

DIFFERENCES AMONG THE GENERAL PUBLIC AND FINAL YEAR  
COUNSELLING AND PSYCHOTHERAPY STUDENTS IN EMOTIONAL  
INTELLIGENCE (EI): A QUANTITATIVE STUDY.

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## Declaration

I hereby certify that this thesis is entirely my own work and has not been submitted as an exercise for a degree at any other university. I agree that the library may lend or copy the thesis on request.

Signed

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Ronan R. Daly

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## **1 - Abstract**

The aim of this study was to examine the differences in emotional intelligence (EI) between two groups: the general population and Counselling and Psychotherapy students in their final year. EI in the two groups was measured using the trait emotional intelligence questionnaire (TEIQue) which provided a comprehensive coverage of the sampling domain of trait EI. Items were scored on a seven point Likert scale and completion time was approximately twenty minutes. The dependent variable was the global trait (EI) and its 15 facets and four factors that contribute to this global EI score. The independent variables used were the two groups and gender. The aim of this research was to get an indication as to whether EI could possibly be influenced by psychotherapeutic training. Results showed that the group of final year therapists scored higher than the control group in the global trait EI score. This suggested that the trait EI of the final year therapist group has possibly developed over the course of their training. This result has possible implications for the training of Counselling and Psychotherapist students, the assessment of current practitioners and the general development of EI in the wider population.

## **2 - Introduction**

In looking to determine the possible relevance of emotional Intelligence (EI) in therapeutic training, this literature review covers four different sections: the first clarifies what it is that is meant by intelligence; the second provides an overview of the current understanding of emotion; the third offers a rationale for the study, while the final one examines the current EI measurement models and the rationale for the choice of the trait EI model which was chosen for the study.

## **3 - Concepts of Intelligence**

### **3.1 - Definition**

On a globe of billions of humans there is no one who is, or who has ever been the exact replica of who you are. While sharing the same genome code, there is much complexity that leads us to that place called individuality. These differences include our ability to understand complex ideas, to adapt effectively to a changing environment, to learn from experience, to engage in various forms of reasoning and to overcome obstacles through thought. Although these individual differences can differ to a large degree, they are also never entirely consistent. For example, Sternberg and Detterman (1986) suggested that any given person's intellectual performance will vary on different occasions, in different domains, as judged by different criteria. In terms of an actual definition of intelligence, Gottfredson (1997, p13) outlined the following definition which was also endorsed by fifty two intelligence researchers:

“A very general mental capability that, among other things, involves the ability to reason, plan, solve problems, think abstractly, comprehend complex ideas, learn quickly and learn from experience. It is not merely book learning, a narrow academic skill, or test-taking smarts. Rather, it reflects a broader and deeper capability for

comprehending our surroundings – ‘catching on’, ‘making sense’ of things, or ‘figuring out’ what to do.”

### **3.2 - Measuring Intellectual Ability**

The testing of the intellectual ability of an individual was first attempted by Sir Francis Galton (1884) where he discovered that eminent British scientists could not be distinguished from ordinary individuals on the basis of their head size. The first tests that approximated contemporary intelligence tests were devised by the French psychologist Alfred Binet who theorised that intelligence should be measured by tasks that require reasoning and problem solving abilities and in collaboration with Theophile Simon published an intelligence scale in 1905 (as cited in Atkinson, Atkinson, Smith, Bem, & Hilgard, 1990). Binet published revisions of his intelligence scale and in 1916 a further refinement of the Binet-Simon scale was published by Terman (1917) who incorporated the proposal that an individual's intelligence level be measured as an Intelligence Quotient, commonly known as the IQ.

Terman's (1917) test, which he named the Stanford-Binet Intelligence Scale, formed the basis for one of the modern intelligence tests still commonly used today and which are collectively known as IQ tests, the measurement of which was seen to provide a fixed unchangeable measure of an individual's capabilities around a narrow band of linguistic and math skills (Atkinson et al., 1990). IQ tests have proved useful in their ability to predict an individual's academic performance, but have found to be limited in assessing an individual's social concerns, their willingness to work, their interpersonal skills and also their potential to become creative writers, talented teachers or outstanding physicians (Atkinson et al., 1990).

Howard Gardner (1983) proposed a different approach to the previous description of intelligence in his theory of 'multiple intelligences'. He argued that psychometric testing as described previously was far too limiting and that other forms of intelligence had been entirely ignored. He outlined eight different intelligences to account for a broader range of human potential in both children and adults (Gardner, 1983). These intelligences included two personal intelligences which concerned the ability to understand the emotions and mental states in one's own self and in other people.

## **4 - Contemporary View on Emotion**

### **4.1 - History of Research on Emotion**

By the end of the nineteenth century Charles Darwin, William James, Carl Lange and Sigmund Freud among others had written extensively on different aspects of emotion and had given emotion a privileged place in scientific discourse, yet throughout the twentieth century and until quite recently, both neuroscience and cognitive science had not given emotion the attention it perhaps deserved (Damasio, 2000).

'The descent of man and selection in relation to sex' is a book by the British naturalist Charles Darwin (1871) in which he attempted to address questions of human origins and human psychology using his theory of evolution by natural selection. In 1872, he further developed this in his book 'The expression of the emotions in man and animals', which dealt with how both humans and animals expressed emotions and how this related to both evolution and natural selection.

William James and Carl Lange formulated independently a theory in the 1880's which came to be known as the James-Lange theory of emotion. This theory held that emotion was the mind's perception of physiological conditions that resulted from some stimulus (James, 1890). In James' (1890) oft-cited example, he described how, it was not that we see a bear, become afraid and run; rather we see a bear, run and consequently fear the bear. According to this view, an individual's perception of the higher adrenaline level and increased heartbeat was therefore the emotion. The essence of this theory was premised on the fact that emotions are often accompanied by bodily responses (racing heart, tight stomach, sweaty palms, tense muscles) driven by the central nervous system, in particular the sympathetic branch, and that one could sense what is going on inside our body much the same as we could sense what is going on in the outside world.

Freud (1935), on the other hand, theorised that, for the majority of what we experience in our lives, the underlying emotions, beliefs, feelings, and impulses are not available to us at a conscious level. He believed that most of what drives the individual is buried in the unconscious and while hidden continues to impact dramatically upon the individual. In terms of treatment, he therefore believed that putting emotions into language advances the coping of the sufferer (Freud, 1935).

In 1969, Paul Ekman, a psychologist who had been carrying on from some of Darwin's observations, became a pioneer in the study of emotions and their relation to facial expressions. Ekman and Friesen (1969) devised a list of basic emotions from cross-cultural research on the Fore tribesmen of Papua New Guinea. He observed that members of an isolated culture could reliably identify the expressions of emotion in photographs of people from cultures with which they were not familiar with. On this evidence, he concluded that the

expressions associated with some emotions are basic or biologically universal to all humans. Ekman (1972) drew up a list of six basic emotions which included anger, disgust, fear, happiness, sadness and surprise. Continuing this research, Ekman (1999) expanded this list of basic emotions, to include a range of positive and negative emotions not all of which were encoded in facial muscles. The additional emotions were described as amusement, contempt, contentment, embarrassment, excitement, guilt, pride in achievement, relief, satisfaction, sensory pleasure and shame. Although the precise composition and dynamics of the emotional responses are shaped in each individual by a unique development and environment, Damasio (2000) observed that the evidence provided by the above mentioned research suggested that most, if not all, emotional responses are the result of a long history of evolutionary fine-tuning and that emotions are in fact part of the bio-regulatory devices with which we come equipped to survive.

#### **4.2 - Emotion and the Brain**

Darwin, James, Lange and Freud were, of necessity, somewhat vague about the brain aspect of their ideas but one of their contemporaries Hughlings Jackson (1913) was more precise. He took the first step toward a possible neuroanatomy of emotion and suggested that the right cerebral hemisphere of humans was probably dominant for emotion, much as the left was dominant for language. In terms of understanding the role of the brain in emotion, it is useful to start by examining the structures of the brain from the perspective of human evolution. The brain over millions of years has evolved into what is now described as a hierarchically organised nervous system in which Hughlings-Jackson (1913) proposed the forebrain, the brainstem and the spinal cord as the three different levels.

Looking back and examining the brain structure of our reptile forebears, Jastrow (1981) described how this consisted only of the brainstem and spinal chord. Jastrow (1981) described how the inputs from different senses were compared and put together for a program of action sending resulting reflexive messages throughout the nervous system telling the body what to do. The basic instincts of survival such as sexual drive, the search for food and the aggression responses of 'fight or flight'<sup>1</sup> were wired into this region of the reptile's brain (Jastrow, 1981).

When mammals evolved out of the reptiles, Jastrow (1981) explained how the reptilian brain began to change where new layers developed surrounding the brainstem. This new part of the evolved brain was described by Jastrow (1981) as the emotional brain which is today referred to as the limbic system<sup>2</sup> of which two of its more important structures are called the hippocampus<sup>3</sup> and the amygdala<sup>4</sup>. The new instincts of the mammals, for example that of parental care, did not replace the older reptilian instincts but rather augmented them and the instinctive programs of the reptile brain including the search for food, the pursuit of a mate, and flight from a predator were still essential for species survival (Jastrow, 1981).

The growth of the cerebral cortex<sup>5</sup> accelerated further in man's immediate ancestors in the last million years of human history, culminating in the appearance of Homo Sapiens (Jastrow, 1981). The primitive region in the brain that held the circuits for the instinctive behaviour of

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<sup>1</sup> The "fight or flight response" is our body's primitive, automatic, inborn response that prepares the body to "fight" or "flee" from perceived attack, harm or threat to our survival (Atkinson et al., 1990).

<sup>2</sup> The limbic system is concerned with actions that satisfy basic needs and with emotion (Atkinson et al., 1990).

<sup>3</sup> The Hippocampus is essential for the formation of long-term memories (Brodal, 1998).

<sup>4</sup> The amygdala appears to be a centre of emotions (e.g., fear). It sends signals to the hypothalamus and medulla which can activate the flight or fight response of the autonomic nervous system. The amygdala receives a rich supply of signals from the olfactory system, and this may account for the powerful effect that odour has on emotions (Atkinson et al., 1990).

<sup>5</sup> The cerebral cortex is a structure within the brain that plays a key role in memory, attention, perceptual awareness, thought, language, and consciousness (Atkinson et al., 1990).

the reptile and the old mammal, Jastrow (1981) now described as completely enveloped by and buried within the human cerebral cortex. This 'ancient command post' although enveloped is however still very much functioning and Jastrow (1981) explained how it vies with the cerebral cortex for control of the body, pitting the inherited programs of the old brain against the flexible responses of the new one. With this understanding it is now possible to begin to understand the impact of the emotional brain on human actions, responses and behaviour. Goleman (1995) observed how an individual may in fact be removed from awareness of their emotional state as it can often be a part of our programmed response that is instinctive by nature and less amenable to cognitive rationalisation.

### **4.3 - The Emotional Response**

Goleman (1995) examined the relationship between emotion and the brain and described the regions of the brain within the limbic system that were observed to be primarily responsible for emotional response as the thalamus, the visual cortex, and the amygdala. According to Brodal (1998) the amygdala in particular plays one of the more important roles in how a person reacts to any given situation. Brodal (1998) described how this section of the brain was highly researched because it is observed to control the 'fight or flight' responses for an individual. Goleman (1995) described how this response was an emotional reaction which is triggered by the amygdala, instructing a person to either make a stand or run from a particular situation. The amygdala's influence is so powerful that it can cause a person to make a decision before he or she fully understands what is happening. An example described by Goleman (1995) is what he described as an 'emotional hijack' which occurred when an individual responds out of proportion with the actual threat because a much more significant emotional threat has been triggered. For example, the amygdala could react similarly to the threat of being eaten by a tiger (physical threat) and the threat of an ego attack (emotional threat) by bringing on the fight or flight reaction. LeDoux's (1986) observations showed that

anatomically the 'emotional' amygdala could act independently of the neocortex or cognitive part of the brain and some emotional reactions and memories could be formed without any cognitive conscious participation whatsoever.

Confirming the importance of the amygdala, Brodal (as cited in Atkinson et al., 1990) described the impact on a young man whose amygdala had been surgically removed in an attempt to control his seizures. Afterwards he was observed becoming completely uninterested in people, preferring to sit in isolation without any human contact. While he was perfectly capable of conversation, he no longer recognised close friends, relatives, or his mother and remained impassive in the face of their anguish at his indifference. Without an amygdala he was observed to have lost all recognition of feeling, as well as any feeling about feelings.

#### **4.4 - The Physiological Affect of Emotion**

Kagen (1997) stated how the physiological beginnings of an emotion typically occurs before a person is consciously aware of the feeling itself. For example, when individuals who fear snakes are shown pictures of them, sensors on their skin will detect sweat breaking out, a sign of anxiety, even though they say they do not feel any fear (Kagen, 1997). The sweat shows up in such people even when the picture of a snake is presented so rapidly that they have no conscious idea of what exactly they just saw. As such pre-conscious emotional stirrings continue to build they eventually become strong enough to break into a cognitive awareness (Kagen, 1997). Goleman (1995) highlighted the fact that there are two clearly observable levels of emotion, both conscious and unconscious. The moment of an emotion coming into awareness marks it registering as such in the frontal cortex (Goleman, 1995).

Examining in further detail the neurocognitive aspect of how emotion is expressed Goleman (1995) described how circuits from the limbic brain to the prefrontal lobes meant that signals

of strong emotions such as anxiety and anger can create neural static, which could in effect, sabotage the ability of the prefrontal cortex to maintain normal functioning. Goleman (1995) stated this as the reason when one gets very emotionally upset that one can't think straight. Looking at continual exposure to these types of emotions, Gerhardt (2004) described the impact that this can have on an individual. She explained how an infant, who would have little or no capacity to regulate their own emotional state, could be induced into a state of chronic stress and fear (Gerhardt, 2004). Gerhardt (2004) described that when the amygdala was constantly engaged in chronic stress, it was observed to have a multitude of detrimental effects on the developing infant. LeDoux (2003) described how the amygdala was the target of many hormones, a key one of these being cortisol<sup>6</sup> which is released from the adrenal cortex<sup>7</sup> during fear-arousing and otherwise stressful events. Gerhardt (2004) described how the manifestation of depression and fearfulness in infants was correlated to an over production of cortisol in the infants brain. Exposure to these high levels of cortisol in early development has been linked via research to defects in the brain including an underactive left brain and hippocampal<sup>8</sup> damage (Gerhardt, 2004).

#### **4.5 - Left Brain, Right Brain and Emotion**

Looking at the brain as a whole, new research by Davidson, Fedio, Smith, Aureille and Martin (1992) suggested that the brain's hemispheres generate our emotional outlook and that that injuries or damage to the brain as described above can in fact change judgment of emotion and distort normal mood. Davidson et al.'s (1992) findings gave insight into how the

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<sup>6</sup> Known as the stress hormone which is secreted in higher levels during the body's response to stress (LeDoux, 2003).

<sup>7</sup> Situated along the perimeter of the adrenal gland, the adrenal cortex mediates the stress response through the production of mineralocorticoids and glucocorticoids, including aldosterone and cortisol respectively (Atkinson et al., 1990).

<sup>8</sup> The hippocampus is a major component of the brains of humans and other mammals. It belongs to the limbic system and plays important roles in long-term memory and spatial navigation (Atkinson et al., 1990).

brain's two hemispheres work together in a delicate balance to steady both emotion and mood. They also showed how one-sided brain damage could disrupt this balance.

The cerebral hemispheres are responsible for most complex mental activities. The hemispheres tend to specialize, with specific cognitive functions controlled by one side. For example, the left hemisphere is responsible for language in most people, while the right hemisphere usually controls spatial skills, such as reading a map. Davidson et al. (1992) described how the brain's two hemispheres worked in tandem to judge emotions around us so one could make the right response.

In the study, the researchers played tapes of positive and negative emotional sounds, such as a baby cooing or a woman screaming, to 10 patients with lesions of the left hemisphere, 10 patients with right-hemisphere epilepsy, and 10 normal controls. They measured patients' brain activity using electroencephalography (a technique that uses scalp electrodes to measure the brain's electrical activity) and asked patients to describe what they heard.

Although all of the patients identified most sounds accurately, those with left-hemisphere lesions repeatedly described positive sounds in a negative context. The left-brain patient would describe how they heard a baby cooing and deduced that perhaps it was in danger, maybe calling out for its mother. On the other hand, patients with right-brain epilepsy seemed under stimulated and unconcerned. They might hear the woman screaming but optimistically assume she was not in trouble. Davidson et al. (1992) described how it was almost like both groups had emotional dyslexia.

#### **4.6 – Emotions, an Intelligence that's Worth Measuring**

In summary, it has been shown that the brain plays a central role in the processing of emotions and that these responses can be disrupted temporarily or permanently. Returning to the idea of intelligence, academic intelligence as is known today measured through IQ is no guarantee of prosperity, prestige or happiness in life, yet our schools and culture is observed to fixate on the sole development of such academic abilities (Goleman, 1995). The emotional development of individuals which has a huge impact on our personal destiny is observed to be largely ignored (Goleman, 1995). Goleman (1995) described how the emotional part of life is a domain that similar to math or reading could be handled with greater or lesser skill and required a unique set of competencies. Individuals observed to have well developed emotional skills were more likely to be content and effective in their lives, having according to Goleman (1995) mastered the habits of mind that then contributed further to their own productivity. Individuals who could not manage some control over their emotional life were observed to be fighting inner battles that sabotaged their ability for focused work and clear thought (Goleman, 1995). Gardner's (1983) proposed theory of 'multiple intelligences' pushed way beyond the standard concept of IQ as a single, immutable factor and opened the door for conceptualizing emotion as an intelligence that could be seen as key in the ongoing development of individuals.

## **5 - Rationale for the Study**

### **5.1 - Significance of Emotions and their Relevance to Psychotherapy**

Feelings or emotion are a vital, universal and major part of human experience, exerting powerful influences on behaviour in which William James neatly summed it up when he wrote about reason and how it was, “but a fleck on the sea of emotion” (as cited in Hammond, Hepworth & Smith, 1977, p.80). Research has shown that the manner in which an individual is exposed to or has dealt with emotions determined to a great extent both the nature of their interpersonal relations and their physical and mental health (Siegel, 1999; LeDoux, 2000, 2003; Schore, 2001; Gerhardt, 2004). In terms of the client who seeks assistance in the therapeutic setting, strong emotions or states of feeling will typically play a central role in the manifestation of their problems (Mearns & Thorne, 2007). Taking the example of an individual who is emotionally volatile and gets into difficulties because they have a short fuse and discharge their anger through violent outbursts of temper, such individuals can be observed to be excessively ruled by their emotions, and can often be referred to as emotionally immature (Hammond, Hepworth & Smith, 1977). Counsellors and Psychotherapists can provide a valuable service through assisting the individual to become aware of and to manage the emotions involved. As awareness of emotions develops the client can be helped to cope with their emotions in a healthier fashion and to integrate their emotion into the totality of human experiencing (Rogers, 1959).

Hammond, Hepworth and Smith (1977) described in order for the therapist to be able to deal with complex emotional states that they need to be highly perceptive to these feelings that the client manifests. They described how effective therapists must be trained so to be able to elicit, respond to and understand the role of emotions in the many and varied problems that

clients may present. Moreover, skills in perceiving the feelings of others are a prerequisite to the mastery of empathic communication, which involves sensing or tuning into the feelings of another and conveying to that other that their feelings have accurately been perceived (O'Farrell, U., 1999; Mearns & Thorne, 2007; Hammond, Hepworth & Smith, 1977).

It is with these points in mind that most accredited Counselling and Psychotherapy courses, as part of their training, focus on the self awareness and emotional development of the trainee therapist. Whether they know it at the time or not, if the student is to succeed as a therapist, they must begin their own lifelong process upon commencing their training. Rogers (1961) highlighted this by describing the 'good life' as a continual process, and not a state of being. Striving towards what Rogers (1961) described as the fully functioning person, he described it as involving the courage to be, which meant launching oneself fully into life in the here and now. Crucially, this applied to trainee therapists as much as it did to any individual looking for growth and self development (Rogers 1961).

## **5.2 - The Therapeutic Relationship and Emotional Intelligence**

The significance of researching the therapeutic relationship and its processes, and examining how it can enhance the therapist's training skills and attributes, is further clarified by Stein and Lambert (1995). The central focus is observed to be around the self awareness development of the therapist which helps them to understand and empathize with a client's viewpoint and thus interact with the client in an emotionally compatible manner (Stein & Lambert, 1995).

Looking further into research for both student and therapist development Hill, Sullivan, Knox and Schlosser (2007) identified the struggles with self awareness for novice trainees in a

psychotherapist first year class. Rønnestad and Ladany (2006), examined the impact of psychotherapy training on students and stated that further development of training outcomes should include therapist self evaluation and self awareness which they described as being meaningful and relevant to therapists. Fauth, Gates, Vinca, Boles and Hayes (2007) described how successful management of negative emotional reactions and counter transference feelings would improve the psychotherapist skill set, including that around the communication of in-session empathy with clients.

Looking specifically at Emotional Intelligence (EI), Goleman (1995) defined it as the awareness of and ability to manage one's emotions in a healthy and productive manner. Mayer and Salovey (1993) further described it as involving a set of mental abilities in which individuals employ higher-level processes regarding their attention to feelings, clarity of feelings, discriminability of feelings, and mood-regulating strategies. Researchers in turn have also found EI to be positively correlated with variables such as empathy, verbal intelligence, extraversion, openness to feelings, self-esteem, and life satisfaction (Schutte et al., 1998; Mayer, Caruso, & Salovey, 1999; Ciarrochi, Chan, & Caputi, 2000).

Relating EI directly to the psychotherapeutic approach, Alpern-Simha (2007) indicated that there was an existing overlap. Also, in terms of the relationship, a key concept in counselling, EI has been consistently associated with higher quality social relationships (Rivers, Brackett, Salovey, & Mayer, 2007). Murphy and Janeke (2009) described studies that indicated participants with a higher EI trend towards more creative and complex thinking styles.

The research to date suggests that the assessment or monitoring of EI during the development of the trainee psychotherapist could be of benefit, especially when self awareness, self management, self control and relationship handling are core skills that need to be developed.

Nelis, Quoidbach, Mikolajczak and Hansenne (2009) reported findings that stated how EI could be specifically improved upon from an individual's development perspective. They suggested that the assessment of EI could be an important factor in that development of a therapists skill set and therefore may be of interest to try and quantify (Nelis et al., 2009). In the next section, how EI is currently quantified and measured will be examined in detail.

## **6 - Research in Emotional Intelligence**

The roots of EI as a concept were initially observed in Thorndike's (1920) construct of 'social intelligence' which focused on the ability of understanding and managing people. Whereas Gardner (1983) first proposed his theory of 'multiple intelligences', it was Payne (1986) who was attributed to coining the actual term 'Emotional Intelligence'. Greenspan (1989) also put forward an EI model, followed by Salovey and Mayer (1990) who proposed formal definitions and models of the construct. They described how having competence in EI meant developing self awareness, self management, self control and relationship handling (Salovey & Mayer, 1990).

The field was essentially launched by Goleman's (1995) bestselling book 'Emotional Intelligence' that influenced most subsequent models of EI. Goleman (1995) highlighted the key role emotion played in all human interaction. He described 'Emotional Intelligence' as a type of social intelligence that involved the ability to monitor one's own and others' emotions and to make use of the information to guide actions.

## **6.1 - Current Models in Emotional Intelligence**

Davey (2005) observed that after nearly two decades of research, there appeared to be little consensus over how EI should be defined and conceptualized, he described the three main models of EI that currently existed as:

- Ability EI models
- Mixed models of EI
- Trait EI model

These models are now reviewed with the aim of making a selection of the most appropriate one for the actual study in question.

### **6.1.1 - The Ability-Based Model**

Mayer and Salovey's (1997) conception of EI defined it within the confines of a standard criterion for a new intelligence. Mayer, Salovey and Caruso (2004) presented arguments for the measurement of EI as an ability, summarizing data suggesting that such measures were indeed reliable. The ability based model viewed emotions as useful sources of information that helped one to make sense of and navigate the social environment (Salovey & Grewal, 2005). The model proposed that individuals vary in their ability to process information of an emotional nature and in their ability to relate emotional processing to a wider cognition (Mayer, Salovey, Caruso & Sitarenios, 2001).

The ability-based model of EI included four different branches which are now outlined (Mayer et al., 2001):

1. Perceiving emotions - the ability to identify emotions in faces and pictures which makes all other processing of emotional information possible.

2. Facilitating thought with emotion - the ability to harness emotional information and directionality to enhance thinking.
3. Understanding emotions - the ability to comprehend emotional information about relationships, transitions from one emotion to another, linguistic information about emotions.
4. Managing emotion - the ability to manage emotions and emotional relationships for personal and interpersonal growth.

#### **6.1.1.1 - Measurement and Limitations of the Ability-Based Model**

The Mayer-Salovey-Caruso (1999) Emotional Intelligence Test (MSCEIT) is a test of ability rather than a self-report measure. The current measure of Mayer and Salovey's model of EI is consistent with the model's claim of EI as a type of intelligence (Salovey & Grewal, 2005). The test is modelled on ability-based IQ tests which examine a person's abilities on each of the four branches of emotional intelligence described above (Salovey & Grewal, 2005).

Salovey and Grewal (2005) described how central to the four-branch model is the idea that EI requires attunement to social norms. The MSCEIT is therefore scored in a consensus fashion, with higher scores indicating higher overlap between an individual's answers and those provided by a worldwide sample of respondents. The MSCEIT can also be expert-scored, so that the amount of overlap is calculated between an individual's answers and those provided by a group of 21 emotion researchers deemed as experts (Salovey & Grewal, 2005).

Looking at the limitations of this model, although promoted as an ability test, the MSCEIT is most unlike standard IQ tests in that its items do not have objectively correct responses. Among other problems, the consensus scoring criterion means that it is impossible to create questions that only a minority of respondents could solve, because, by definition, responses

are deemed emotionally 'intelligent' only if the majority of the sample has endorsed them. Bradberry and Lac (2003) in their study carried out on managers in the workplace, criticized the ability-based model for lacking predictive validity. This and other similar problems have led cognitive ability experts to question the definition of EI as a genuine intelligence (Føllesdal, H. & Hagtvet, K., 2008; Petrides, Furnham & Frederickson, 2004).

### **6.1.2 - Mixed Models of Emotional Intelligence**

Models that mixed together emotional intelligence qualities with other personality traits unrelated to either emotion or intelligence are referred to as mixed models of emotional intelligence (Mayer, Salovey & Caruso, 2000). There are a number of relevant mixed models of EI including the Situational Test of Emotional Understanding (STEU) (MacCann & Roberts, 2008) and the Emotional Intelligence Scale (EIS) (Schutte et al., 1998). The main mixed models examined here however will be those that are most commonly used and have been put forward by both Goleman (2000) and Bar-On (1997).

#### **6.1.2.1 - Golemans Mixed Model**

The model introduced by Goleman (2000) focused on EI as a wide array of competencies and skills that drove leadership performance. Goleman's (2000) model outlined four main EI constructs:

1. Self-awareness - the ability to read one's emotions and recognize their impact while using gut feelings to guide decisions.
2. Self-management - involves controlling one's emotions and impulses and adapting to changing circumstances.
3. Social awareness - the ability to sense, understand, and react to others' emotions while comprehending social networks.

4. Relationship management - the ability to inspire, influence, and develop others while managing conflict.

Goleman included a set of emotional competencies<sup>9</sup> within each construct of EI described above. These emotional competencies were described as learned capabilities that could be worked on and developed in order to achieve outstanding performance (Bradberry & Greaves, 2009).

#### **6.1.2.1.1 - Measurement and Limitations of Golemans EI Construct**

Two measurement tools are based on the Goleman model, firstly the Emotional and Social Competency Inventory (ESCI) (Boyatzis, 2007) and secondly the Emotional Intelligence Appraisal (EIA) (Bradberry & Greaves, 2009) which comes as either a self-report or a 360-degree assessment. Looking at some of the limitations of Golemans model, Matthews, Roberts and Zeidner, (2004) highlighted how much of the empirical research in this area is less conclusive in its conclusions and they described it as surprising that exaggerated and very possibly false statements could command such widespread public acceptance. Goleman's model of EI has also been criticized in the research literature as more 'pop psychology' than based on sound empirical research (Mayer, Roberts, & Barsade, 2008).

#### **6.1.2.2 - The Bar-On Model of Emotional-Social Intelligence (ESI)**

Bar-On (1997) defined emotional intelligence as being concerned with effectively understanding oneself and others, relating well to people, and adapting to and coping with the immediate surroundings to be more successful in dealing with environmental demands. Bar-On (2006) theorised that EI developed over time and that it could be improved through

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<sup>9</sup> Emotional competence referred to one's ability to express ones emotions and are described as the essential social skills to recognize, interpret, and respond constructively to emotions in yourself and others (Goleman, 2000).

training, programming, and therapy. Bar-On considered emotional intelligence and cognitive intelligence to contribute equally to a person's general intelligence, which then offered an indication of one's potential to succeed in life (Bar-On, 2006).

#### **6.1.2.2.1 - Measurement and Limitations of the ESI Model**

The Bar-On Emotion Quotient Inventory (EQ-i), is a self-report measure of EI developed as a measure of emotionally and socially competent behaviour that provided an estimate of one's emotional and social intelligence. It was designed to assess those personal qualities that enabled some people to possess better 'emotional well-being' than others (Bar-On, 1997). The EQ-i is not meant to measure personality traits or cognitive capacity, but rather the mental ability to be successful in dealing with environmental demands and pressures (Bar-On, 2006).

The EQ-i has been used to assess thousands of individuals and much is known about its reliability and its convergent and discriminant validity (Gowing, 2001; Salovey, Bedell, Detweiler & Mayer, 1999). Some limitations include how the theoretical background is observed as being somewhat vague, having been converted from a well-being inventory to an EI questionnaire (Pérez, Petrides & Furnham, 2005). The EQ-i contains 133 items, 15 subscales and 5 higher order factors<sup>10</sup> of which empirically, there is no evidence for (Petrides & Furnham, 2001). Another limitation of this model is that it claims to measure some kind of ability through self-report items which has been found to be highly susceptible to faking (Day & Carroll, 2007; Grubb & McDaniel, 2007). Klumper (2008) described how in scientific settings, this model is being replaced by the trait EI model which will be reviewed next.

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<sup>10</sup> Interpersonal, intrapersonal, adaptation, stress management and general mood (Bar-On, 1997).

### 6.1.3 - The Trait EI Model

Because emotional experiences are inherently subjective the development of EI items along cognitive ability lines that cover the objectivity of the construct in its entirety have been questioned by some researchers (Brody, 2004; Matthews, Zeidner, & Roberts, 2004). They have highlighted that after a decade of research and development how both ability and mixed model EI tests still continued to struggle with questions about internal consistency and factor structure and suggested that this did not augur well for their future (Roberts et al., 2001; Pérez, Petrides & Furnham, 2005). According to Pérez, Petrides and Furnham (2005), the developing conceptualization of EI as a personality trait was one that best fulfilled the prerequisite of consistency.

Trait EI, is defined as a constellation of emotion-related self-perceptions and dispositions located at the lower levels of hierarchical personality taxonomies (Petrides & Furnham, 2001). De Raad (2005) located trait EI within the Big Five<sup>11</sup> (extraversion, neuroticism, agreeableness, conscientiousness and openness to experience) circumplex and concluded that it comprised scattered areas of the big five domain and correlated with at least four of the five personality dimensions. Consequently, trait EI is not seen as distinct from personality constructs but observed as part of them and is referred to as an individual's self-perceptions of their emotional abilities which encompassed behavioural dispositions and self perceived abilities which are measured by self report (Petrides & Furnham, 2001).

The conceptualization of EI as a personality trait leads to a construct that lies outside the taxonomy of human cognitive ability. This is an important distinction in as much as it bears

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<sup>11</sup> The Big Five model is considered to be one of the most comprehensive, empirical, data-driven research findings in the history of personality psychology (Costa & McCrae, 1992).

directly on the operationalisation of the construct and the theories and hypotheses that are formulated about it (Petrides & Furnham, 2000a).

#### **6.1.3.1 - Measurement and Limitations of the Trait EI Model**

The Trait Emotional Intelligence Questionnaire (TEIQue) is an open-access measure that was specifically designed to provide an operationalization model that conceptualized EI in terms of personality (Petrides & Furnham, 2003). The TEIQue test encompasses 15 subscales organized under four factors: *Wellbeing*, *Self-Control*, *Emotionality*, and *Sociability*. A full description of each of the scales and factors can be viewed in Appendix I.

Conceptualizing EI as a personality trait implied that the constellation of emotional related self perceptions and dispositions it compromised is generally stable over time and across situations with test retest data indicating scale reliability (Ferasat, Azghandi, Azadeh, & Taghavi, 2007). Quantitative and qualitative changes in trait EI should be viewed as partial functions of socioemotional development (Abe & Izard, 1999) and of the broader development of the self (Berk, 2001; Lewis, 2000; Saarni, 1999), both of which emerge from the interaction of maturational processes (Izard, 1991), cognitive development (Kagan, 1978), and social experiences (Dickson, Fogel & Messinger, 1998).

The main limitation of the trait EI model is that of relying exclusively on self-report data and these limitations are well documented in the field of personality (Pervin, 1999) and have also been discussed with specific reference to trait emotional self-efficacy (Petrides, Furnham & Mavroveli, 2007). Another criticism frequently levelled against trait EI is how it's indistinguishable from the major personality dimensions. Recent research however has demonstrated the discriminant and incremental validity of trait EI against the Giant Three (psychoticism, extraversion and neuroticism) and Big Five personality dimensions (Petrides

& Furnham, 2003; Saklofske, Austin & Minski, 2003). It also remains to be seen, whether, in terms of its long-term stability, trait EI is more similar to personality traits or to affective traits, which are comparatively more variable (Vaidya, Gray, Haig & Watson, 2002).

## **6.2 - Trait EI Versus Ability and Mixed Models of EI**

Petrides and Furnham (2000) differentiate between trait EI, as models that draw heavily on personality variables thus, suggesting EI should be examined within the framework of personality (trait EI), and not that of intelligence. This work has been very important in organising the literature on EI into two distinct constructs. Petrides and Furnham's (2001) conceptualisation of EI, outline a fundamental distinction between two separate constructs rather than two different ways of measuring the same construct and suggest that each construct is grounded on the method of operationalisation. In other words if a researcher is interested in measuring actual cognitive abilities then is not appropriate to use self-report questionnaires, and if a researcher is interested in assessing self-perceptions is not appropriate to use maximum performance tests.

According to Petrides and Furnham (2001) the importance of such a distinction is absolutely essential because the measurement, validation and development of a construct depends on the domain within which it has been conceptualised. Thus, self-report inventories of EI are measures of trait EI regardless of whether they are predicated on a strictly cognitive model like Mayer and Salovey's (1997). Brackett and Mayer (2003) found this to be the case. When they compared two self-report measures, the EQ-I (Bar-On, 1997) and the SREIT (Schutte et al., 1998), they found them to be weakly related to the MSCEIT (Mayer, Salovey & Caruso, 1999), which is an ability measure of emotional intelligence.

### **6.3 - Criticisms of the Current Field of Research in EI**

One of the arguments against the theoretical soundness of the concept suggests that the constant changing and broadening of its definition has rendered it an unintelligible concept (Locke, 2005). Landy (2005) outlined that without some stabilization of the concepts and the measurement instruments, meta-analyses were difficult to implement, and the theory coherence is likely to be adversely impacted by this instability. On the other hand, while current research on EI is open to various criticisms, the available research still possess a sufficient groundswell of scientific support to constitute a legitimate branch of psychological science (Zeidner, Roberts & Matthews, 2008).

### **6.4 - Choice of Model for Study**

In summary, it has been shown that both ability and trait measures differ in terms of both their definition of constructs and the methods of assessment. Ability measures conceive of EI as a capacity that spans the border between reason and feeling in which items on such a measure included showing a person a picture of a face and asking what emotion the pictured person is feeling. Such items were then scored by comparing the test taker's response to a keyed emotion. Trait measures on the other hand have been shown to include a very large array of non-cognitive abilities related to success, such as self-control. Items on such measures asked individuals to rate themselves on such statements as: 'I generally know what other people are feeling' and then are scored by giving higher scores to greater self-assessments.

Different tests that are supposed to measure EI do not measure the same thing and the ability measure is not correlated with personality, unlike the trait measure which is observed to be

correlated with personality. While trait EI is one of the newer models, research has gathered significant momentum in the last few years and the Trait Emotional Intelligence Questionnaire (TEIQue) instrument has also shown excellent psychometric properties in a series of studies (Petrides, 2009; Freudenthaler, Neubauer, Gabler & Scherl, 2008; Mikolajczak, Luminet, Leroy & Roy, 2007). While further research is required particularly in the areas of longitudinal, cross-cultural and developmental analysis, because of that established construct, this model was chosen and measuring EI within the framework of personality and not that of intelligence was deemed to be the more relevant and appropriate measurement.

## **7 - Hypotheses**

Given the lack of similar studies, there was an initial exploratory aspect to this research. Based on the review of the literature and that of the trait emotional intelligence, three specific hypotheses were advanced:

H1 - The group of final year student Counsellors and Psychotherapists would score higher in the overall global trait EI measurement than the general population or control group.

H2 - The differences between the two groups would be primarily focused in the *Emotionality* factor score.

H3 – The differences in the sub factor scores between the two groups would be centred on the following; *emotion regulation, emotion perception, empathy, emotion expression* and *emotion management*.

## **8 - Method**

### **8.1 - Design**

The research design for the study was quantitative and the following variables were defined. The dependent variable was the global trait (EI) and its 15 facets and four factors that contribute to this global EI score. The independent variables were identified as the two participant groups and gender. The research was a between-subjects design as two different groups were used for the measurement of all the variables. Due to the absence of random assignment in the identification of the groups, the design was also quasi experimental with confounding variables likely to exist within trait EI such as sensitivity to mood and current life experiences.

### **8.2 - Participants**

The sample consisted of two groups. The first group (G1) was identified as the control group and consisted of members of the general population who have never engaged in any type of Counselling or Psychotherapy related training. The G1 sample consisted of 42 individuals (20 male, 22 female) from 21 to 71 years of age ( $M = 37.86$  years,  $SD = 13.32$ ). The second group (G2) consisted of final year trainee Counselling and Psychotherapy students from two different colleges located in two different Irish provinces. This sample consisted of 44 individuals (10 male, 34 female) from 27 to 61 years of age ( $M = 40.81$  years,  $SD = 9.15$ ).

### **8.3 - Materials**

The dataset was extracted using the Trait Emotional Intelligence Questionnaire (TEIQue) (Petrides, 2009). The TEIQue is a 153 item questionnaire providing a comprehensive coverage of the sampling domain of trait EI. Items were scored on a 7 point Likert scale and completion time was approximately 20 minutes. The 20 TEIQue variables (15 facets, four factors, and global trait EI) are presented in Table I, along with brief explanations (see Appendix I for further details). All TEIQue instruments are available, free of charge for academic research purposes.

### **8.4 - Procedure**

Participants from G1 were identified using a snowball sampling technique and asked if they would like to volunteer for the study. An attempt was made to target a cross section of individuals, with participants gathered from a wide variety of different occupations. Participants from G2 were selected via convenience sampling from final year students in two different colleges from separate provinces within Ireland, both which run accredited qualifying courses in Counselling and Psychotherapy. An email invitation (see Appendix II for a copy of the text) to participate in the study was sent out to the final year classes in the two colleges and recipients were allowed volunteer on an individual basis. The questionnaire was distributed through email to the volunteers and if completed would have been returned either personally, via post or scanned and returned by email.

Table I

Trait EI Factors.

<b>Trait EI Factors</b>	<b>High Scorers Perceive Themselves as...</b>
<b>Wellbeing</b>	
Self-esteem	...successful and self-confident.
Trait happiness	...cheerful and satisfied with their lives.
Trait optimism	...confident and likely to “look on the bright side” of life.
<b>Self-control</b>	
Emotion regulation	...capable of controlling their emotions.
Stress management	...capable of withstanding pressure and regulating stress.
Impulsiveness (low)	...reflective and less likely to give into their urges.
<b>Emotionality</b>	
Emotion perception	...clear about their own and other people’s feelings.
Emotion expression	...cheerful and satisfied with their lives.
Trait empathy	...capable of taking someone else’s perspective.
Relationships	...capable of having fulfilling personal relationships
<b>Sociability</b>	
Social awareness	...accomplished networkers with excellent social skills.
Emotion management	...capable of influencing other people’s feelings.
Assertiveness	...forthright, frank, and willing to stand up for their rights.
<b>Adaptability*</b>	...flexible and willing to adapt to new conditions.
<b>Self-motivation*</b>	...driven and unlikely to give up in the face of adversity.

*Source:* Petrides, Pita & Kokkinaki, 2007, p274.

\*These facets feed directly into the global trait EI score without going through any factor.

## 8.5 - Analysis

The data was analysed using SPSS version 15 for windows in which independent-samples t-test, a univariate factorial ANOVA and internal consistency calculations were carried out on the dataset.

## 9 - Results

A breakdown of the Independent-samples t-test of the trait EI factors are outlined in Table II.

Table II

Independent-samples t-test and Mean scores of the trait EI factors.

<b>Trait EI Factors (DV)</b>	<b>df</b>	<b>t</b>	<b>p</b>	<b>M (G1)</b>	<b>SD (G1)</b>	<b>M (G2)</b>	<b>SD (G2)</b>
<b>Global Trait EI</b>	<b>84</b>	<b>2.156*</b>	<b>.034</b>	<b>4.880</b>	<b>.5305</b>	<b>5.113</b>	<b>.4693</b>
<b>Wellbeing</b>	<b>84</b>	<b>2.649*</b>	<b>.010</b>	<b>5.299</b>	<b>.7968</b>	<b>5.698</b>	<b>.5879</b>
Self-esteem	84	1.181	.241	5.054	.9217	5.260	.6861
Trait happiness	84	1.983	.051	5.640	1.1113	6.034	.6943
Trait optimism	84	3.536**	.001	5.208	.7646	5.798	.7966
<b>Self-control</b>	<b>84</b>	<b>1.421</b>	<b>.159</b>	<b>4.459</b>	<b>.7386</b>	<b>4.675</b>	<b>.6730</b>
Emotion regulation	84	1.388	.169	4.458	.8781	4.710	.8050
Stress management	84	1.523	.132	4.400	.8522	4.657	.7079
Impulsiveness	84	.724	.471	4.519	.9233	4.659	.8776
<b>Emotionality</b>	<b>84</b>	<b>2.580*</b>	<b>.012</b>	<b>5.062</b>	<b>.6555</b>	<b>5.421</b>	<b>.6344</b>
Emotion perception	84	1.157	.251	4.874	.7908	5.080	.8204
Emotion expression	84	2.824**	.006	4.741	1.1101	5.402	1.0632
Trait empathy	84	3.705**	.000	5.124	.6964	5.654	.6291
Relationships	84	.262	.794	5.508	.7945	5.551	.7131
<b>Sociability</b>	<b>84</b>	<b>.488</b>	<b>.627</b>	<b>4.785</b>	<b>.5998</b>	<b>4.726</b>	<b>.5062</b>
Social awareness	84	.724	.471	4.955	.6912	5.000	.6153
Emotion management	84	1.185	.239	4.669	.7372	4.498	.6041
Assertiveness	84	.216	.830	4.720	.7930	4.682	.8282
<b>Adaptability</b>	<b>84</b>	<b>1.080</b>	<b>.283</b>	<b>4.712</b>	<b>.7391</b>	<b>4.884</b>	<b>.7393</b>
<b>Self-motivation</b>	<b>84</b>	<b>1.181</b>	<b>.241</b>	<b>4.614</b>	<b>.8254</b>	<b>4.825</b>	<b>.7453</b>

*Notes:* DV = dependant variable; EI = Emotional Intelligence; G1 = Group 1; G2 = Group 2

\*p < .05, \*\*p < .01

### **9.1 - Group and Gender Differences in Global Trait EI Scores**

The univariate factorial ANOVA indicated differences in global trait EI scores between the two groups,  $F(3,80) = 1.235, p < .05$ . Neither gender nor the Group x Gender interaction were observed to be statistically relevant in the global trait EI measurement.

### **9.2 - Group Differences in Trait EI**

The independent-samples t-test indicated statistically significant differences in global trait EI scores between the two groups,  $t(84) = 2.156, p < .05$ . The average trait EI score for the two groups was G1 ( $M = 4.88, SD = 0.53$ ) and for G2 ( $M = 5.11, SD = 0.47$ ). The scale also exhibited satisfactory internal consistency with the average alpha ( $\alpha$ ) of the two groups: G1 alpha ( $\alpha$ ) = .890 and G2 alpha ( $\alpha$ ) = .881.

### **9.3 - Group Differences in the Main Four Trait Factor Scores**

Statistically significant differences were found in two of the four factors, *emotionality* and *wellbeing*. The independent-samples t-test indicated differences in emotionality scores between the two groups,  $t(84) = 2.580, p < .05$ . The average scores between the groups were G1 ( $M = 5.06, SD = 0.66$ ) and G2 ( $M = 5.42, SD = 0.63$ ). The independent-samples t-test also indicated differences in *wellbeing* scores between the two groups,  $t(84) = 2.649, p < .05$ . The average scores between the groups for this factor were, G1 ( $M = 5.30, SD = 0.80$ ) and G2 ( $M = 5.70, SD = 0.59$ ).

#### 9.4 - Group Differences in Subscale Trait Factor Scores

Out of the 15 subscale scores, when broken down, four of the subscales indicated statistically significant differences between the two groups. These results for these subscales are outlined below.

Under the *emotionality* trait factor heading, the independent-samples t-test indicated statistically significant differences in *empathy* and *emotion expression*. For *empathy* the independent-samples t-test differences were as follows,  $t(84) = 3.705, p < .05$ . The average scores between the groups were G1 (M = 5.12, SD = 0.69) and G2 (M = 5.65, SD = 0.63). In *emotion expression* the independent-samples t-test differences indicated between the two groups were,  $t(84) = 2.824, p < .05$ . The average scores between the groups for emotion expression was G1 (M = 4.74, SD = 1.11) and G2 (M = 5.40, SD = 1.06). Additionally, under the *wellbeing* factor score the independent-samples t-test indicated statistically significant differences in the *optimism* sub scale score between the two groups,  $t(84) = 3.536, p < .05$ . The average scores between the groups for the *wellbeing* factor score was G1 (M = 5.20, SD = 0.76) and G2 (M = 5.80, SD = 0.79).

There were no statistically significant differences observed in the *emotion management* and *emotion regulation* factor scores. For *emotion management*, the independent-samples t-test result between the two groups were,  $t(84) = 1.185, p < .05$ . The average scores between the groups were G1 (M = 4.67, SD = .74) and G2 (M = 4.5, SD = .60). For *emotion regulation*, the independent-samples t-test result between the two groups were,  $t(84) = 1.388, p < .05$ . The average scores between the groups were G1 (M = 4.46, SD = .87) and G2 (M = 4.71, SD = .81).

## 10 - Discussion

The aim of this study was to examine the differences in emotional intelligence (EI) between two different groups, the general population (G1) and final year Counselling and Psychotherapy students (G2). Examining the main findings statistically significant differences in favour of G2 for global trait EI were observed as well as in the trait factors of *wellbeing* and *emotionality*. In the subscale scores, statistically significant differences were observed in *empathy*, *emotional expression* and *optimism*. There was no significant statistical difference for the global trait EI when Gender x Group was factored in, this is in line with results reported by Petrides (2009), who provided a detailed discussion of gender differences in global trait EI. How these results compared with the previously outlined hypotheses will now be examined.

### 10.1 - Hypothesis H1

The first hypothesis H1 was supported by the results as a statistically significant difference was observed between the final year group of therapists (G2) and the general population group (G1) in the global trait EI score.

### 10.2 - Hypothesis H2

In breaking down the overall global trait EI and examining the four main sub factors, it was found that the second hypothesis H2 was supported in that statistical differences were observed in the *emotionality* factor score between the two groups in the favour of the final year Counsellors and Psychotherapists students. Individuals with high scores on this factor believed they have a wide range of emotion-related skills. They could perceive and express emotions and use these abilities to develop and sustain close relationships with significant

others. Lower scorers on the other hand find it difficult to recognize their internal emotional states and to express their feelings to others. This agreed well with findings that showed therapists to be more emotionally aware and empathic than the latter (Alpern-Simha, 2007; Fauth et al., 2007; Rivers, Brackett, Salovey, & Mayer, 2007).

It was also observed however that there was an unexpected statistically significant difference in the *wellbeing* trait factor again in the favour of the final year Counsellors and Psychotherapists students. The *wellbeing* trait factor was where individuals were observed to reflect a generalized sense of well being extending from past achievements to future expectations. Individuals with high scores feel positive, happy and fulfilled with lower scorers tending to have a low self-regard and be disappointed about their life as it is at present. This difference was focused around the sub factor *optimistic* trait and will be examined further in the review of H3

### **10.3 - Hypothesis H3**

H3 hypothesised that the differences between the two groups would be focused around the trait sub factors of *emotion regulation*, *emotion perception*, *empathy*, *emotion expression* and *emotion management*. This was not fully supported by the results where only *empathy* and *emotion expression* showed statistically significant differences. The sub trait *empathy* is the perceived ability to see the world from someone else's point of view, where high scorers on this scale meant that individuals perceived themselves as fluent in communicating their emotions to others. *Emotion expression* is the ability to know what the best words are for expressing their feelings in communicating emotion-related thoughts with high scorers on this scale meant that individuals perceived themselves as fluent in communicating their emotions to others. As highlighted in the literature review this agreed with existing findings around

therapeutic skill sets (Mearns & Thorne, 2007; O'Farrell, 1999; Hammond, Hepworth & Smith, 1977)

The sub trait factors however that did not show a statistically significant difference as hypothesised in H3 were *emotion regulation*, *emotion perception* and *emotion management*. The *emotion regulation* scale measured short, medium and long term control of one's own feelings and emotional states, where high scorers have control over their emotions and can change unpleasant moods or prolong pleasant moods through personal insight and effort. The *emotion perception* scale measured emotion perception in one's self as well as in others, and while on average the final year Counselling and Psychotherapy student scored higher than the general population group, there wasn't a statistically significant difference. The *emotion management* scale concerns one's perceived ability to manage other peoples emotional states, where high scorers on the emotion management scale can influence other people's feelings, for example, calming them down, containing strong emotions, motivating others. These contradictions in the hypothesis suggest possible weaknesses in the students training to date as literature and research shows that emotional regulation, perception and management are key parts of a Counselling and Psychotherapists skill set (Mearns & Thorne, 2007; O'Farrell, U., 1999; Hammond, Hepworth & Smith, 1977; Rogers, 1961).

Finally, looking in more detail at the trait sub factors that made up *wellbeing*, it was unexpectedly observed that the therapists group (G2) scored statistically higher than the control group, and this occurred only within the *optimism* trait sub factor. The *optimism* sub factor is linked to *wellbeing*, albeit in a forward-looking way. High scorers look on the bright side and expect positive things to happen in their life. This was an unexpected statistically significant difference and one possible explanation may be due to the fact that the majority of

therapists were in the final stages of their studies, with those past efforts now coming to fruition and thoughts of new challenges ahead creating a sense of renewed optimism for their future.

#### **10.4 - Methodological Limitations of Study**

Without proper randomization, statistical tests can be meaningless and due to the very tight time constraints cautions around the types of sampling used within this study are acknowledged as limitations within the research conclusions. Convenience sampling is also very risky and extreme caution needs to be exercised in interpreting the results. The study was also limited by the relatively small group sizes and within the final years therapist student group (G2) male and female final year participants were not equally distributed across this group.

Another limitation was the quasi experimental nature of the design which did not take into account any pre-existing factors or recognize how potential influences outside the experiment may have affected the results. Within the groups of individuals some may have been slightly more experienced or intelligent for example and without some form of pre-testing or random selection, it is hard to judge the influence of such factors on the results presented within this dissertation.

Finally, two other weaknesses which should be acknowledged was the mono-method of assessment and also that of relying exclusively on self-report data is a limitation that has been already widely acknowledged in the field of personality (Pervin, 1999).

## **10.5 - Recommendations for Future Research**

Future research could recruit samples of sufficient size to ensure a wide enough distribution within the different categories. Also, it would be useful to attempt a longitudinal study in the development of Counselling and Psychotherapy students, where the students global trait EI could be measured as a group over time and compared with a control group over the same period of time. Future research could also look to include other measurements like intelligence, self-esteem and quality of life measures which would help reduce the impact of confounding variables and reduce the mono-assessment effects of the current design.

## **10.6 - Personal Reflections on the Research Process**

The inspiration around this research was based on my own experiences of education around emotional awareness as I progressed through my own therapist training. Previous courses I would have completed, including a degree in Science would have focused primarily on academic based skills. Within my therapist training, through the continual process of self development and emotional awareness I have perceived a marked development and growth of my own emotional awareness. While this study has limitations as acknowledged in the discussion, it has on one level confirmed this perceived growth. On another level, this process has been so much more and one I hope to see continuing in the future. Commenting on this process, Carl Rogers (1961, p196) warned,

“This process of the good life is not, I am convinced, a life for the faint-hearted. It involves the stretching and growing of becoming more and more of one's potentialities. It involves the courage to be. It means launching oneself fully into the stream of life.”

Thus striving towards the good life and developing a high degree of personality adjustment are the consequences of being a fully functioning person. The picture that Emotional

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Intelligence sketches is one that can help with that adjustment, challenging us to become better therapists and better individuals.

### **10.7 - Practical Recommendations and Conclusion**

This study has contributed data about emotion related personality differences across two separate groups of individuals. The research result showed statistically significant differences between the therapist group (G2) and the general population group (G1) in the sub trait areas of *empathy*, *emotional expression* and *optimism*, however not in the sub trait areas of *emotion regulation*, *emotion perception*, and *emotion management*. With therapist training becoming more and more important in today's environment, and in Ireland, with detailed developments ongoing around statutory accreditation, such knowledge has the potential to inform ongoing Counselling and Psychotherapy courses of potential weaknesses in training as well as with possible individual assessments assisting the student to identify potential areas for improvement. Finally, therapist training aside, the ability to develop ones emotional intelligence is not just a specific requirement that is limited to only therapists, but that from which most individuals in society could benefit from.

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## Appendix I

### The Trait Emotional Intelligence Framework

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The trait emotional intelligence (trait EI) model successfully integrates and extends EI related ideas in a general framework that incorporates 15 specific facets. The TEIQue assesses all of the above facets through 15 subscales. In addition, it provides scores on four factors of broader relevance ('*well-being*,' '*self-control*,' '*emotionality*,' and '*sociability*'). Below, you will find brief information about each of the scales and factors.

At all times, it is important to remember that scores on the trait EI facets do not reflect cognitive abilities (e.g., IQ), but rather self-perceived abilities and behavioural dispositions. The TEIQue is a scientific measurement instrument based exclusively on trait EI theory. Trait EI theory is unrelated to what lay individuals understand by 'emotional intelligence' and is incompatible with all other 'models' promoted in the various literatures. The TEIQue is not an alternative to questionnaires or tests claiming to measure 'emotional intelligence'. It is specifically developed and updated to provide a gateway to trait EI theory. Trait EI theory is developed in the context of the trait emotional intelligence research program.

### Subscale Scores and Interpretations

***Emotion expression:*** High scores on this scale mean people are fluent in communicating their emotions to others. They know what the best words are for expressing their feelings accurately and unambiguously. Low scores on this scale indicate a difficulty in communicating emotion related thoughts, even in situations when this is necessary. People with low scores find it difficult to let others know how they feel. Inability to express emotion may be indicative of a more generalized problem of lack of self-confidence and social assertiveness.

***Empathy:*** This scale measures the 'perspective-taking' aspect of empathy: seeing the world from someone else's point of view. In other words, it has to do with whether one can understand other people's needs and desires. People with high scores on this scale tend to be skilful in conversations and negotiations because they take into account the viewpoints of

those they are dealing with. They can put themselves “in somebody else’s shoes” and appreciate how things seem to them. Low scorers have difficulty adopting other people’s perspectives. They tend to be opinionated and argumentative and may often seem self-centred.

***Self-motivation:*** People with high scores on this scale are driven by a need to produce high-quality work. They tend to be determined and persevering. They do not need to be externally rewarded for their efforts because they have a strong sense of achievement and are motivated from within. Low scorers tend to need a lot of incentives and encouragement in order to get things done. They need constant reward to keep going and they are more likely to give up in the face of adversity. They also tend to have reduced levels of drive and persistence.

***Emotion regulation:*** This scale measures short-, medium-, and long-term control of one’s own feelings and emotional states. High scorers have control over their emotions and can change unpleasant moods or prolong pleasant moods through personal insight and effort. They are psychologically stable and they know how to pick themselves up after emotional setbacks. Low scorers are subject to emotional seizures and periods of prolonged anxiety or even depression. They find it difficult to deal with their feelings and are often moody and irritable.

***Happiness:*** This scale concerns pleasant emotional states, primarily directed towards the present rather than the past (life satisfaction) or the future (optimism). High scorers are cheerful and feel good about themselves. Low scorers often feel blue and can be overly negative about things. More generally, people with low scores on this scale tend to be disappointed with their life as it is at present. Along with *self-esteem* and *optimism*, this scale reflects your general psychological state at present.

***Social awareness:*** High scorers believe they have excellent social skills and are socially sensitive, adaptable, and perceptive. They are good at negotiating, brokering deals, and influencing others. In addition, they tend to have control over their emotions and the manner in which they express them, which enables them to function confidently in diverse social

contexts, like parties or networking events. Low scorers believe they have limited social skills and often feel anxious in unfamiliar settings because they are unsure about how to behave. They find it difficult to express themselves clearly and have a small circle of acquaintances. They are known for their limited interpersonal skills.

***Low impulsiveness:*** This scale measures mainly dysfunctional ('unhealthy') rather than functional ('healthy') impulsivity. Low impulsivity involves thinking before acting and reflecting carefully before making decisions. High scorers on this scale weigh all the information before they make up their mind, without, however, being overly cautious. Low scorers tend to be impetuous and to give in to their urges. Much like children, they want immediate gratification and have low self-control. They often speak without having thought things through and they change their mind frequently.

***Emotion perception:*** This scale measures emotion perception in one's own self as well as in others. High scorers on this scale are clear about what they feel and able to decode other people's emotional expressions. In contrast, people with low scores on the emotion perception scale are often confused about how they feel and do not pay much attention to the emotional signals that others send out.

***Self-esteem:*** The self-esteem scale measures one's overall evaluation of oneself. High scorers have a positive view of themselves and their achievements. They are confident, positive, and satisfied with most aspects of their life. Low scorers tend to lack self-respect and to not value themselves very highly. Low self-esteem scores are often the result of challenges in one or more of the other areas that the TEIQue assesses.

***Assertiveness:*** Individuals with high scores on this scale are forthright and frank. They know how to ask for things, give and receive compliments, and confront others when necessary. They have leadership qualities and can stand up for their rights and beliefs. Low scorers tend to back down even if they know they are right and have difficulty saying 'no,' even when they feel they must. As a result, they often end up doing things they do not want to do. In most cases, they prefer to be part of a team rather than to lead it.

***Emotion management:*** This scale concerns one's perceived ability to manage *other* people's emotional states. High scorers on the emotion management scale can influence other people's feelings (e.g., calm them down, console them, motivate them). They know how to make others feel better when they need it. Low scorers can neither influence nor manage others' feelings. They become overwhelmed when they have to deal with other people's emotional outbursts and are less likely to enjoy socializing and networking.

***Optimism:*** Like *happiness*, this scale is linked to well-being, albeit in a forward-looking way. High scorers look on the bright side and expect positive things to happen in their life. Low scorers are pessimistic and view things from a negative perspective. They are less likely to be able to identify and pursue new opportunities and tend to be risk-averse. Along with *happiness* and *self-esteem*, this scale reflects your general psychological state at this point in time.

***Relationships:*** This scale mainly concerns one's personal relationships, including close friends, partners, and family. It is about starting and maintaining emotional bonds with others. High scorers usually have fulfilling personal relationships that positively affect their productivity and emotional well-being. They know how to listen and be responsive to the people close to them. Low scorers find it difficult to bond well with others and tend to undervalue their personal relationships. They often behave in ways that hurt those close to them.

***Adaptability:*** High scorers are flexible in their approach to work and life. They are willing and able to adapt to new environments and conditions – in fact, they may even enjoy novelty and regular change. Low scorers are change-resistant and find it difficult to modify their work- and life-style. They are generally inflexible and have fixed ideas and views.

***Stress management:*** High scorers on this scale can handle pressure calmly and effectively because they have developed successful coping mechanisms. More often than not, they are good at regulating their emotions, which helps them tackle stress. Low scorers are less likely to have developed stress-coping strategies. They may prefer to altogether avoid situations that

are potentially hectic, rather than deal with the associated tension. Their vulnerability to stress is problematic, as it leads them to reject important, but time-demanding, projects.

### **Interpreting factor scores**

**Well-being:** High scores on this factor reflect a generalized sense of well-being, extending from past achievements to future expectations. Overall, individuals with high scores feel positive, happy, and fulfilled. In contrast, individuals with low scores tend to have low self-regard and to be disappointed about their life as it is at present. Your well-being score largely depends on your scores on the other three factors of the TEIQue.

**Self-control:** High scorers have a healthy degree of control over their urges and desires. In addition to fending off impulses, they are good at regulating external pressures and stress. They are neither repressed nor overly expressive. In contrast, low scorers are prone to impulsive behaviour and seem to be incapable of managing stress. Low self-control are associated with inflexibility.

**Emotionality:** Individuals with high scores on this factor believe they have a wide range of emotion-related skills. They can perceive and express emotions and use these abilities to develop and sustain close relationships with important others. Individuals with low scores on this factor find it difficult to recognize their internal emotional states and to express their feelings to others, which often leads to less rewarding personal relationships.

**Sociability:** The sociability factor differs from the emotionality factor above in that it emphasises social relationships and social influence. The focus is on the individual as an agent in different social contexts rather than on personal relationships with family and close friends. Individuals with high scores on the sociability factor are better at social interaction. They believe they have good listening skills and can communicate clearly and confidently with people from very diverse backgrounds. Those with low scores believe they are unable to affect others' emotions and are less likely to be good negotiators or networkers. They are unsure what to do or say in social situations and, as a result, they often appear shy and reserved.

## **Appendix II**

### **Constructed email for requests to participate in study**

Dear student,

I am currently looking for volunteers to assist me with the completion of a questionnaire for my final year thesis project. It takes about twenty minutes maximum and should be completed without too much thought, after which you would have two options regarding its submission:

1. Return the questionnaire to me with no personal details which I will place directly into my collection envelope, thus rendering it an anonymous submission.
2. If you volunteer, and wish to know more about the study, I can share further details with you after the completion of the questionnaire. I will be getting these scored externally, however, if you would be interested in receiving the results of your own scores, place your email address on the top of the form before you return it back to me and I will share the scored results with you personally after I receive them back.

All returned results will be treated with the strictest of confidence.

Please let me know if you can take part in this study, after which I will email you the questionnaire directly.