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The relationship between psychopathology and emotional intelligence in adolescents and adults

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Abstract

Some authors are convinced that emotional regulation is related with the maintenance, and also with the development, of psychopathological disorders. According to different studies, emotional intelligence (EI) is not a good predictor of psychological disorders in adolescents. We conducted a study with an adolescent and adult population to examine the relation between EI and psychopathological disorders. The TMMS 24 Questionnaire by Salovey and Mayer was used to measure EI, while Pichot's PNP questionnaire was employed to measure subjects' psychopathological trends. The differences between adults and adolescents were significant for both TMMS 24 and PNP.

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1. Introduction

Emotional intelligence (EI) as a construct has been widely and well studied in recent decades. One of the most important aspects which EI refers to is that related to a subject's well-being. By taking the educational context as the usual place in which adolescents co-exist, many research works have been conducted and have shown that a relationship exists between academic success and performance and EI, as does a relationship with students' mental health (Fernández-Berrocal, Extremera & Palomera, 2008). To better analyse how this concept evolves, we considered the Model of Abilities, proposed by Mayer and Salovey (1997). These authors defined emotional abilities as a set of cognitive skills that mainly act to perceive, use, understand and manage emotions. This allows subjects to

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better adapt to a given environment, which they do through these four basic abilities, such as perceiving and expressing emotions, emotional facilitation of thinking, emotional understanding, and managing emotions.

To evaluate EI, two types of instruments have been used: self-reports, questionnaires that students answer by reflecting on their perception of their own abilities, and measures of abilities. The most widely used self-report system is that proposed by Salovey, Mayer, Goldman, Turvey and Palfai (1995), the Trait Meta-Mood Scale (TMMS), whose version in Spain is called the Trait Meta-Mood Scale-24 (TMMS-24) (Fernández-Berrocal, Extremera & Ramos, 2003). This scale evaluates three factors of EI: attention to feelings, clarity of feelings and mood repair.

With time many studies about EI have been done, and most have related EI with personality factors and cognitive performance. Some studies have related EI with all kinds of subject's behavioural manifestations, from physical activities, leisure activities and performance in companies in the world of education, to the psychological disorders or mental health problems that individuals may present (Davis & Humphrey, 2012; Teruel, M.P., et al., 2009; Valls, 2007).

A relationship between EI and stress has been demonstrated by several authors (Mikolajczak, Petrides, Coumans, & Luminet, 2009; Salovey, Bedell, Detweiler, & Mayer, 1999) and its relationship with health in general has also been studied. (Martins, Ramalho, & Morin, 2010). One of the most relevant matters of EI is its value as a predictor of mental diseases, and some studies (Goldenberg, Matheson, & Mantler, 2006; Mikolajczak, et al., 2007; Petrides, Pita, & Kokkinaki, 2007; Tsaousis, & Nikolaou, 2005) have shown how EI is negatively related with depression in adults, and also with obsessive phobias (Mikolajczak, Luminet & Menil, 2006). The results obtained herein indicate that the subjects with high and low EI have a different ability to react in general to potentially situations. It is also necessary to emphasise that start with the basis that psychopathology emerges, among other causes, through what is known as “*adeficient regulation process*”, for the type of strategy employed or as a result of poorly developed emotion differentiation (Feldman et al., 2001).

2. Method

2.1. Participants

Our study sample was made up of 350 subjects, specifically adolescents (N=170) and adults (N=180). The ages for adolescents ranged from 17 to 25 years, and the 18-20 age group represented over 70% of adolescents. The mean age was 19.91 years and standard deviation was 2.425. The ages for adults varied from 36 to 50 years (N=90) and from 26 to 35 years (N=62), followed by those over the age of 50 (N=38). This range went from 40 years with a minimum and maximum age of 25 and 65 years, respectively ($X = 41.79$; $SD = 9.13$). Subjects were randomly selected in different adult centres and from the University of Zaragoza. Researchers in psychology passed the tests over a 15-day period.

3. Objective

To know the relations between emotional regulation and mental disorders in adolescents and adults.

4. Results

The attention/perception results showed how half the adults had difficulties feeling and expressing their emotions correctly (50.30%), and 45.80% did so correctly. The rest (3.90%) paid too much attention to them. As for understanding emotions, we define adults as being people who understand and recognise their different moods, and a high percentage (49.70%) suitably understand their moods. Another second large group understand their moods very well (N=52; 34%). Conversely in mood regulation, a very high percentage indicated they do not know how to regulate their moods (66%), and only 34% stated they regulate them correctly.

Regarding the ability to adequately express feelings, most adolescents agree with this EI component (64.40%). It is also worth stressing that 25% of adolescents stated they pay little attention to their feelings and correctly express them (40 subjects, 25%). As for understanding emotions, half the adolescents reported knowing their moods and

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