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Comparative study on the development of emotional intelligence of institutionalized adolescents and teenagers in the family

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Abstract

Problem statement: A major group of disorders which abandonment brings out relates to the development of the institutionalized adolescent's personality (emotional imbalance, distortions in social relations). Adolescents from the foster home tend to develop a less affirmed personality, being conformists and subordinates to the others' ideals. It is difficult for them to be confronted with the imperatives of the independent life. Conclusions: The results of this study formed the bases of achieving a psychotherapeutic intervention model - structured planning meetings, each meeting have the objectives and techniques to use.

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1. Introduction

American psychologist Daniel Goleman published a book in 1995, which became known worldwide, "Emotional Intelligence: Why is more important than IQ" (Emotional Intelligence: Why It Can Matter More Than IQ), bringing the current and defining the concept of emotional intelligence. In 2001, the same author have associated with emotional intelligence competencies four dimensions of human performance based on emotional intelligence: self-awareness; self management; social awareness; social skills (Goleman, D. 2001).

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What we experience as contentment, sadness, worry, joy, anger, fear or regret arising from unique combination of how we think, the way we behave and the bio-physiological changes that occur in our bodies when we are faced with a situation of life. Emotions are dependent variables or labels with which we describe a series of changes occurring at several levels. (David, Holdevici, Szamoskozi and Baban, 2000 in Opris, D. and Macavei, M (2007).

Empathy is a particularly important issue is valued at key empirical social life of an individual. Empathy has been defined by different authors or specialized dictionaries, among which are:

"Capacity to participate in or substitution of experience in feeling, will and ideas of others" (Webster's Third International Dictionary, 1980); "Mental state by which an individual identifies with another person or group, or feel their condition" (Marcus S., 1997) Research has shown that empathy is the effects on attitudes and behavior, while lack of empathy has negative effects on attitudes and behavior. A good idea represented in specialized foreign literature is that empathic concern help cause. Highly empathetic individuals are altruistic, generous, tend to help people who surround them, have a well defined prosocial behavior are more easily adapted to social and general anxiety. (Batson, C.D. 2007).

The emotional intelligence represents the personal capacity of identification and efficient handling of their own emotions related to personal goals (career, family, education etc.). Its purpose is to achieve our goals, with minimal interpersonal and intrapersonal conflicts. The issue of empathy is very relevant, being considered as essential for the social life of an individual at the empirical level.

Key assumption is that traits that emotional intelligence is important correlate of success in life, more precisely; such features can explain the variance of success in life beyond the variance given IQ measurements.

2. Research hypothesis

It is assumed that institutionalized adolescents have a low capacity discrimination of emotions and emotional intelligence in comparison with adolescents from community.

3. Research Methods

The sample has 102 adolescents divided in two independent groups chosen by sampling method of intentionality: experimental, (49 subjects coming from orphanages "Ovidiu" Constanta); control group (53 subjects in the "National College Mircea").

3.1. Psychometric instruments

Geis - general emotional intelligence scale (Mehrabian, 2001). The concept of emotional intelligence has been built to supplement the information provided by emotional intelligence scores do not adequately explain individual differences on success in life; Emotional distress profile EDP (Macavei, Opris, 2005) scale was designed in 2005 by Opris and Macavei from Emotional Distress items Profile, short version (Profile of Mood Disorders, Short Version - Di Lorenzo, Bovbjerg, Montgomery, Vladimarsdottir and Jacobsen, 1999). Nonverbal personality questionnaire NPQ provided by SCD & D Consultancy Ltd following a competitive research grant received.

3.2. Statistical methods

Index statistics: mean; standard deviation; standard error of the mean; graphical ways of presenting data; Levene test.

Inside the foster house “Ovidiu” family type modules were organized to make the transition to the integration in the society. In most cases it is difficult for them to master a house and schedule their own budget. Also those who work (during holidays) adapt with great difficulty to performing their obligations, waiting every time to be guided, as they used to during the activity inside the center.

4. Findings

The statistical analysis confirms that the subjects of the two samples are able to perceive clearly, correctly and ordered their own emotions, but the institutionalized adolescents are lacking in exercise of responding with the appropriate emotion and behavior (realistic, undistorted, adapted) to their own life experiences. (Independent Samples Test of Geis - general emotional intelligence scale Levene's Test for Equality of Variances $F = 8.133$ Sig. = .005)

In terms of emotional intelligence, the institutionalized adolescent is less capable, compared with the one from the community, to make use of features specific to the emotional thinking and intelligence. (Independent Samples Test Equality of Means of Geis - general emotional intelligence scale, Equal variances assumed Mean difference = 47.210, Std. Error Difference = 8.369)

The acquired results on both groups analyzed by managing the profile of the emotional distress revealed the fact that the adolescents from both groups equally placed themselves in a clinical picture that we could not consider as invalid. The only difference that we can emphasize is that at the adolescents from the foster homes a different dynamic of the functional and dysfunctional negative emotions panned out.

What occurs in a disabled way at the adolescents from the foster homes is just an emotional way of thinking that blocks them to adapt. It manifests by influence of the emotions on reasoning and actions and is related to decreased emotional control and therefore to the inadequate management of the emotions. Most of them don't have the successful positive outlook of getting through life. When the protection measure is revoked, becoming major, the adolescents initially consider this event as tragic, without solution. They remain in a deadlock at the emotional level, their life experiences and feelings being limited by the relations environment that don't pan out success, life ideals. Largely the main purpose is to have their own family different from their birth family, without having clear objectives and expectations from themselves.

The two samples, although they are able to perceive clearly and properly ordered personal emotions of others, however teenagers lack the institutions to respond with emotion exercise and appropriate behavior (realistic, undistorted, adapted) to their own life experiences.

The only items where adolescents from foster homes got higher scores than the adolescents from the community are „frightened” alarmed identified as dysfunctional negative emotions from the category „fear” and „hopeless” falls in the category „sadness, depression” dysfunctional emotion as well, as seen in Figure 1.

I practiced every time I had the chance (as psychologist in foster homes) with the young people from the care institution empathy as therapeutic skill. Every time I had, first of all, to conduct, to guide them, making them be aware and able to live (again) their own experiences and only then, from the therapist's position I had to feel, without risking any confusion, their “personal world”, separating their own sensations from their personal experiences. During the role play, many times, these young people, didn't

allow themselves to get in contact with their own or the others' feelings, but there were significant moments also when this process was possible, usually after a long and constant time in the personal analysis and development. Meanwhile I had to build and maintain a very strong and secure connection which I had to establish with the adolescents from the care institution.

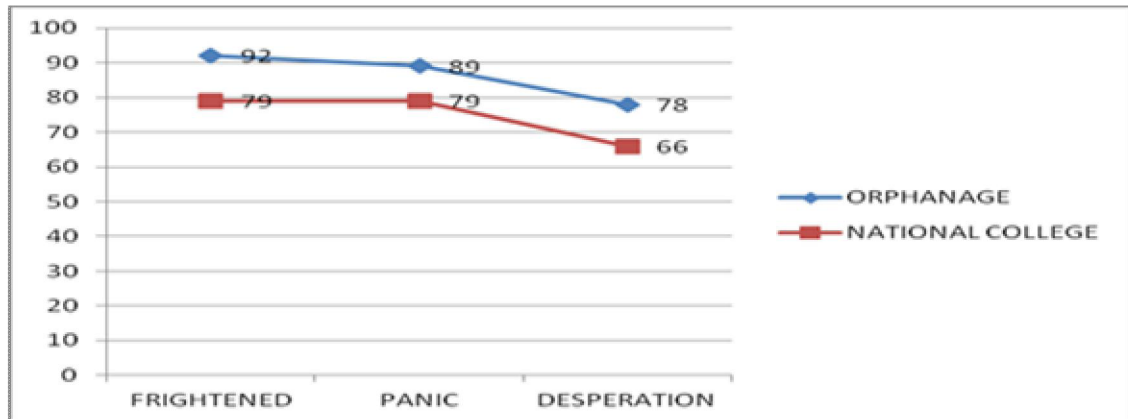


Fig. 1. Comparative graph applied to significant differences in profile of the affective distress

We had the chance, together with the team of specialists (workfellow therapist, social assistant, education instructor) to test this exercise on different groups of institutionalized young, during the process of personal building-up and development. Many times the groups were divided in two teams: the “children” team and the “parents” team. When the “children”, through therapeutic guidance, succeeded in getting in the role of “parents”, expressing their feelings that were actually personal, the perceptual position towards the conflict situation, in relation with the parents, spectacularly changed and the exercise became very useful in the therapeutic approach. The conflict is presented like a conflict that has to be solved, not like a competition that has to be won. The organizer (guide, therapist) emboldens the analytic processing and the participants are encouraged to express their fears, hopes and wishes etc., to “get in the role” so that he learns to see the conflict from the other’s perspective. The goal of this workshop is to improve the relationships between the opposite sides, by generating the changed perceptions and some ways of solving the conflict.

At emotional level, our research imposed the following therapeutic objectives:

- handling the unpleasant feelings (sad, unhappy, distressful, blue, wretched, useless, hopeless, wretched, alarmed, stressed, overstrung, panicked, nervous –evaluated with the profile of the emotional distress);
- redefinition of the unpleasant feelings;
- build-up of the positive experiences.

The intention of the intervention, at emotional level, is awareness of the importance of living, expression and acceptance of the emotions. The complex of used procedures at the emotional level includes identification of the positive aspects from an emotion considered as negative (an anxious person has a lot of imagination, fear, in an honest way, keeps us away from danger). In this context, it was imposed the achievement of a psychotherapeutic intervention model – made up of planning the sessions, the objectives of each session, as well as the techniques used during the working sessions. The therapist will evaluate every objective of the session and will decide the transition time to the next stage. Nurture

of the empirical quality represents an issue of great educational interest in the future. Not only at political and social representation level, but also in the usual relationships between individuals, the role of empathy is assumed to be particular. Empathy leads to a social behaviour and it can be increased through practice, reason for which it was included in many programs concerning the relationships between groups.

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