

THE EMOTIONAL INTELLIGENCE – SOCIAL INTELLIGENCE RELATIONSHIP IN THE PARTICULAR CASE OF PSYCHOTHERAPISTS AND SOCIAL WORKERS

Marinela SÎRBU, Roxana MAIER

Hyperion University Bucharest (psihoterapii_scurte@yahoo.com,
roxanamaierpsiho@gmail.com)

DOI: 10.19062/1842-9238.2016.14.2.18

***Abstract:** Benefiting from a fathomable study of the values of emotional and social intelligence in therapists and social workers, one can reify certain developmental directions of these components. It is a known fact that in the jobs with a social impact, and not only, emotional intelligence has an important role and thus its development becomes even more necessary. The study brings to discussion the values of emotional and social intelligence for two distinct categories – psychotherapists and social workers, and also offers certain directions for the extension and actualization of the potential of these categories from these points of view, towards the benefit of those assisted.*

***Keywords:** emotional intelligence, social intelligence, psychotherapist, social worker.*

1. INTRODUCTION

One of the important qualities in social life is the way in which we know how to communicate our emotions. It is thus even more important if our job has a high social impact, as is the case for psychotherapists and social workers. Ekman cited by Goleman “uses the term of rules of expression in order to designate the social consensus in terms of feelings that must be manifested in certain moments” [1]. Hence in the social interaction we create certain expectations from people, from certain contexts, in certain moments, and thus, even from those from whom we expect support and understanding. Emotional expression makes sense for each of us and we learn this very early in life. “Each emotion separately offers a distinctive desire to take action; each shows us the best direction to approach the inherent challenges of life” [2]. This capacity of ours to respond in the most adequate way to our emotions, given by the interaction with others, or of others is represented by interpersonal intelligence. This notion, introduced by Gardner, supports the outing of the belief people had about the importance of the role of general intelligence and brings thus emotions and their role at the forefront. “Emotional intelligence is our capacity to self-govern - ourselves, our relations with others - so that we live according to our intentions. More precisely, emotional intelligence refers to the choices we make”[3]. The benefits brought by the feelings that we have towards attested work and towards those we work with, by our capacity to find solutions for the misunderstandings that may arrive, to work in a team for a common goal. Hence, any psychotherapist or social worker is all the more efficient as their emotional intelligence is higher.

Depending on the familial climate, on the relations with people of the same age, them being either models, or not, people build their value, find themselves, look for answers to the many questions that go through each age in turn.

It happens that in this period of search, of development, people close inside themselves, they might look for answers to the questions that distress them in places or entourages that are not adequate and in this way they might block certain contents or even develop in an inappropriate manner. On this road, when they don't find adequate answers or when they find it difficult, people look for support in psychotherapists or are helped by social workers. In the jobs with a social impact, the social dynamic plays an important role. Generally, in relationships this happens in a natural manner, depending on the quality of the relationship the people in it have. Starting from what Adler said „man knows more than he understands”, the interpersonal diagnosis that results following psychotherapy targets: the structural analysis of the social behavior, having as dimensions control and affiliation (the control dimension – to take or give the control and the affiliation dimension – how one rapport himself or herself to the significant persons in his or her life) and the access to a set of personal inventories that look at significant relationships, life scenarios, personal themes [4]. „Each interaction has an emotional underlining. [...] We take part in this interpersonal economy every time a social interaction has, as a result a transfer of feelings – which is something that happens almost always” [5]. It is known that therapists bring to the surface and generally work with many of the client's emotions. Concentrating on emotions does not transform the person in one that is weak or vulnerable, but on the contrary, it gives him or her the power to manage relationships, changes, conflicts, choices with great success [6]. It is not sufficient to discover what exactly is not working well, but it is necessary to orient yourself towards finding a solution for it, and this endeavour can be attended by a therapist. Gaylin said “there exists a considerable – if not an absolute – relationship between knowing good and doing good. That certainly was an assumption I carried around with me when I first started my psychotherapeutic training, and beyond”[7]. In the case of social workers, they support the underprivileged categories and the result is most of the times positive, thing that can be seen in the lives of the assisted through the partial or total solution of their issues. This endeavor is based in grand terms on the collaborative spiral model, introduces by Fivush, cited by Rime – the abilited person ensures the essential of the work task, as an initiative and content and the assisted brings his or her contribution in modest contributions at the start and then contributes more and more as he or she has the abilities for the task at hand. The entire experience is centered on doing things in common and on conveying, for the assisted, real possibilities to make the change in the sense of personal growth and autonomy [8]. The research in psychotherapy and social work, especially those that refer to the efficacy of a therapeutic or social assistance program raise a complex problem, i.e. what intervention applied by whom can give the best result. This issue refers to the interrelationship – between the psychotherapist, social worker and assisted person. In the dynamics of the relation, the personality of the therapist or of the social worker, and his or her attributes matter, and among the ones who obtain performing results are those who have a high level of emotional and social intelligence. In support of this idea, the study tries to bring to attention these two components that are in an interrelation, but also the differences between them in the case of the two jobs taken into study.

2. OBJECTIVES

1. The operationalisation and the evaluation of emotional and social intelligence in target groups.
2. The analysis of the two groups under the aspect of identifying the level of social and emotional intelligence they register.

3. GENERAL HYPOTHESIS

The level of social and emotional intelligence registers levels that are significantly higher in the case of psychotherapists, than in the one of social workers.

3.1. Hypothesis

Hypothesis 1

We assume that social and emotional intelligence constitute a psychological pluralism for all the investigated participants.

Hypothesis 2

There are differences on the social and emotional intelligence levels between the group of psychotherapists and the group of social workers.

3.2. Data from the participant group

The research hereby was realised on a number of 140 subjects, out of which 97 were women and 43 were men, with ages between 24-59 years old, having an average age range of 40,6 years and a standard deflection (AS= 14,57). The identification and the inclusion of these subjects took place in a haphazard manner, a part of them being contacted at their workplace. Hence, in the situation of the social workers, they were contacted through the Centers that belong to the Direction for Child Protection – D.C.P. Bucharest, while psychotherapists were contacted through the Psychotherapy Associations they took part in through their courses and basis and continuous professional formation workshops. The participant psychotherapists belong to different competency levels and represent several therapy schools. Regarding the coverage of the people in the two research groups, it had the following configuration:

- 70 participants between the ages of 24 and 59, age average = 41,5 years (standard deflection= 11,25) which have created the psychotherapist group, named research group A throughout the given endeavor.
- 70 people between the ages of 24 and 59, age average = 34,8 years (standard deflection =10,12) which have created the group of social workers, respectively research group B.

The manner in which they were sampled was one of convenience [9]. being co-opted in the study the participants who were simply available. This situation was created following practical considerations and has determined us not to use competency or psychotherapeutic orientation criteria throughout the work.

4. TOOLS USED IN RESEARCH

1. *The social intelligence scale*, construction and adaptation after Tromsø Social Intelligence Scale – TSIS [10]. The scale comprises a number of 21 items, each of them reflecting in a conceptual manner inferences specific to social intelligence. The items are rated on a Lickert scale from 1 to 7 (where 1 = barely characterizes me, up to 7 = highly characterizes me). The scale measures three areas of social intelligence: the social procedural information; social ability; social conscience. A high score reflects a superior degree of social intelligence.

2. *Feature- emotional intelligence questionnaire* [11], [12], [13]. The questionnaire comprises a number of 30 items in its short form, and these are scored on a Likert from 1 to 7, where 1= completely disagree and 7 = completely agree.

The basic instrument is based on a long form that is constituted initially, which comprises a number of 153 items that are built on 15 scales. The tool was used with the purpose of offering a comprehensive image of emotional intelligence as a treat.

Obs. For utilizing the tests in this study, we have asked for permission from their authors.

4.1. Processing and interpreting data

Hypothesis 1.

The results obtained after applying the Social intelligence scale

In what regards the „*Social Intelligence Scale*”, the results obtained by psychotherapists reflect an average score of 117,34 – score that situates itself in the high zone of the declaration of the level of social intelligence reported by the participants. From the perspective of frequencies, 15,7% from the respondents have reported scores that are registered in the low area with regards to social intelligence; 68,6% have reported average scores, while 15,7% were situated in the very high area of social intelligence.

Emotional Intelligence Questionnaire (feature)

With regards to emotional intelligence, the results of research group A (psychotherapists) show an average value of the score for the general-emotional score of 101,11. The scores obtained have varied between 40 points for a minimal score and 194 points for the maximum score (which shows a very high level of emotional intelligence). The distribution of the scores obtained, as it emerges from the frequency table is the following: 18,6% have reported a low level of emotional intelligence (as a treat); 65,7% have reported a medium to high level, while 15,7% of the subjects have shown an especially high level of emotional intelligence.

4.2. Elements of descriptive statistics for the social worker group

Results obtained by applying the Social Intelligence Scale

In what regards the „*Social Intelligence Scale*”, the results obtained by social workers reveal an average score of 63,54 – score that situates itself in the average area of the levels of social intelligence reported by the participants. From the frequencies perspective, a percentage of 31,4% from the participants have reported score that are labeled as low in terms of social intelligence, while 68,6% have situated themselves in the average area of social intelligence.

Emotional Intelligence Questionnaire (feature)

With regards to emotional intelligence, the results of the subjects from the social workers group have varied between 20 points, as a minimum score and 150 points as the maximum score (high level of emotional intelligence). The distribution of the scores, as it comes out of the frequency table is as follows: 34,8% have reported a low level of emotional intelligence (as a treat); 53,5% have reported a medium level, while 11,7% of the subjects have demonstrated unusually high levels of emotional intelligence.

4.3. The check-up of research hypotheses

General hypothesis

The level of social and emotional intelligence registers rates significantly higher in the case of psychotherapists, than in the case of social workers.

Hypothesis 1

We assume that between social and emotional intelligence there is a correlation for all the investigated subjects.

In order to be able to study the relation between the variables we are following we have applied the calculation of the Pearson correlation coefficient (r). Hence, for all the investigated subjects we have registered a correlation in which the value calculated of the correlation coefficient $r=0,675$; $p<0,000$ allows us to sustain the work hypothesis of the research (1), i.e. the fact that there is an association between social and emotional intelligence in the rows of participants.

Hypothesis 2

There are differences on the social and emotional intelligence between the psychotherapist and the social workers group.

The results assert towards the significant differences between the two groups, thus the value of the test t ($df=58$) is of $-4,677$; $p=0,001<0,05$ which indicates the fact that the average of the scores for social intelligence of the subjects from the social worker group is significantly lower than the average of the scores for social intelligence from the psychotherapist group. Furthermore, in the case of the value of the t test for emotional intelligence, $t(df=58)$ is of $-3,219$; $p=0,002<0,05$ which indicates the fact that the average of the scores for this factor is significantly lower for social workers, compared to the psychotherapists.

In order to have psychotherapists and social workers that are well prepared and are successful in what they do, studies show they should have the following qualities on the first places – tolerance to stress, an assertive character, the control of impulses, independence, optimism, all characteristics of emotional intelligence [14]. The critical factors of success in any job, are those that determine the performance of the individual and are given by the dimensions of the axiological aspect of the individual, transposed in specific needs to be successful in that specific job.

CONCLUSIONS

The data obtained attracts the attention over the fact that in the jobs with a social impact, the levels of social and emotional intelligence is important, as it can represent a factor of success and performance in that specific job. Furthermore, the fact that the data reveal lower scores for certain participants (for example for social workers compared with psychotherapists, but also inside the same category of respondents) takes us to the necessity of elaborating knowledge and education programs of the two studied dimensions. In the practice of the jobs with social impact, the identification of emotions, the adequate perception of relations, of their dynamic and the desire to be there or to offer support constantly become abilities that deserve to be optimized.

REFERENCES

- [1]. D. Goleman, *Inteligența emoțională*, Editura Curtea Veche, București, p.156, 2008;
- [2]. D. Goleman, *Inteligența emoțională*, Editura Curtea Veche, București, p.30, 2008;
- [3]. A.B. Lynn, *Avantajul E.Q. Un plan magistral de mobilizare a inteligenței emoționale*, Editura Codecs, București, p.8, 2008;
- [4]. A. Adler, *Sensul vieții*, Editura Iri, București, p.6, 1995;
- [5]. D. Goleman, *Inteligența socială*, Editura Curtea Veche, București, p.22, 2007;
- [6]. D. R. Caruso, P. Salovey, *Inteligența emoțională*, Editura Bussines Tech International, București, 2012;
- [7]. W. Gaylin, *How Psychotherapy really works. How it works when it works and why sometimes it doesn't*, Contemporary Books, a Division of The Mc'Graw-Hill Companies, New York, p. 197, 2001;
- [8]. B. Rime, *Comunicarea socială a emoțiilor*, Editura Trei, București, 2007;
- [9]. M. Popa, *Statistica pentru psihologi. Teorie și aplicații SPSS*, Editura Plirom, Iași, 2008;

The Emotional Intelligence – Social Intelligence Relationship in the Particular Case of Psychotherapists and Social Workers

- [10]. D. H. Silvera, M. Martinussen and T. I. Dahl, The Tromsø Social Intelligence Scale, a self-report measure of social intelligence. *Scandinavian Journal of Psychology*, 42, pp. 313-319, 2001;
- [11]. K.V. Petrides, J.C. Perez, A. Furnham, The trait Emotional Intelligence Questionnaire (TEI-Que),, A measure of emotional self-efficacy”, Presented at *the 11th Biannual Meeting of the International Society for the Study of Individual Differences (ISSID)*, Granz, Austria, 2003;
- [12]. K.V. Petrides, A. Furnham, Trait emotional intelligence: Psychometric investigation with reference to established trait taxonomies, *European Journal of Personality*, 15, pp.425-448, 2001;
- [13]. K.V. Petrides, N. Frederickson, A. Furnham, The role of trait emotional intelligence in academic performance and deviant behavior at school, *Personality and Individual Differences*, 36, pp.277-293, 2004;
- [14]. S.J. Stein, H.E. Book, *Forța inteligenței emoționale*, Editura Allfa, București, 2003.