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# Emotional Intelligence as a Factor in Mental Health

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Emotional problems are related to deviant behaviour and self-destructive acts



states of sadness or fear. As compared with non-clinical controls, depressed patients had lower overall emotional intelligence scores. Specifically, they scored lower on understanding emotions. It seems that the depressed patients are characterized by reduced sensitivity to changing emotional contexts. This matches the fact that their information processing is usually negatively biased

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Emotional abilities are of particular relevance to psychological health and wellbeing

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Patients with mental disorders have lower overall emotional intelligence. Several studies have shown that emotional abilities are of particular relevance to psychological health and wellbeing. In addition, it has been found that emotional problems are related to the tendency to get involved in deviant behaviour (e.g., vandalism) and self-destructive acts (e.g., psychoactive substance abuse). In this article we will focus on the question of whether patients with mental disorders differ from healthy controls with respect to their emotional skills.

A recent study (Hertel & Schütz, 2009) was one of the first attempts to examine the relationship between emotional abilities, assessed with performance measures, and mental disorder. Emotional intelligence includes the ability to a) perceive emotions, b) use emotions to facilitate thought, c) understand emotional information, and d) regulate emotions.

## Emotional deficits in persons with major depressive disorder

Depression is a mood disorder. Patients have problems in experiencing positive feelings and pleasure. They show low levels of positive affect (mood) and often report

or one-sided. Depressed patients also tended to be less skilled than non-clinical controls with respect to using emotions to facilitate thought. This is in accord with the prototypical symptom that depressed people attend specifically to negative emotions. A close inspection of our results suggests that persons with depression are not generally worse at perceiving emotions, they even

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**Patients with major depressive disorder, borderline personality disorder, and substance abuse disorder have problems with emotions**

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seem to be overly sensitive to positive ones. They may not have general deficits, but suffer from difficulties in managing negative emotions.

**Emotional intelligence – an emerging topic in psychological research**

Salovey and Mayer were among the first to use the term “emotional intelligence” to refer to people’s ability to deal with their emotions. Emotional intelligence can be described as a set of interrelated abilities concerning one’s own emotions as well as emotions in others. Four dimensions can be distinguished: a) perceiving emotions, b) using emotions to facilitate thought, c) understanding emotional information, and d) regulating emotions.

We focused on emotional abilities in patients with major depressive disorder, substance abuse disorder, and borderline personality disorder. In all of those disorders emotional problems apparently play a major role. We compared the three groups and a sample of healthy controls. In detail, we studied 31 patients with unipolar depression, 19 patients with borderline personality disorder, and 35 patients with a substance abuse disorder (90% alcohol abuse), plus 94 individuals who had never been diagnosed or treated for mental

problems and who did not meet the relevant diagnostic criteria.

All of them completed the German version of the Mayer-Salovey-Caruso Emotional Intelligence Test (MSCEIT; Steinmayr, Schütz, Hertel, & Schröder-Abé, 2010). The MSCEIT comprises 141 items which are part of eight tasks (two for each dimension). For example, to assess the ability to perceive emotions, people are asked to identify emotions expressed in photographs of peoples’ faces as well as feelings symbolized in designs and landscapes.

**Emotional deficits in persons with borderline personality disorder**

The core symptom in the diagnosis of borderline personality disorder is affect dysregulation. Patients show marked impulsivity, frequent mood swings, unstable relationships, and self-

destructive tendencies. Another particular feature is the ability to identify negative and positive emotions very quickly. Because of their high sensitivity to emotional expressions, borderline patients can detect even subtle expressions of emotions.

Like the depressed sample, these patients achieved lower overall emotional intelligence scores than non-clinical controls. Compared with non-disordered individuals they were less skilled at understanding emotional information. This result is in accord with the fact that those patients experience various emotions simultaneously, but have problems in separating and identifying those emotions. Results also confirmed our hypothesis that the patients would have difficulties in regulating emotions. It can be assumed that poor understanding of the meaning of emotions handicaps a person in regulating mood (Mayer & Salovey, 1997). Surprisingly, the patients did not achieve above average results in emotion perception. We reason that this is due to the fact that time was not controlled. We assume that in situations with time pressure, the patients should excel.

**Emotional deficits in persons with substance abuse disorder**

Continued and pathological use of psychoactive substances (e.g., alcohol, cannabis, or nicotine) results in neuro-chemical modifications, which affect memory, learning, and impulse control. We found substance



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### There is an increasing emphasis on emotions in psychotherapy

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abuse patients to show severe impairment across a wide range of emotional abilities such as using emotions to facilitate thought, understand emotion information, and regulating emotions. Those patients did not show particular problems in perceiving emotions. Again, different results may be obtained when speed is an issue. The results confirm the assumption that substance abuse leads to serious problems, for instance affect instability. Patients with substance abuse disorder show the largest impairments in emotional abilities.

#### **Overall picture: Several symptoms of mental illness are related to emotional problems**

Patients with major depressive disorder, borderline personality disorder, and substance abuse disorder have problems with emotions. Deficits in the ability to regulate emotions and to understand emotional information seem to be the most conspicuous characteristics in patients with mental disorders. Patients with different mental disorders vary regarding their specific emotional deficits.

When focusing in detail on persons with mental disorder, we found variation in terms of the specific deficits, e.g., patients with depressive disorder had significantly less difficulties in understanding emotional information than persons with borderline personality disorder or substance abuse disorder. Persons with substance abuse disorder showed the largest impairment. Emotional deficits seem to be more than a general phenomenon in mental illness.

#### **Need for tailored treatment programs**

The new insights in emotional deficits associated with mental disorder may help patients, therapists, relatives, and friends to understand, explain, and cope with symptoms. There is an increasing emphasis on emotions in psychotherapy. So far, research has emphasized that emotion regulation is the most important dimension of emotional competence that impinges on mental health. Our results illustrate that the ability to understand emotional information is another crucial factor in healthy everyday functioning. Therefore it should receive more attention in therapy. Knowledge on disorder-specific deficits can be used to improve existing treatment and to develop new, tailored programs which integrate interventions designed to improve emotional skills. Emotional abilities are a relevant factor in health and well-being.

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