Correlation between Mothers' Emotional Intelligence And Anxiety Disorders in Preschool Students Of Gorgan Preschools

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ABSTRACT Parents' emotional intelligence is one of the variables that could be affective on formation or reduction of children's anxiety, in fact nowadays the emotional intelligence is explained as a kind of intelligence which includes both a thorough understanding of emotions of the individual and an exact interpretation of others' emotional states. The current research aim includes the correlation between mothers' emotional intelligence and the behavioral disorders in preschool students of Gorgan preschools, the research methodology is correlative, and the population includes ١٤٠٠ preschool students during academic year ٢٠١٣-٢٠١٤ in preschools of Gorgan. The chosen sample from these children was ٣٠٢ individuals. The measuring tools was Bar-on Emotional Intelligence Inventory which was conducted on parents and the ٦-١٤ years old child symptom inventory-٤ (csi-٤) which is a DSM-IV referenced rating scale that uses screening for extracting and conducting the behavioral disorders, and the required data were extracted and they were statistically processed. The simple correlation and the advanced statistical analysis of canonical correlation through SPSS software were used for surveying the research hypotheses. Results showed that a correlation exists between the mothers' emotional intelligence and the children's behavioral disorders, and the more the score of mothers' emotional intelligence the less the children's behavioral disorders. At the end of the article a few applicable research suggestions are provided based on the achieved results.

KEYWORDS Emotional Intelligence, Behavioral Disorders, Preschool Children.

INTRODUCTION

Research results in recent years have shown that there is a high correlation between EI and preparation for catching different diseases. Stress, anxiety, and depression weaken or stop the body immune system and result in vulnerability toward all diseases including catching a cold to cancers. When mind is engaged with stress, discomfort or anxiety, it delivers this message to body to reduce energy consumption for fighting against a disease, and these result in increasing vulnerability toward different types of serious or new diseases. Recent medical researches show that an apparent correlation exists between anxiety and serious types of diseases such as cancer. EI skills also accelerate recovering. Patients who work on their EI skills during treatment and grow their skills get rid of most of diseases including the most deadly diseases more quickly. The physical effect of EI on the brain and various systems of the body is so huge that conducted researches at the Harvard Medical School proved with FMRI that along with changes in EI, physical changes take place in brain. EI skills reinforce the brain capability for coping with emotional distress. This causes the immune system to stay strong and have more resistance against disease. Perhaps good mood and good thought (good emotion-good thought) could be considered as the most important effect of emotion on their thoughts and responses. When we feel good we think that the world and the people around us are beautiful. When we are depressed or down everything seem to be gloomy and dark. When we have a good feeling we see the world through rose-colored glasses and vice versa (Atkinson and et al, Quoted by Baraheni and et al, ٢٠٠٤). Since the child's nervous system has not reached its full growth as an adult and this growth continues and in other words it is changing thus the child's behavior is changing similarly. Because the child does not have complete intellectual growth so he/she cannot have control over his/her behaviors the same as adults, or to feel guilt when he/she does something wrong. In other words, the child language is neither understood by the others nor the doctor. The child cannot talk about one's feelings such as fear, anxiety, and sense of deprivation or failure, but he/she could express them through language of physical symptoms such as anorexia, stomachache, headache, vomiting or behavioral disorders such as being unrest, refusing to go to school, making excuses and … . Thus each of the child's abnormal behaviors or the physical symptoms that have no physical cause must be considered as a response to the conditions surrounding him/her (Milanifar, ٢٠٠٩). We always see that parents are worried when their children start attending preschools and schools, and this anxiety exists in children as well. Parents' emotional intelligence is one of the variables that could be affective on formation or reduction of children's anxiety, in fact nowadays the emotional intelligence is explained as a kind of intelligence which includes both a thorough understanding of

emotions of the individual and an exact interpretation of others' emotional states. Emotional intelligence evaluates the individual in terms of emotions, which means that it evaluates that to what extent the individual is aware of his/her emotions and how he/she controls and manages them. (Vinden, ٢٠٠١). The conducted research at Emory University showed that child's emotional intelligence is the product of displaying parents' emotional intelligence skills and not their personal experience from emotional stress. Children learn the emotional intelligence skills from their parents. In fact if they do not have the example and pattern from their parents they lose the best source of learning. Parents who train their children to have emotional intelligence and teach them how to practice it, will nurture boys and girls who are more happy, have better social adjustment, achieve better scores and they achieve more success in career positions when they grow. Children who increase their emotional intelligence skills decrease their truant, laziness and criminal activities, when the child starts this process then increase of emotional intelligence results in improving the child's relationship with classmates. If parents are the role model of emotional intelligence for the child they grow their required skills for coping with others and they will experience more success, a success which continues till the adulthood (Neil; Quoted by Shamsipour, ٢٠١٢). Cobham and et al (١٩٩٨) believe that existence of a positive relationship between mother and child affects the child's success, because based on this affection the child accepts his/her parents' expectations and requests. If parents do not expect their child to be successful and encourage attachment the parents' affection won't lead to high levels of success in their child. Preschool period is the appropriate time for detecting the children's behavioral problems and as a result it is the right time for intervening and preventing from their further emotional, social and academic problems. The right time of intervening and change of child's maladaptive behavior at this critical period result in increasing the social skills and prepare the child for taking the responsibilities of attending primary school. Recognizing this problem in children and the right time of intervening could prevent from continuing this behavior. Woodward and et al (٢٠٠١) stated that home environment, preschool, family conditions and parents' conditions especially the mothers are effective in improving the mother and child relationship. The number of children in each environment, the caregivers-children ratio, less change in the caregivers and their educational level are some of the components of high quality preschools. In such conditions the caregivers pay more attention to the children and they are more sensitive toward children's needs and they have more verbal appeal, and as a result children show better performance in intelligence tests and social development.

The anxiety disorder is one of the most common disorders in childhood and adolescence, and more than ١٠٪ of this age group copes with these disorders in a period of their growth. The

separation anxiety is a universal developmental phenomenon which emerges in less than ۱-year old infants, and it shows the child's awareness about being separated from one's mother or one's main caregiver. The separation anxiety norm reaches its peak during ۹-month old to ۱۸-month old. It decreases up to ۲،۵ years old and this decrease let the children to easily endure being away from their parents and attending preschools. Separation anxiety or stranger anxiety perhaps has a value for the human being's survival. Also temporary separation anxiety day for the children who enter schools for the first time is normal. Nearly ۱۵٪ of children who confront unfamiliar places or strangers develop sustainable fear, timidity or social isolation. The risk of emerging the separation anxiety disorder, generalized anxiety disorder in children having this pattern of behavioral inhibition is higher. Children having behavioral inhibition generally demonstrate certain physiological traits such as resting heart rate which is higher than normal, higher than normal morning cortisol levels, and low heart rate variability. Detecting the separation anxiety disorder is confirmed when it is demonstrated by inappropriate and excessive anxiety during growth level and when separating from an important person (Shamsipour, ۲۰۱۲). Youhanaei and et al (۲۰۰۷) concluded that only sending the child to the preschool does not result in child's insecurity, but several factors such as the quality of care, age of entering preschool, hours away from the mother, mother's attachment pattern, family events (such as lack of parents or hospitalization of parents) affect the child's attachment style; the same style which is the base of all of the further relationships of the child in his/her life, and affects the physical, cognitive, emotional and social development of the child. In other words they concluded that despite predicting the efficiency of intervention program no difference was observed between the literate and low iterate families. In a research named surveying the psychometric properties of preschool children's anxiety scale Birmaher (۲۰۰۳) concluded that whenever the self-report methods are used in evaluating the anxiety syndromes in preschools, females have more complaints about the anxiety syndromes (such as zoophobia, necrophobia, isolophobia) than males, while in the reports of teachers, parents and other information resources there is no such difference observable. Also in a research named surveying the parents' EI on their children and their behaviors, Laranjo and et al (۲۰۱۰) believed that no significant correlation exists between the parents' EI and the children's anxiety but there is a significant correlation between different types of authoritative parenting and anxiety. Cisler and et al (۲۰۱۰) used the method of parent management training as a part of treatment for children's anxiety and their anxious parents. Spence and et al believe that parent training in the field of modeling; encouragement and increasing the newly learned skills to the child could increase the extension of these skills in the real world by the child.

Regarding the evidences and the mothers-children interactions (behavior and their anxieties) during sending the child to the preschool the necessity of conducting this research becomes apparent. Although usually parents are not the reason for the behavioral disorders, by their characteristics and behaviors they could make these behavioral disorders more or less, thus based on the mentioned evidences and the children's relationships and different parents' interactions

(especially mothers) with children, researcher tries to answer this question that is there any correlation between mothers' emotional intelligence and their children's' behavioral disorders?

MATERIALS AND METHODS

The current research methodology is descriptive-correlative and from the point of aim it is considered as an applied research. The research population includes all of the preschool students in the age range of ٦-٧ years old during academic year ٢٠١٣-٢٠١٤ and they include ١٤٠٠ individuals in Gorgan preschools, and based on the Cohen Table ٣٠٢ individuals were chosen as the sample from these individuals. In order to choose the statistical sample in this research the stratified cluster sampling and the screening method were used. Then the behavioral disorders (hyperactivity, attention deficit, aggression, depression, morbid fears, widespread anxiety, obsessive-compulsive disorders, separation anxiety, neurotic disorders, and tic disorders) were extracted in these ٣٠٢ children of sample size and the mothers' emotional intelligence based on the Bar-on Emotional Intelligence Inventory was completed by parents. The Bar-on Emotional Intelligence Inventory was created in ١٩٨٠ and it has ١٣٣ questions, and it is considered as the first valid cross-cultural inventory for evaluating emotional intelligence. This inventory was revised in ١٩٩٧. This revision was conducted by the author on ٣٨٣١ individuals (٨,٨٤٪ males and ٢,٥١٪ females) from ٦ different countries and it was standardized in North America. The responses were surveyed through factor analysis, and ultimately an overall scale was formed for the emotional intelligence. The validity of EI was surveyed by the use of tools used on samples from different societies and in different situations around the world during ١٩٨٣ and the test validity is confirmed and also Bar-On study generally showed that five combinations of factors evaluate the overall structure of non-cognitive intelligence (Bar-On, ١٩٩٧). The internal consistency is surveyed by the use of Cronbach's Alpha Coefficient and its mean for the population is calculated (overall mean ٧٦٪) and for the sub-tests the low coefficient of ٦٩٪ (social responsibility) to the high coefficient of ٨٦٪ (self-esteem) are calculated. This shows an appropriate and acceptable reliability results. The retest reliability or the coefficient stability over time after one month was reported to be ٨٥٪ and after four months it was reported to be ٧٥٪. Thus there is an acceptable reliability between the test questions, yet the correlation is not so high that shows the emotional intelligence is immutable. In the current research the descriptive and inferential statistics were used for analyzing data. In the descriptive statistics part the central-distributing indicators and in the inferential statistics part the simple correlation and advanced statistical analysis methods of canonical correlation were used. The statistical tests were surveyed by the use of SPSS٢٠ software.

RESULTS

Descriptive survey about the research findings showed that among the overall ٣٠٢ examinees ١٦٢ of them were females and ١٤٠ of them were males. From this number ٩٤ boys and ١١٠ girls were one child or the first child. ١٤٠ of mothers were at the age range of ٣٠-٣٥. The academic degree of ١٢٦ mothers was bachelor. ١١٢ of mothers were employed in the city and ٨٤ of them were employed in villages. Also, the time children spent in preschool for all of the examinees was more than ٥ hours and also FIG.١ shows the employed mothers and the housewives statistics.

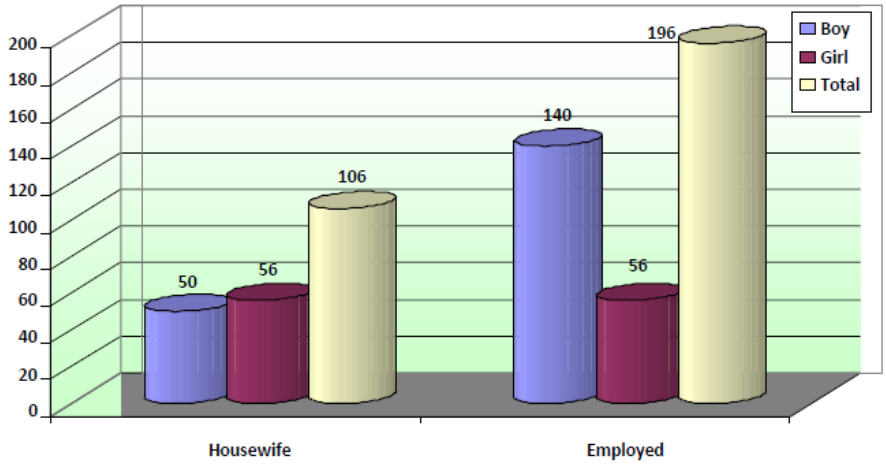

FIG.١: Mothers' employment

In order to survey that to what extent the predictive variable (EI) explain the criterion validity (Generalized Anxiety Disorder and Separation anxiety disorder) the advanced statistical analysis of canonical correlation was used.

Table ١. Summary of MANOVA analysis on the set of criterion validity.

Multivariate tests level	**P-value**	**Significance**
Pillai's trace	٠,٧٧	٠,٠٠١
Hotelling's trace	٠,٣٢	٠,٠٠١
Wilk's Lambda	٠,٢٣	٠,٠٠١

In the above mentioned table the MANOVA analysis results on the set of criterion validity (Generalized Anxiety Disorder and Separation anxiety disorder) are provided. The significant results in each of the three values (P< ٠,٠٠١) show that a significant canonical correlation exists between two sets of variables. The Wilk's Lambda test which is significant in the above mentioned table (Sig= ٠,٠٠١) shows that with the ٩٩٪ confidence the existence of canonical correlation between two sets of variables is confirmed. In order to study the correlation between the predictive variable (EI) and each of the criterion validity (Generalized Anxiety Disorder and

Separation anxiety disorder) and determining the amount of explained variance of each of the criterion validity the results of canonical correlation analysis are provided below.

Table ۲. Summary of canonical correlation dimensions.

Canon	Correlation value	Variance	Significance level
	Canonical	Common	
۱	۰,٦۸	۰,٤٦	۰,۰۰۱
	۰,۲٤۹	۰,۲٤	۰,۰۰۱

Results of canonical correlation analysis based on the above mentioned table show that the canonical correlation values (Generalized Anxiety Disorder and Separation anxiety disorder) at two canons are statistically significant (P< ۰,۰۰۱). In other words, among the predictive variables (EI) it was able to explain in first canon ٤٦٪ and in the second canon ۲٤٪ of variance of Generalized Anxiety Disorder variable and Separation anxiety disorder (Anxiety disorders).

Table ۳. Correlation between the levels of EI and the child's anxiety disorders.

Variable	Correlation Coefficient	Significance Level	NO.
Low EI	-۰,۲٤	۰,۰۰۱	۳۰۲
High EI	-۰,٥۳	۰,۰۰۱	۳۰۲
Average EI	-۰,۳۹	۰,۰۰۱	۳۰۲

According to table ۳ it is observed that a significant correlation exists between the three levels of EI (low, high and average) and the child's anxiety disorders with ۹۹٪ confidence. This correlation is a significant and negative correlation for the three levels of EI and the strongest correlation (r= -۰,٥۳) belongs to the high EI and the anxiety disorders.

DISCUSSION AND CONCLUSION

The current research seeks to survey the correlation between mothers' EI and the preschool children's anxiety disorders in Gorgan preschools. To this aim the research samples include ۳۰۲ children and their mothers that were studied and surveyed. Achieved findings showed that an inverse (negative) correlation exists between three levels of mothers' EI (low, average and high) and the children's anxiety disorders. Generally, EI means the ability to manage one's and others' emotions, distinguishing between them and using the information achieved from them in one's thoughts and actions, and it severely emphasizes on the interpersonal and intrapersonal aspects and the practical aspects of intelligence, and the more the individual has the ٤ main components of emotional awareness (such as the ability to separate emotions from actions), emotion management (such as the ability to control anger), recognizing others' emotions (such as seeing world through others' perspective), managing relationships (the ability to solve relationship problems) and has more skills and capabilities he/she has higher EI, and the behavioral disorders are abnormal behaviors and they are statistically less believed and or they have deviation from

the norm. Based on such definition people who are very happy or very intelligent are among the abnormal individuals (Kehoe, ۲۰۰۶). The current research behavioral disorders include attention deficit hyperactivity disorder (ADHD), depression disorder, Obsessive - compulsive practical-intellectual disorder, tic disorders, morbid fears disorder, separation anxiety disorder, and generalized anxiety disorder which in the current research no significant correlation exists between these disorders (ADHD, depression, obsessive-compulsive, tic and morbid fears). When children with separation anxiety disorder leave their parents or the familiar environment or people and things they are attached to, they show extreme anxiety and fear. Individuals having generalized anxiety disorder have no specific reason for their anxiety. Most of the times they are worried about their work, relationships and health, and they pay too much attention to the details and their anxiety are mostly shifted from one subject to another subject. Razeghi and et al (۲۰۰۵) also concluded that only sending the child to the preschool does not result in child's insecurity, but several factors such as the quality of care, age of entering preschool, hours away from the mother, mother's attachment pattern, family events (such as lack of parents or hospitalization of parents) affect the child's attachment style; the same style which is the base of all of the further relationships of the child in his/her life, and affects the physical, cognitive, emotional and social development of the child. During conducting a research Vinden (۲۰۰۱) concluded that a significant correlation exists between the age of separating child from mother and the daily hours of separation and the child-mother attachment pattern, and also there are interactions between the age of separation and the attachment pattern. Also Cobham and et al (۱۹۹۸) believe that they should use the parent management training as a part of treatment for children's anxiety and their anxious parents. They believe that parent training in the field of modeling; encouragement and increasing the newly learned skills to the child could increase the extension of these skills in the real world by the child. The more the individual could achieve the efficient intervention programs on learning increasing EI he/she exceeds the level of low EI and gains more skills .(Mansour and Dadsetan, ۱۹۹۹) for conducting an effective intervention it is important to emphasize on teaching sensitive behavior, empathy, and responding to child's signs, empathic attitude and behavior of the therapist with the mother, paying attention to the relationship between parent-therapist as a motivation for the mother and helping the child to establish trust and feeling of security with the parent. Also it is necessary to rely on the mother's strengths as a competent and valuable person in order to address the reconstruction of verbal interaction patterns happened between mother and the therapist and it is necessary to familiarize mother with the similarity of these interactions with each other.

Regarding the fact that State Welfare Organization is responsible for childcare of children below ۷ years old, it is suggested to hold EI training workshops in preschools in order to familiarize mothers, principals and caregivers with children's behavioral disorders. Another suggestion is holding training workshops for teaching parenting styles to mothers. In addition to that it is suggested to detect children having behavioral disorders and refer them to treatment centers.

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