls, the current research revealed that self-esteem had improved post-intervention, as the majority of students had normal self-esteem post intervention compared with less than three fifths of them having a normal self-esteem before intervention. This may be attributed to having social skills, particularly those in managing first impressions, assuming different social roles, and effectively communicating, which should result in a positive social self-image. Additionally, it could result in a type of "social" self-efficacy, which is the conviction that one can successfully navigate a variety of social situations.

The results of this research are in line with those of **Kheirkhah** <sup>(24)</sup>, which showed that the academic self-efficacy of female students increased as a result of social skills training. As well, the study done by **Ali et al.** <sup>(25)</sup> revealed that the social skills training program has the beneficial effect of raising self-esteem levels. On the same line, an Egyptian study carried out by **Maher** <sup>(26)</sup>, who discovered a highly significant difference between teenagers' self-esteem prior to and after the intervention. In the same way, **Motlagh et al.** <sup>(27)</sup> found that the after-test averages of self-esteem had been higher than the pre-test averages. However, a study performed by **Babakhani** <sup>(28)</sup>, contradicted this study, which revealed that there were no statistically significant differences in adolescent self-esteem before and after social skills training.

Considering the relation between total high social skills score of adolescents and their socio demographic data the study findings revealed that the students' high social skills score was statistically significantly related to age, academic year, mother's job, and income in the post-intervention. The explanation for this is provided by the higher a student's socioeconomic status, the easier it is for adolescents to establish interpersonal relationships. The initial and most significant variable influencing adolescents' socialization is their families.

Parents have close psychological contact with their adolescents and are the most frequent participants and managers in their adolescent's social life. This finding was matched with **Gomes and Pereira** <sup>(29)</sup>, who proved that there was an association between social skills and child's age. Also, a Chinese study was done by **Li et al.** <sup>(30)</sup>, highlighted that adolescents with a lower socioeconomic class had worse social relationships than those with a greater socioeconomic class.

The current study findings presented that there were only highly statistically significant relations between students' high emotional intelligence score and their income before and after the intervention. These findings are similar to those of the study performed by **Shukla and Srivastava** <sup>(31)</sup>, which found a positive relationship between household income and emotional intelligence. Emotional intelligence scores revealed a significant difference based on their family income level. However, the outcome of the present study contradicted those of **Dalbudak and Çelik** <sup>(32)</sup>, who determined that the emotional intelligence scale revealed no significant difference related to income level ( $F=1.819, p>0.05$ ).

Statistically significant relations were found between students' high emotional intelligence score and residence, academic year, and father education in the post-intervention. This could be because students in urban areas appear to receive optimistic social support, which is strongly related to emotional intelligence. Furthermore, the father's education was a predictor of the adolescents' emotional intelligence.

In this respect, the previous results of the current study are confirmed by **Yilmaz et al.** <sup>(33)</sup>, who concluded that first-year university students scored higher on the emotional intelligence total scale than participants in their second, third, or fourth years of study. This is also similar to the finding of a study done by **Kucukkaragoz** <sup>(34)</sup>, who proved that there are notable differences based on family income levels, mothers' occupations and education levels, fathers' occupations and education levels, and the family size.

However, these results were disapproved by **Patel** <sup>(35)</sup> who reported that teenagers' emotional intelligence differs significantly between urban and rural areas. Teenagers in rural areas are more emotionally intelligent than those in urban areas.

The current study results revealed that there were highly statistically significant relations between students' happiness scores and their parents' social status and with who they lived before and after the program. This may be due to that cohabitating married couples value their partners emotional intimacy and relationships. Additionally, they have more opportunities to express their feelings, which may make them happier and reflect well on their adolescents. Support from families boosts students sense of well-being and offers them additional emotional assistance and motivation, both of which are beneficial to students' happiness. These results were matched with the results of **Azizi et al.** <sup>(36)</sup>, who found a statistically significant association between students' happiness and parents' marital status. Also, a Chinese study performed by **Jiang et al.** <sup>(37)</sup>, showed that student happiness and the social status of parents are related. Further, the study of **Sahraian and Vakili** <sup>(38)</sup>, found that the students who lived at home with their families were significantly happier than those who moved into residence.

The present study results revealed that students' happiness score was only highly statistically significantly related to residence in the post-intervention. Having positive relationships with other people and the social participation that is present in rural areas are factors that increase happiness. Additionally, having a happy and healthy family fosters a peaceful, warm, cohesive environment at home that can foster and heighten happiness among the family members. A nearly similar finding was reported by **Mei and Lin** <sup>(39)</sup> who found that there was a strong positive relationship between Internet use and happiness among rural residents in western regions of China. Incongruent with this result, an Iranian study done by **Mahmoudi et al.** <sup>(40)</sup>, who determined that there was not being statistically significant difference was found between happiness and residence status.



The current study findings demonstrated that there were highly statistically significant relations between students' normal self-esteem score and their age and academic degree in pre-intervention as well as post-intervention. This may be related to that students' socialization circles grow larger as they get older, which helps students develop their self-confidence. These results were corresponded to those of **Karki et al.** <sup>(41)</sup>, who demonstrated that there was a significant relationship between self-esteem and the respondents' age. However, a Jordanian study carried out by **Alkhasawneh** <sup>(42)</sup> showed that there were no differences regarding the school grade. The similarity of the classes taken in this study may be the cause of this result.

Statistically significant relations were found between students' normal self-esteem score and with whom they lived with pre and post-intervention, in addition, it was a statistically significant relation to their mother's job post-intervention. This result might be attributed to that the best position for providing a trustworthy assessment of children's self-esteem is with parents, who are viewed as influential forces in the development of children's self-esteem and socialization, which improve self-esteem. These results were approved by the results of **Karki et al.** <sup>(41)</sup> which revealed that there was a strong relation between self-esteem and the profession of respondents.

The recent study's findings showed that highly positive statistically significant correlation exists between participant students' happiness score and social skills score before and after the intervention. This relationship could be explained through the growth of positive interactions when social skills are strong. These in turn have a favorable impact on wellness. The positive relationship between social skills and happiness may also be explained by the fact that high social skills are linked to higher self-esteem and perceived peer support, two factors that are also linked to greater happiness.

This result was consistent with that of **Kheirkhah** <sup>(24)</sup>, who stated that there was a statistically significant relationship since social skills training was successful in raising the happiness of girls. However, these findings are matched with those of previous research carried out by **Quoidbach et al.** <sup>(43)</sup>, who demonstrated that there were links between happiness and social skills attitude. As well, a recent study carried out by **Gralia** <sup>(44)</sup> showed that there was an apparent positive correlation between subjective happiness and social skills, after the program's application.

As well, the present study result demonstrated that there was a highly statistically significantly positive correlation between social skills and emotional intelligence score after the intervention. This may be due to that the most emotionally intelligent people are motivated to and sought out higher social engagement, both in broad social circles and intimate social relationships. Similar results were detected by **Al-Tamimi and Al-Khawaldeh** <sup>(45)</sup>, who reported that there is a strong positive correlation between emotional intelligence and social skills.

Finally, in the present study, a highly statistically significant positive correlation was reported between social skills and self-esteem scores after the intervention. This relationship could be explained through the beliefs, attitudes, motivations, interests, and tasks of students are improved by educating them on social skills. Additionally, their understanding of emotions, interactions, and expectations from family and peers has changed. Additionally, socially competent individuals have trust in their social skills and are more likely to praise internal rather than external factors for achieving success in social settings.

In the same line, **El Halawany** <sup>(46)</sup> indicated that self-esteem and social skills were positively correlated with one another. Similarly, **Motlagh et al.** <sup>(27)</sup> found that developing social skills improves self-esteem. Also, the study carried out by **Seema and Venkatesh** <sup>(47)</sup> indicated that teenagers in the experimental group had significantly higher self-esteem than those in the control group, who did not receive social skills training as an intervention.

Moreover, **Pourpeyghambar** <sup>(20)</sup> found that, the development of social skills in students has been successful in raising their self-esteem.

**Conclusion:**

In light of the current study, it can be concluded that the emotional intelligence, happiness, and self-esteem of adolescents were all improved by the social skill training program.

**Recommendations:**

Based on findings, the study recommended:

1. Offering girl students some social skills through curricula that are interested in the collective aspects, supporting cooperative academic projects, and organizing collaborative activities by the Students' Affairs Deanship at the schools.
2. Creating some programs and exercises to help teenagers' emotional intelligence grow.
3. Instructors, teachers, and principals of schools should implement social skill training programs in educational programs given the effect of social skills on students to enhance happiness, self-esteem, and emotional intelligence.
4. To enable the generalization of the findings, the study must be carried out on a larger sample, encompassing a larger geographic area, and with enough data to enable analyses regarding gender, age, parent's education, and birth order.
5. For adolescent girls, comprehensive psychosocial intervention programs and rehabilitation programs are primarily recommended to boost self-esteem, emotional intelligence, and happiness.

**Table (1):** Demographic Characteristics of Adolescent Students and their Parents (n = 73)

Demographic characteristics	No	%
<b>Age (years)</b>		
16-<17	34	46.6
17-18	39	53.4
<b>Mean ± SD</b>	16.81±0.84	
<b>Residence</b>		
Urban	35	47.9
Rural	38	52.1
<b>Academic degree</b>		
First year	36	49.3
Second year	19	26.0
Third year	18	24.7
<b>Father education</b>		
Primary education	8	11.0
Secondary education	31	42.5
High education	34	46.6
<b>Father job</b>		
Unemployed	16	21.9
Employee	57	78.1
<b>Mother education</b>		
Illiterate	6	8.2
Primary education	8	11.0
Secondary education	33	45.2
High education	26	35.6
<b>Mother job</b>		
Unemployed	45	61.6
Employee	28	38.4
<b>Who living with</b>		
Mother and father	59	80.8
Father	2	2.7
Mother	12	16.4
<b>Social status</b>		
Married	59	80.8
Unmarried	6	8.2
Widowed	8	11.0
<b>Income</b>		
Insufficient	39	53.4
Sufficient	30	41.1
Sufficient and saved	4	5.5

**Table (2):** Frequency and Mean Scores of Social Skills' Level and Emotional Intelligence Level among the Adolescent Students Pre and Post Intervention (n = 73)

Items	Pre-intervention				Post-intervention				MC <sup>c</sup> p
	Low		High		Low		High		
	No	%	No	%	No	%	No	%	
<b>Social Skills</b>	63	86.3	10	13.7	8	11.0	65	89.0	<0.001**
Mean ± SD	68.54±11.56				117.94±10.79				
<b>Emotional Intelligence</b>	68	93.2	5	6.8	6	8.2	67	91.8	<0.001**
<b>Mean ± SD</b>	58.02±11.72				121.08±19.53				

MC: McNemar test,

\*\*: Statistically highly significant (p &lt; 0.001).

**Table (3):** Frequency and Mean Scores of Oxford Happiness and Self-Esteem Level among the Adolescent Students Pre and Post Intervention (n = 73)

Items	Pre intervention				Post intervention				MC p
	Un-happy		Happy		Un-happy		Happy		
	No	%	No	%	No	%	No	%	
<b>Happiness</b>	71	97.3	2	2.7	19	26.0	54	74.0	<0.001**
Mean ± SD	59.30±14.08				126.05±25.01				
<b>Self-Esteem</b>	<b>Low</b>		<b>Normal</b>		<b>Low</b>		<b>Normal</b>		<0.001**
Mean ± SD	30	41.1	43	58.9	15	20.5	58	79.5	
	20.57±4.01				33.71±3.74				

MC: McNemar test, \*\*: Statistically highly significant (p< 0.001).

**Table (4):** Relations between Total High Social Skills Score of Adolescent Students and their Demographic Characteristics Pre and Post Intervention (n = 73).

Demographic characteristics	High social skills score				$\chi^2$ (p <sup>1</sup> -value)	$\chi^2$ (p <sup>2</sup> -value)
	Pre (n=10)		Post (n=65)			
	No.	%	No.	%		
<b>Age (years)</b>						
16-<17	4	40.0	27	41.5	FET	FET
17-18	6	60.0	38	58.5	(0.742)	(0.022*)
<b>Residence</b>						
Urban	2	20.0	30	46.2	FET	FET
Rural	8	80.0	35	53.8	(0.08)	(0.468)
<b>Academic degree</b>						
First year	4	40.0	28	43.1	1.175	9.234
Second year	4	40.0	19	29.2	(0.556)	(0.010**)
Third year	2	20.0	18	27.7		
<b>Father education</b>						
Primary education	2	20.0	7	10.8	0.988	0.094
Secondary education	4	40.0	28	43.1	(0.610)	(0.954)
High education	4	40.0	30	46.2		
<b>Father job</b>						
Unemployed	2	20.0	14	21.5	FET	FET
Employee	8	80.0	51	78.5	(0.99)	(0.99)
<b>Mother education</b>						
Illiterate	2	20.0	5	7.7	4.581	1.553
Primary education	0	0.0	7	10.8	(0.205)	(0.670)
Secondary education	6	60.0	31	47.7		
High education	2	20.0	22	33.8		
<b>Mother job</b>						
Unemployed	6	60.0	37	56.9	FET	FET
Employee	4	40.0	28	43.1	(0.99)	(0.020*)
<b>Who living with</b>						
Mother and father	8	80.0	51	78.5	0.408	2.132
Father	0	0.0	2	3.1	(0.816)	(0.344)
Mother	20	20.0	12	18.5		
<b>Social status</b>						
Married	8	80.0	51	78.5	3.227	2.132
Unmarried	2	20.0	6	9.2	(0.199)	(0.344)
Widowed	0	0.0	8	12.3		
<b>Income</b>						
Insufficient	4	40.0	36	55.4	2.033	6.703
Sufficient	6	60.0	27	41.5	(0.362)	(0.035*)
Sufficient and saved	0	0.0	2	3.1		

$\chi^2$  : Chi square test FET: Fisher exact test Non-significant(  $p>0.05$ ), \*: Statistically significant ( $p<0.05$ ), \*\*: Statistically highly significant ( $p<0.001$ ), p1: for pre-intervention, p2: for post-intervention.

**Table (5):** Relations between Total High Emotional Intelligence Score of Participant Students and their Demographic Characteristics Pre and Post Intervention (n = 73)

Demographic characteristics	High emotional intelligence score				$\chi^2$ (p <sup>1</sup> -value)	$\chi^2$ (p <sup>2</sup> -value)
	Pre (n=5)		Post (n=67)			
	No.	%	No.	%		
<b>Age (years)</b>						
16-<17	4	80.0	32	47.8	FET	FET
17-18	1	20.0	35	52.2	(0.177)	(0.679)
<b>Residence</b>						
Urban	4	80.0	35	52.2	FET	FET
Rural	1	20.0	32	47.8	(0.187)	(0.026*)
<b>Academic degree</b>						
First year	5	100.0	34	50.7	5.517	6.099
Second year	0	0.0	15	22.4	(0.063)	(0.047*)
Third year	0	0.0	18	26.9		
<b>Father education</b>						
Primary education	1	20.0	8	11.9	1.246	7.499
Secondary education <sup>1</sup>	1	20.0	31	46.3	(0.536)	(0.024*)
High education	3	60.0	28	41.8		
<b>Father job</b>						
Unemployed	1	20.0	14	20.9	FET	FET
Employee	4	80.0	53	79.1	(0.99)	(0.606)
<b>Mother education</b>						
Illiterate	1	20.0	6	9.0	4.629	3.227
Primary education	1	20.0	8	11.9	(0.201)	(0.358)
Secondary education <sup>1</sup>	0	0.0	31	46.3		
High education	3	60.0	22	32.8		
<b>Mother job</b>						
Unemployed	5	100.0	43	64.2	FET	FET
Employee	0	0.0	24	35.8	(0.149)	(0.195)
<b>Who living with</b>						
Mother and father	5	100.0	55	82.1	1.274	1.476
Father	0	0.0	2	3.0	(0.529)	(0.478)
Mother	0	0.0	10	14.9		
<b>Social status</b>						
Married	5	100.0	55	82.1	1.274	3.686
Unmarried	0	0.0	6	9.0	(0.529)	(0.158)
Widowed	0	0.0	6	9.0		
<b>Income</b>						
Insufficient	1	20.0	33	49.3	12.798	5.699
Sufficient	2	40.0	30	44.8	(0.001**)	(0.049*)
Sufficient and saved	2	40.0	4	6.0		

$\chi^2$  : Chi square test FET: Fisher exact test Non-significant(  $p > 0.05$ ), \*: Statistically significant ( $p < 0.05$ ), \*\*: Statistically highly significant ( $p < 0.001$ ) p1: for pre-intervention, p2: for post-intervention.

**Table (6):** Relations between Happiness Score of Participant Students and their Demographic Characteristics Pre and Post Intervention (n = 73)

Demographic characteristics	Happiness score				$\chi^2$ (p <sup>1</sup> -value)	$\chi^2$ (p <sup>2</sup> -value)
	Pre (n=2)		Post (n=54)			
	No.	%	No.	%		
<b>Age (years)</b>						
16-<17	0	0.0	24	44.4	FET	FET
17-18	2	100.0	30	55.6	(0.495)	(0.599)
<b>Residence</b>						
Urban	0	0.0	20	37.0	FET	FET
Rural	2	100.0	34	63.0	(0.494)	(0.001**)
<b>Academic degree</b>						
First year	0	0.0	26	48.1	5.844	3.292
Second year	2	100.0	12	22.2	(0.054)	(0.193)
Third year	0	0.0	16	29.6		
<b>Father education</b>						
Primary education	0	0.0	4	7.4	2.359	3.774
Secondary education	0	0.0	22	40.7	(0.307)	(0.152)
High education	2	100.0	28	51.9		
<b>Father job</b>						
Unemployed	0	0.0	12	22.2	FET (0.99)	FET
Employee	2	100.0	42	77.8		(0.99)
<b>Mother education</b>						
Illiterate	0	0.0	4	7.4	2.493	2.615
Primary education	0	0.0	6	11.1	(0.477)	(0.455)
Secondary education <sup>l</sup>	2	100.0	22	40.7		
High education	0	0.0	22	40.7		
<b>Mother job</b>						
Unemployed	2	100.0	32	59.3	FET	FET
Employee	0	0.0	222	40.7	(0.521)	(0.588)
<b>Who living with</b>						
Mother and father	0	0.0	54	100.0	10.453	49.231
Father	0	0.0	0	0.0	(0.001**)	(0.001**)
Mother	2	100.0	0	0.0		
<b>Social status</b>						
Married	0	0.0	52	96.3	22.962	33.165
Unmarried	2	100.0	0	0.0	(0.001**)	(0.001**)
Widowed	0	0.0	2	3.7		
<b>Income</b>						
Insufficient	2	100.0	28	51.9	1.793	1.856
Sufficient	0	0.0	24	44.4	(0.408)	(0.395)
Sufficient and saved	0	0.0	2	3.7		

$\chi^2$  : Chi square test FET: Fisher exact test Non-significant(  $p > 0.05$ ), \*\*: Statistically highly significant ( $p < 0.001$ ) p1: for pre-intervention, p2: for post-intervention.

**Table (7):** Relations between Normal Self-esteem Score of Participant Students and their Demographic Characteristics Pre and Post Intervention (n = 73)

Demographic characteristics	Normal self-esteem score				$\chi^2$ (p <sup>1</sup> - value)	$\chi^2$ (p <sup>2</sup> - value)
	Pre		Post			
	No.	%	No.	%		
<b>Age (years)</b>						
16-<17	14	32.6	20	34.5	FET	FET
17-18	29	67.4	38	65.5	(0.001**)	(0.001**)
<b>Residence</b>				43.1		
Urban	19	44.2	25	56.9	FET	FET
Rural	24	55.8	33		(0.483)	(0.148)
<b>Academic degree</b>						
First year	15	34.9	21	36.2	17.286	19.404
Second year	10	23.3	19	32.8	(0.001**)	(0.001**)
Third year	18	41.9	18	31.0		
<b>Father education</b>						
Primary education	6	14.0	6	10.3	1.652	1.333
Secondary education	16	37.2	23	39.7	(0.438)	(0.514)
High education	21	48.8	29	50.0		
<b>Father job</b>						
Unemployed	6	14.0	13	22.4	FET	FET
Employee	37	86.0	45	77.6	(0.083)	(0.99)
<b>Mother education</b>						
Illiterate	4	9.3	4	6.9	2.937	1.619
Primary education	6	14.0	7	12.1	(0.402)	(0.655)
Secondary education	16	37.2	25	43.1		
High education	17	39.5	22	37.9		
<b>Mother job</b>						
Unemployed	26	60.5	32	55.2	FET	FET
Employee	17	39.5	26	44.8	(0.99)	(0.036*)
<b>Who living with</b>						
Mother and father	38	88.4	57	98.3	7.832	55.550
Father	2	4.7	0	0.0	(0.020*)	(0.001**)
Mother	3	7.0	1	1.7		
<b>Social status</b>						
Married	38	88.4	45	77.6	4.733	2.490
Unmarried	3	7.0	5	8.6	(0.094)	(0.288)
Widowed	2	4.7	8	13.8		
<b>Income</b>						
Not enough	21	48.8	33	56.9	1.290	2.905
Enough	20	46.5	23	39.7	(0.525)	(0.234)
Enough and saved	2	4.7	2	3.4		

$\chi^2$  : Chi square test FET: Fisher exact test Non-significant(  $p>0.05$ ), \*: Statistically significant ( $p<0.05$ ) \*\*: Statistically highly significant ( $p<0.001$ ) p1: for pre-intervention, p2: for post-intervention.

**Table (8):** Correlation Matrix of Participants' Social Skills Score, Emotional Intelligence Score, Happiness Score, and Self-Esteem Score Pre and Post Intervention (n = 73)

Items		Social skills score			
		Pre- Intervention		Post- Intervention	
		(r)	P	(r)	P
Emotional intelligence score	Pre	0.108	0.363		
	Post			0.853	<0.001**
Happiness score	Pre	0.421	<0.001**		
	Post			0.591	<0.001**
Self-esteem score	Pre	0.090	0.450		
	Post			0.690	<0.001**

Non-significant ( $p>0.05$ ) \*\*: Statistically highly significant ( $p<0.001$ ), r: Correlation coefficient.



**References:**

1. Bell, B.T. Understanding adolescents: Perspectives on HCI research with Teenagers. *Springer International Publishing*, 2016; 11-27. DOI: 10.1007/978-3-319-33450-9\_2.
2. Brouzos, A., Vassilopoulos, S.P., Vlachioti, A., and Baourda, V. A coping-oriented group intervention for students waiting to undergo secondary school transition: Effects on coping strategies, self-esteem, and social anxiety symptoms. *Psychology in the Schools*, 2020; 57(1): 31-43.
3. Guadalupe, F. Social skills training for autistic children: A comparison study between inclusion and mainstreaming education. California Lutheran University. *Research Article*, 2016; 1, 16-18. Available at <https://goo.gl/JMnCm6> New Zealand.
4. Mayer, J.D., Caruso, D.R. and Salovey, P. The ability model of emotional intelligence: Principles and updates. *Emotion Review*, 2016; 8, 290-300. <https://doi.org/10.1177/1754073916639667>.
5. Ensari, P. How to improve emotional intelligence and social skills among adolescents: The Development and test of a new microexpressions training. *Journal of Behavioral and Brain Science*, 2017; 7, 211-225. <https://doi.org/10.4236/jbbs>.
6. Moeini, B., Barati, M., Farhadian, M., and Ara, M. The association between social support and happiness among elderly in Iran. *Korean J Fam Med*, 2018; 39: 260-265. <https://doi.org/10.4082/kjfm.17.0121>.
7. Ryu, J.H., and Kim, Y.S. Influence of interest in appearance of upper elementary school student on makeup behavior and self-esteem. *Asian Journal of Beauty and Cosmetology*, 2020; 18(1):17-25.
8. Orth, U., Erol, R.Y., and Luciano, E.C. Development of self-esteem from age 4 to 94 years: A meta-analysis of longitudinal studies. *Psychological Bulletin*, 2018; 144(10): 1045.
9. Anierobi, E.I., Etodike, C.E., Eluemuno, A., and Nneka, N.M. Body image and self-esteem as predictors of indecent dressing among female undergraduates in universities in Anambra State, Nigeria. *European Journal of Humanities and Social Sciences*, 2021; 1(4), 80-85. DOI: <http://dx.doi.org/10.24018/ejsocial.2021.1.4.26>.
10. Jönsson, J., Maltestam, M., Tops, A.B., and Garmy, P. School nurses' experiences working with students with mental health problems: A qualitative study. *The Journal of School Nursing*, 2019; 35(3), 203-209.
11. Rodrigues, R.G., Meeuwisse, M., Notten, T., and Severiens, S.E. Preparing to transition to secondary education: Perceptions of Dutch pupils with migrant backgrounds. *Educational Research*, 2018; 60(2): 222-240.
12. Milani, M.J. The effectiveness of social skills training on happiness and mental health of adolescent males. *Mental Health: Research and Practice*, 2022; 1(1): 14-22. DOI: 10.22034/MHRP.2022.154061.
13. Thomas, L. Quasi-experimental design definition, types & examples. 2020. Accessed on: 19 January, 2023 10:00 pm. Available at: <https://www.scribbr.com/methodology/quasi-experimental-design/>
14. Abd-Elhameed, N.N. Adolescent social skills scale. *Psychological Counseling Journal, Ain Shams University, Psychological Counseling Center*. 2012; 30, 291-309. Available at <http://search.mandumah.com/Record/161990>.
15. Schutte, N.S., Malouff, J.M., Hall, L.E., Haggerty, D.J., Cooper, J.T., Golden, C.J., and Dornheim, L. Development and validation of a measure of emotional intelligence. *Personality and Individual Differences*, 1998; 25, 167-177.
16. Hills, P., and Argyle, M. The Oxford Happiness Questionnaire: A compact scale for the measurement of psychological well-being. *Personality and Individual Differences*, 2002; 33, 1073-1082.
17. Rosenberg, M. Rosenberg Self-Esteem Scale (RSE): Acceptance and commitment therapy. *Measures Package*, 1965; 61(52):18.
18. Karimzadeh, M., Goodarzi, A., and Rezaei, S. The effect of social emotional skills training to enhance general health & emotional intelligence in the primary teachers. *Procedia-Social and Behavioral Sciences*, 2012; 46, 57-64. doi: 10.1016/j.sbspro.2012.05.068.
19. Alexander, A.E., and Mohapatra, B. Effect of social skill training on emotional intelligence of adolescents with specific learning disability. *International Journal of Science and Research*, 2017; 6(3), 990-994.
20. Pourpeyghambar, F. The effect of social skills training on social adaptation, progress motivation and self-esteem among high school female students in Tabriz. *Specialty Journal of Psychology and Management*, 2019; 5 (3): 1-7. ISSN: 2412-5695. Available online at [www.sciarena.com](http://www.sciarena.com).

21. Vila, S., Gilar-Corbí, R., and Pozo-Rico, T. Effects of student training in social skills and emotional intelligence on the behavior and coexistence of adolescents in the 21st Century. *Int. J. Environ. Res. Public Health*, 2021; 18, 5498. <https://doi.org/10.3390/ijerph1810549>.
22. Hojjat, S.K., Golmakani, E., Norozi Khalili, M., Shakeri Chenarani, M., Hamidi, M., Akaberi, A., and Rezaei Ardani, A. The effectiveness of group assertiveness training on happiness in rural adolescent females with substance abusing parents. *Global journal of health science*, 2015; 8(2), 156-164. DOI:10.5539/gjhs.v8n2p156.
23. Sabzi, N., and Foulad, C.M. The Effectiveness of communication skills training on perceived competence and happiness of male students in the sixth grade of elementary school in Shiraz. *Knowledge & Research in Applied Psychology*, 2018; 19(4): 114-123. <https://doi.org/10.30486/jsrp.2018.545643>
24. Kheirkhah, A. Investigating the effect of social skills training on happiness, academic resilience and self-efficacy of girl students. *Archives of Pharmacy Practice*, 2020; 11(S1): 157-164.
25. Ali, S.I., Abdel-Fatah, S.R., Mahmoud, A.S., and El-Sayad, S.M. Effect of social skills training program on self-esteem and aggression among children in residential institutions in Port Said City. *Arch Nurs Pract Care*, 2018; 4(1): 007-013. /10.21608/pssjn.2018.33324.
26. Maher, R. The effectiveness of psycho-social training program on self-esteem among adolescents in residential institutions. 2016. Unpublished Doctorate Dissertation. Menofya University, Faculty of Nursing.
27. Motlagh, G.B., Abeditorab, R., Bahadormotlagh, M.M., Gholaminooghab, M.H., and Farjami, A. The effectiveness of teaching social skills on self-esteem and dimensions (self, family, social and academic) in students with learning disabilities. *Journal of Applied Environmental and Biological Sciences*, 2015; 5(11S): 689-694. Available at [www.textroad.com](http://www.textroad.com).
28. Babakhani, N. The effects of social skills training on self-esteem and aggression male adolescents. *Journal of Social and Behavioral Science*, 2011; 30, 1565-1570. Available at <https://goo.gl/jh4pW2>. doi: 10.1016/j.sbspro.2011.10.304.
29. Gomes, R., and Pereira, A. Influence of age and gender in acquiring social skills in portuguese preschool education. *Psychology*, 2014; 5, 99-103. doi: 10.4236/psych.2014.52015.
30. Li, J., Wang, J., Li, J.Y., Qian, S., Jia, R.X., Wang, Y.Q., Liang, J.H., and Xu, Y. How do socioeconomic status relate to social relationships among adolescents: a school-based study in East China. *BMC pediatrics*, 2020; 20(1): 271. <https://doi.org/10.1186/s12887-020-02175-w>.
31. Shukla, A., and Srivastava, R. Examine the relationship between emotional intelligence with demographic profile, job stress, job satisfaction and turnover intention. *International Journal of Applied Business and Economic Research*, 2016; 14(6): 4887-4900.
32. Dalbudak, I., and Çelik, S. Investigation of aggression and emotional intelligence characteristics of the students from Faculty of Sport Sciences and State Conservatory of Turkish Music. *International Education Studies*, 2019; 12(9): 117-129. doi:10.5539/ies.v12n9p117.
33. Yılmaz, M., Altıok, M., Yaman, Z., Seyrek, S., Sürmeli, Y., and Sungur, M.A. Emotional intelligence in university students. *Global Journal of Guidance and Counseling in Schools Current Perspectives*, 2016; 5(2): 67. DOI:10.18844/gjgc.v5i2.463.
34. Kucukkaragoz, H. Family environment and emotional quotient in primary school 3rd grade students. *Cypriot Journal of Educational Sciences*, 2020; 15(2): 336-348. <https://doi.org/10.18844/cjes.v15i2.48>.
35. Patel H.A. Emotional intelligence and psychological wellbeing of adolescents. *International Journal for Technological Research In Engineerin*, 2015; 2(10): 2333-2336.
36. Azizi, M., Mohamadian, F., Ghajarieah, M., and Direkvand-Moghadam, A. The effect of individual factors, socioeconomic and social participation on individual happiness: A cross-sectional study. *Journal of clinical and diagnostic research: JCDR*, 2017; 11(6): VC01–VC04. <https://doi.org/10.7860/JCDR/2017/24658.9982>.
37. Jiang, Y., Lu, C., Chen, J., Miao, Y., Li, Y., and Deng, Q. Happiness in university students: personal, familial, and social factors: a cross-sectional questionnaire survey. *International journal of environmental research and public health*, 2022; 19(8): 4713. <https://doi.org/10.3390/ijerph19084713>.

38. Sahraian, A., and Vakili, S.M. Studying the happiness level among medical students of Shiraz Medical Sciences University. *Shiraz E-Med J*, 2012; 13(4):179-186.
39. Mei, Y., and Lin, N. Internet use and the happiness of rural residents: the role of education and health. *International journal of environmental research and public health*, 2023; 20(4): 3540. <https://doi.org/10.3390/ijerph20043540>.
40. Mahmoudi, A., Mahmoudi, F., Shamsaei, M., Raeisi Shahraki, H., and Kakaei, H. Determination of the level of happiness among students of Shiraz University of Medical Sciences, Iran. *Journal of Research in Medical and Dental Science*, 2019; 7(2): 52-6.
41. Karki, K., Sapkota, A., Jajko, S., and Singh, D.R. Socio-demographic variables related to self-esteem, psychological stress and health-related quality of life among older adults: A cross-sectional study in Kavrepalanchowk district of Nepal. *SAGE Open Medicine*, 2021; 9, 20503121211056437. <https://doi.org/10.1177/20503121211056437>.
42. Alkhasawneh, T., Al-Shaar, A.S., Khasawneh, M., Darawsheh, S., and Aburaya, N. Self-esteem and its relationship to some demographic variables among students with learning disabilities. *Inf Sci Lett*, 2022; 11(9): 1929-1936. Available at: <https://digitalcommons.aaru.edu.jo/isl/vol11/iss6/9>.
43. Quoidbach, J., Taquet, M., Desseilles, M., de Montjoye, Y.A., and Gross, J.J. Happiness and social behavior. *Psychological science*, 2019; 30(8): 1111-1122. DOI: [10.1177/0956797619849666](https://doi.org/10.1177/0956797619849666).
44. Gralla, K.F. Subjective well-being and its association with social skills and psychological flexibility. 2022. (Bachelor's thesis, University of Twente) <https://purl.utwente.nl/essays/91472>.
45. Al-Tamimi, E.M.R.A., and Al-Khawaldeh, N.A. Emotional intelligence and its relation with the social skills and religious behaviour of female students at Dammam University in the light of some variables. *International Education Studies*, 2016; 9(3):131-147.
46. El Halawany, R.M. Effectiveness of psychosocial skills training program on improvement of self-esteem and social skills among adolescents in residential institutions. 2016. Master Thesis, Faculty of Nursing, [https://www.google.com/url?sa=t&rct=j&q=&src=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwiVq6\\_ExIn\\_AhV7VaQEHQwMBLYQFnoECBkQAQ&url=http%3A%2F%2Fsrv4.eulc.edu.eg%2Fculc\\_v5%2FLibraries%2FThesis%2FBrowseThesisPages.aspx%3Ffn%3DPublicDrawThesis%26BibID%3D12301515&usq=AOvVaw2i5e71hohfk9zHmyojkP\\_z](https://www.google.com/url?sa=t&rct=j&q=&src=s&source=web&cd=&cad=rja&uact=8&ved=2ahUKEwiVq6_ExIn_AhV7VaQEHQwMBLYQFnoECBkQAQ&url=http%3A%2F%2Fsrv4.eulc.edu.eg%2Fculc_v5%2FLibraries%2FThesis%2FBrowseThesisPages.aspx%3Ffn%3DPublicDrawThesis%26BibID%3D12301515&usq=AOvVaw2i5e71hohfk9zHmyojkP_z).
47. Seema, G.B., and Venkatesh, K.G. Impact of social skills training on self-esteem among male and female adolescent students. *Indian Journal of Positive Psychology*, 2018; 9(1): 147-151.