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Coping Intelligently

Emotional Intelligence and the Coping Process

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Although it can be said that people cope with life events, coping is primarily a response to the emotions, particularly negative emotions, elicited by these events. This is because the meaningfulness of external events is, to a large extent, a function of their ability to arouse emotion. Of course, not all responses to emotional arousal are equally successful. At one extreme, there are people who consistently have difficulty coping with negative outcomes. These individuals never seem to get over the bad events in their lives. In contrast, there are those who even after the most saddening experience readily bounce back and move forward. These individuals seem almost happy to learn from life’s setbacks, and they carry with them a heartening wisdom that inspires others to cope more effectively. What distinguishes the resilient person from the person who seldom copes effectively? The answer, we believe, has to do with emotional competencies—individuals differ in how well they perceive, express, understand, and manage emotional phenomena. These emotional competencies are components of a broader construct we have termed emotional intelligence. In this chapter, we will argue, specifically, that emotional intelligence influences responses to emotional arousal and, as a result, plays a significant role in the coping process.

Emotional intelligence involves the ability to monitor one’s own and others’ feelings and emotions, to regulate them, and to use emotion-based information to guide thinking and action. The competencies involved in emotional intelligence include (a) appraising and expressing emotions in the self and others, (b) assimilating emotion and thought, (c) understanding and analyzing emotions, and (d) regulating emotions to promote emotional and intellectual growth. In this chapter, we will apply the concept of emotional intelligence to the coping process. First, we will review a framework
for understanding emotional intelligence and its component competencies. Then, we will describe how emotional intelligence can help us to understand coping strategies such as rumination, the elicitation of social support, and the disclosure of feelings.

The Origins of Emotional Intelligence

Most of us can think of individuals who seem to have considerable analytic intelligence—the skills measured by most intelligence tests—who nonetheless have great difficulty succeeding in their personal relationships or at work. It is clear that more is needed to succeed in life than possessing what psychologists have traditionally called “intelligence” (i.e., reasoning and analytical abilities in verbal and performance domains). Various non-intellectual characteristics may contribute to performance, including achievement motivation, self-efficacy, and other traits. Even in the realm of intelligence, however, there are other skills not tapped by traditional verbal and performance measures that clearly have something to do with emotions such as empathy, understanding the impact of one’s behavior on other people’s emotions, and the ability to regulate feelings. Some individuals may be high in emotional intelligence, others uniformly low, but a third, equally interesting, group shows great abilities on some aspects of emotional intelligence but profound deficits in others.

American psychology—like psychology in much of the rest of the world—has had a long tradition of considering thinking and feeling as polar opposites. On the one hand, there is passion, but on the other hand, reason. And traditionally, passion has not been thought of as something that assists reason. One traditional view of emotions in Western thought characterizes them as chaotic, haphazard, irrational, and immature. This view is reflected in the writings of classic scholars of 2000 years ago as well as the authors of American textbooks in psychology in the present century. For example, writing in the first century, B.C., Publilius Syrus exclaimed, “Rule your feelings, lest your feelings rule you.” Similar sentiments can be found in many psychology textbooks of the twentieth century as well. For instance, P.T. Young (1, 2) described emotions as causing “a complete loss of cerebral control” and containing “no trace of conscious purpose” (pp. 457–458). Moreover, according to Young, emotions represent an “acute disturbance of the individual as a whole” (2, p. 263). Similar ideas can be found in a popular text by L. F. Schaffer and his colleagues (3), who noted that emotions are “a disorganized response, largely visceral, resulting from the lack of an effective adjustment” (p. 505).

Our view is that emotion and intelligence are not mutually contradictory. Rather, the emotional intelligence approach argues that emotions are adaptive and functional, and that they serve to organize cognitive activities and subsequent behavior—the passions can serve reason. This idea was captured by two early experimental psychologists, Robert Leeper and O. H.

Mowrer. In an influential and often-quoted paper, Leeper (4) noted that emotions “arouse, sustain, and direct activity” (p. 17). Mowrer (5) went one step further in claiming that “the emotions are of quite extraordinary importance in the total economy of living organisms and do not deserve being put into opposition with ‘intelligence.’ The emotions are, it seems, themselves a higher order of intelligence” (p. 308).

What is the source for the idea that emotions are a higher order of intelligence? We would argue that this perspective originated with Sir Charles Darwin, who in 1872, authored his classic book, *The Expression of Emotions in Man and Animal*. Darwin (6) argued that emotions are intelligent for two reasons: (a) they energize behavior that is required in certain situations (e.g., it is easier, if you are an animal in the wild, to run away when you feel fear than when you feel joy), and (b) they involve a signaling and communication system that has survival value for the other members of a species (e.g., the bared teeth of an angry face signal to others that an attack is imminent). Humans, of course, make use of this signaling system as well. For example, an infant will approach an unusual toy if he or she looks at mother and mother smiles, but will back away from the toy if mother looks fearful. If mother wears no particular facial expression (known as the “still face”), the infant may act quite distressed. For both animals and humans, this process is called social referencing, and it is an example of the intelligent use of emotional expressions.

Of course, more recent writers also have captured this idea that our emotions can be intelligent. A prominent example is Howard Gardner, who has identified the *intraperpersonal intelligences* as one of seven areas of competence in his *multiple intelligences* perspective. In his book, *Frames of Mind*, Gardner (7) includes in the definition of intraperpersonal intelligences “access to one’s own feeling life—one’s range of affects or emotions: the capacity instantly to effect discriminations among these feelings... label them... enmesh them in symbolic codes... and draw upon them as a mean of understanding and guiding one’s behavior” (p. 239). Clearly, although the phrase emotional intelligence had not been used before 1990, the idea of an emotional intelligence has some history in psychological thought.

The Emotional Intelligence Framework

In 1990, two of the authors of this chapter (8) published a paper titled, simply, “Emotional Intelligence,” in which we first described a framework for understanding the competencies involved in this domain. This framework emphasized competencies relevant to appraising and expressing emotions, regulating emotions, and using emotions in thought, in problem-solving, and to motivate behavior. We defined emotional intelligence at that time as “the ability to monitor one’s own and others’ feelings and emotions, to discriminate among them, and to use this information to guide one’s thinking and actions” (p. 189).
In more recent work (9), we have refined this definition somewhat and have arrived at a model of emotional intelligence that includes four essential components:

1. Perception, appraisal, and expression of emotion.
2. Emotional facilitation of thinking.
3. Understanding and analyzing emotions; using emotional knowledge.

Appraisal and expression include both verbal and nonverbal behavior. First, we need to understand what we are feeling, and we need to be able to communicate our feelings using words and nonverbal expressions. Moreover, we need to understand the feelings of other people—both in their words and in their expressions. And, we need to be able to feel the emotions of other people, that is, to empathize with them. Second, we must recognize that emotions prioritize thinking, shape memory, create different problem-solving perspectives, and facilitate creativity. Third, to make use of our emotions, we must have a rich emotional vocabulary, and we must be able to understand emotional nuances, blends of feelings, and transitions from one emotion to another. Finally, we need to learn to regulate our emotions so that they are most appropriate to the task or situation at hand, and we need to learn to regulate the emotions of other people, to cheer them up when they are down, to engage them when we want them to listen to us. Although these skills are generally desirable, emotional intelligence should not be equated with character or morality. Emotional skills can also be used toward nefarious ends: sociopaths, for example, can be especially skilled at regulating the emotions of other people (10, 11).

What do we mean when we say that one can use emotions adaptively to help in problem solving and reasoning? A number of investigators (e.g., 12, 13) have argued that emotions create different mental sets that are more or less adaptive for solving certain kinds of problems. That is, different emotions create different information-processing styles. Happy moods facilitate a mental set that is useful for creative tasks in which one must think intuitively or expansively in order to make novel associations. Sad moods generate a mental set in which problems are solved more slowly with particular attention to detail using more focused and deliberate strategies. Palfai and Salovey argued that these two different information-processing styles (i.e., intuitive and expansive versus focused and deliberate) should be effective for two different kinds of problem-solving tasks—inductive problems like analogical reasoning and deductive logical tasks, respectively.

In order to test this idea, Palfai and Salovey (12) induced happy and sad moods in groups of college students by asking them to watch emotionally evocative films. They then asked them to solve analogical or deductive reasoning problems. The happy students were faster in solving the inductive (analogue) problems, and the sad students were faster in solving the deductive problems. These results indicate that certain kinds of moods make it easier to solve certain kinds of problems. The truly emotionally intelligent person may be aware of this phenomenon and may be able to adjust his or her mood accordingly. For instance, one of the authors of this chapter has difficulty writing scientific papers when he is "too" happy, and he often calms himself before starting a writing project by listening to sad music.

Attempts to Measure Emotional Intelligence

Although a great deal has been learned about the measurement of emotional intelligence over the past few years, there is still much work to be done. A valid measure of core emotional intelligence likely requires multidimensional instruments that rely on tasks and exercises rather than on self-report. Mayer, Caruso, and Salovey (14; see also 15) have developed a Multidimensional Emotional Intelligence Scale (MEIS) that relies on pencil-and-paper or computer-based emotion-related tasks rather than self-assessments. Some of the tasks included on the MEIS involve identifying the consensual feelings suggested by colors, abstract artistic designs, and pieces of music. In a study we did some years ago, the ability to identify the emotions suggested by colors and artistic designs correlated with traditional ratings of empathy (16). We have been refining our measurement techniques, examining such issues as reporting styles of emotions, alternative methods of assessing correct responses, and new tasks to measure emotional intelligence (17). The MEIS represents the culmination of this work.

Even before pursuing ability measures of emotional intelligence, we had been developing self-report measures of certain aspects of emotionally intelligent processes. The first three levels of emotional intelligence (perception, facilitation of thinking, and understanding) are generally best measured with ability tasks. The final level, which involves management and regulation, can benefit from the associated use of self-report measures for several reasons (see also 18). First, psychologists have come late to studying self-management of emotion, and it is important to understand such issues as the kinds of self-management people engage in, the relation between self-management and emotion, and the potential benefits and drawbacks of self-management. To accomplish this, we began examining the meta-, or reflective, experience of mood (19). Presently, there are two scales that we employ that represent meta-experience: one is a trait scale (20), and the other is a state scale (21). The remainder of this chapter examines some of the findings and implications emerging from this program research.

A Hierarchy of Emotional Coping

The importance of meta-mood skills and processes perhaps becomes most apparent under conditions of stress and coping, when individuals are
forced to respond to emotions elicited by external events. To facilitate the application of emotional intelligence to the coping process, we have designed a hierarchy of emotional competencies that includes those components of emotional intelligence most relevant to coping. The Emotional Coping Hierarchy, depicted in Figure 7.1, describes three levels of emotional intelligence. On the first level are the basic emotional skills of perception, appraisal, and expression. On the second level are the two more sophisticated subcomponents of emotional knowledge: understanding and analysis. The third level of the hierarchy is reserved for emotional regulation. We believe that the entire hierarchy of emotional coping skills must be sufficiently developed and employed for successful coping to take place. A weakness lower in the hierarchy will interfere with more sophisticated skills and as a result will stall the coping process.

In one study, we have investigated the hypothesis that adapting successfully to a stressful experience depends, in part, on the capacity to attend to, discriminate among, and regulate feelings. Goldman, Kramer, and Salovey (22) conducted a prospective study examining whether beliefs about one's moods, in particular, the belief that one can repair negative moods, are related to physical health complaints. The reasoning behind this study was that individuals who cannot repair or regulate their feelings may look to others for help in doing so. As a result, they may be more likely to seek the attention of a physician when they are feeling stressed because they do not know how to regulate these feelings themselves. Such individuals may simply be using the health care system as a mood regulation strategy. Of course, it is also possible that these individuals are actually more likely to become physically ill when under stress.

Goldman et al. (22) assessed 134 student volunteers at three different times during the semester: at the start of the year, during midterm examinations, and during final examinations. At these times, we administered the Trait Meta-Mood Scale (TMMS) as well as measures of stress, physical symptoms, and health center visits. When we divided the sample into three groups of people (those with a high degree of skill in repairing negative moods, those with average skills in this area, and those with low skills), interesting trends in health center visits emerged, depending on the level of stress people experienced. When stress was low, the three groups differed very little. But, as stress increased, those individuals who said that they cannot easily regulate their feelings were more likely to visit the health center, and those individuals who were good at repairing negative moods actually visited the health center less often.

Emotional Intelligence and the Coping Process

To date, few empirical studies have been carried out specifically focused on the impact of emotional intelligence on coping. Although we believe that emotional intelligence plays an important role in coping processes, little direct empirical evidence exists to support our claim. However, to facilitate our argument that the components of emotional intelligence are related to coping skills, we will discuss the links between emotional intelligence and three processes currently believed to be linked with coping skills: rumination, social support, and the disclosure of traumas.

Ruminative Coping

The experience of stressors is an unavoidable part of life. However, individuals differ substantially in how they respond to these stressors. One of the most natural responses to a stressful event is to spend time thinking about it. Some people give very little thought to such events, others give too much. Those people who are inclined to think excessively about the stressful event are said to be engaged in ruminative coping. Ruminination is defined as "passively and repetitively focusing on one's symptoms of distress and the circumstances surrounding those symptoms" (23). Characteristics of ruminative coping include focusing on the symptoms of depressed mood, worrying that one will never feel better, and being unable to understand why one is feeling depressed. Caught up in ruminative thoughts, the individual often isolates herself from others. The current conceptualization of rumination is derived from Nolen-Hoeksema's (24) response styles theory of depression. The response styles theory suggests that people establish patterns of responding to depressed mood, and that these styles determine the success with which they will cope with depressive symptoms. Ruminination, as a style of coping, tends to intensify and lengthen periods of depressed mood and, in turn, leads to greater difficulties in coping.

A number of laboratory and field studies have explored the association between ruminative coping and depression. These studies have supported the prediction that rumination maintains depressed moods, whereas distraction (i.e., focusing on external stimuli) can lead to a decrease in negative
affect. In one study, for example, participants who engaged in a ruminative task showed maintenance of an induced negative mood, whereas participants who were led through an engaging distraction task were able to ameliorate their depressed mood (25). In the field, Nolen-Hoeksema and Morrow (26) explored the effect of ruminative coping following the 1990 Loma Prieta earthquake in California. They found that people who had a more ruminative response style before the earthquake exhibited higher levels of depression 10 days after the event. More recently, Nolen-Hoeksema, McBride, and Larson (23) found that newly bereaved men who had demonstrated greater tendencies toward ruminative coping before their loss experienced longer and more severe periods of depression after their partner's death. These are but a few of the studies that lend support to the hypothesis that rumination is a maladaptive coping strategy. In other words, individuals inclined to ruminate are apt to experience more intense and longer-lasting periods of depression when faced with stressors and, as a result, they do not cope effectively.

Given what we know about the relationship between rumination and coping, where does emotional intelligence fit in? The most basic component of emotional intelligence is the ability to appraise and express emotions accurately. This component involves the ability to recognize emotions within oneself and to identify accurately what one is feeling. This also encompasses the ability to express and articulate one's feelings and to define what these feelings mean (9). People tend to vary with respect to how much attention they give to their emotions and, in turn, the clarity with which they perceive their moods. Ruminative responses to depressed mood have been described as "a type of self-focused attention, an emotion-focused attention" (27, p. 332). Using vocabulary from the emotional intelligence literature, we would argue that individuals who ruminate are those who exhibit tendencies to focus excessively on the perception and appraisal of their mood states. This excessive amount of attention may be motivated, in part, by an inability to make sense of one's emotional experience and the need for some kind of meaning-making activity (cf. 28, 29). Although a moderate amount of attention to one's mood may be both adaptive and advantageous, high levels of attention may, in fact, be counterproductive in the act of coping.

We believe that successful processing of intrusive thoughts may depend on skills related to the activation, experience, and modification of feelings. Salovey et al. (20) examined the relation of individual differences in beliefs about attention to, clarity, and regulation of feelings (as measured by the Trait Meta-Mood Scale) to sustained negative affect and the intensity, insensitivity, controllability, and negativity of ruminative thoughts that followed a distressing stimulus. In this study, we asked 78 student volunteers to come to the laboratory and told them that they would be participating in two studies, one involving watching television and a second one on the stream of consciousness. First, a film clip was presented. The video clip was a 12-minute segment of a documentary on drinking and driving. The film contained graphic footage of serious automobile accidents and the emergency room/hospital sequences that followed. Victims also described the nature of their traumas.

At this point, the experimenter described the supposed purpose of the "second experiment" and the rationale of the thought sampling procedure. The instructions asked subjects to (a) focus on whatever thoughts, feelings, and images they were experiencing at the time of a prearranged signal, (b) jot down a few select words to describe the thought on a page in a thought sampling record, and (c) answer the questions that appeared on the bottom of each page with regard to the recorded thought. Four items were included at the bottom of each page that asked subjects to rate the positiveness, intensity, insensitivity, and controllability of their recorded thoughts.

Watching the drunk driving film had a powerful impact on mood. Our participants reported relatively high levels of positive mood before the film, but mood reports just after the film dropped substantially. In addition, recovery of positive mood by the end of the experiment (after the thought sampling task) was best predicted by the Clarity subscale of the Trait Meta-Mood Scale (TMMS). Those individuals who reported that they were usually very clear about their feelings were more likely to rebound from the induced negative mood.

To analyze the ruminative nature of the thought samples, participants were divided into three groups based on their scores on the Clarity subscale of the TMMS. Those individuals whose scores fell into the upper quartile were considered to possess high emotional clarity. Those who scored in the lower quartile were considered to possess low clarity. Scores for the remaining subjects were classified in the average range. Individuals who experienced their moods clearly showed a reduction in their negative thoughts over time. The average and low Clarity individuals, in contrast, continued to ruminate. Thus, it appears that individuals who reported being very clear about their feelings experienced a significant decline in ruminative thought over time when compared to individuals who reported being unclear about their moods. These results support our hypothesis that clarity in discriminating feelings is important in mood repair following a negative and/or stressful event.

Swinkels and Giuliano (30) conducted a similar series of studies on the monitoring and labeling of mood states. These researchers describe mood monitoring as the tendency to focus attention on one's mood and to scrutinize one's mood state, analogous to the Attention subscale of the TMMS. They define mood labeling as the ability to identify and give a name to the mood that is being experienced, a construct very much like the Clarity subscale of the TMMS. They suggest that mood monitoring allows a person to track the progress of his or her moods. However, they note that mood monitoring may not always be productive. Although general awareness of one's moods is adaptive, when the process of mood monitoring becomes more extreme or vigilant, it may be harmful to the individual's emotional well-being. Mood labeling is different from mood monitoring in that being
able to label a mood suggests that the individual has reached some degree of understanding of the mood itself. In a sense, the act of mood labeling allows the individual to identify the mood and use what is known about the mood to help carry out future thoughts and behaviors.

In their investigation of mood monitoring and labeling, Swinkels and Giuliano (30) found support for their hypothesis that mood monitoring (i.e., attention to negative emotions) leads to greater rumination than does mood labeling. They found that higher scores on a measure of mood monitoring were significantly related to a greater amount of ruminative thinking displayed in free responses to questions such as, “List some of the specific strategies that you use to cheer yourself up” (30). Scores on a measure of mood labeling, however, were not predictive of rumination. These findings converge with those of our study (20), in which depression was shown to be correlated with high attention to emotions but low clarity in discriminating feelings. Recall that Salovey et al. (20) found that clarity predicted the recovery of a positive mood following a stressful event induced in the laboratory. Furthermore, individuals who reported that they were able to experience feelings more clearly tended to show a decrease in ruminative thought over time. Gaining emotional clarity appears to aid the individual in breaking out of a ruminative cycle.

Together, these studies suggest that excessive attention to negative moods leads to rumination, but that clarity in labeling one’s feelings short-circuits ruminative processes. This ruminative process, if it is not kept in check, may maintain negative moods and hinder the coping process. Thus, it is not attention, per se, that is maladaptive. Instead, it is the inability to find clarity and understanding that leads to poor coping. Gaining clarity and labeling one’s emotions are critical first steps in enabling a person to repair a negative mood state (30).

Successfully monitoring and appraising one’s mood does not, however, forge a direct path to a healthy resolution of the coping process. When an individual comes to recognize that his or her experience of negative emotionality has reached the point of diminishing returns, he or she must begin regulating the experience. As Nolen-Hoeksema and colleagues have demonstrated, brooding over failures and drowning in sorrows leads only to greater depression. A healthier strategy would be to control more carefully how one thinks about a negative life event and to choose to act or think in ways that would help one feel better. This strategy comprises the component of emotional intelligence referred to as regulation, or the ability to engage reflectively or detach from an emotion depending upon its informativeness or utility (9). Adaptive regulation of emotion should play a central role in the process of coping more generally and the experience of rumination more specifically. Emotionally intelligent individuals should be more adept at directing their thoughts away from uninformative negative emotions.

Nolen-Hoeksema and Morrow have argued that one of the most effective approaches for disengaging from a ruminative coping cycle is distraction (25, 31). People who are trapped in a ruminative coping process are likely to think about and focus on their negative moods without doing anything to relieve their symptoms (23). Negative moods that are maintained by ruminations appear to interfere with the individual’s ability to engage in successful problem solving (32). Individuals who are skilled at regulating emotions, however, should be better able to move to repair their emotional state. Lyubomirsky and Nolen-Hoeksema (32) demonstrated that when people use pleasant activities to relieve their moods, they show better problem-solving skills and fewer negative thoughts. The ability to manage emotions in oneself by moderating negative emotions and enhancing pleasant ones is considered one of the most advanced skills within the reflective regulation of emotion (9).

Engaging in distraction is different, however, from avoiding negative affect all together. A careful balance between the experience of the emotion and the use of distraction must be reached in order to achieve successful coping. An additional component of reflective regulation is the ability to understand emotions without exaggerating or minimizing their importance (9). An emotionally intelligent individual must be able to determine when it is appropriate to engage in distraction behaviors and what types of distraction behaviors have functional value. An emotionally intelligent strategy would be to take advantage of opportunities for healthy distraction, such as seeking out others for social support. Nolen-Hoeksema suggests that the more socially isolated a person is, the more opportunities there will be to ruminate. Indeed, the availability of high quality social support, among other things, may influence the individual’s tendency to ruminate (24). The role of emotional intelligence in the development and use of social support is discussed in the next section.

Social Support

As we have begun to see in the discussion of rumination, social support appears to play a critical role in successful and healthy coping. To be sure, the literature on social support and coping is vast, and the resounding conclusion is that social support has a direct and immediate impact on one’s ability to cope with stressors (see 33 for a review). We would like to argue that emotionally intelligent individuals are more likely to gain access to rich social support networks and that they are more likely to rely on these networks during times of stress.

Researchers have described two ways that social support benefits individuals: directly and as a buffer against the effects of stressful life events (34, 35). The direct effects hypothesis suggests that social support enhances mental and physical health regardless of the amount of stress present in a person’s life. The buffering hypothesis, on the other hand, suggests that social support intervenes between the stressful event and the stress experience; social support helps the individual avoid stress-elicited health problems. Research indicates that both hypotheses are valid—social support has
positive direct and buffering effects on psychological adjustment to stressful events, recovery from illnesses, and even mortality risk (36, 37, 38, 39).

The health-enhancing consequences of social support were illustrated by Spiegel et al. (40), who followed women diagnosed with breast cancer for one year and found that patients who were randomly assigned to a cancer support group reported significantly more energy, less tension, less confusion, less fatigue, and fewer ineffective or maladaptive coping strategies. These findings have been replicated by other investigators (e.g., 41, 42). Similarly, a review of 26 longitudinal studies found that being married (a powerful source of social support) is negatively related to mortality and to the recurrence of symptoms in myocardial infarction and coronary artery disease patients (43). Social support also is important for those who are not themselves sick, but who care for the sick or elderly. Better caregiver well-being has been associated with greater social support and activity (44, 45). And finally, social support has a direct effect on the immune system. Researchers have found that the cellular immune response system is suppressed in lonely individuals (46, 47), and at least one study has provided direct evidence that the feelings of belonging and security brought about by social support facilitate the recovery of sick individuals by mobilizing their immune systems (48). These findings convincingly demonstrate that social support critically influences the effectiveness with which individuals cope.

We would argue that emotional intelligence predicts whether individuals will have developed a strong social network, and whether they will seek out social support during times of great stress. Along these lines, social support researchers have speculated that individuals differ in their utilization of social support. That is, some people may be better able to develop and utilize social support networks (49). Consider, for example, the development of social support networks among children. Parenting has a strong effect on a child’s social engagement. Kahlen and colleagues (50) have found that when fathers are emotionally volatile, their children’s play tends to be disengaged. But when fathers are warm and emotionally responsive, their children exhibit more self-disclosure during play. Similarly, children who openly express positive feelings toward their peers more often have emotionally communicative mothers (50). As a result of parenting, then, it is likely that a child develops a style of social interaction that either facilitates or undermines the development of a strong social support network. The consequences of having or lacking social support can be substantial. In one study, how children were perceived socially by their peers in the third grade was a better predictor of mental health problems over the next 11 years than grade-point averages, IQ scores, teachers ratings, absenteeism, and nurses’ ratings of physical health (51). Furthermore, children who report the most loneliness tend to be those who are viewed as less prosocial and more aggressive by both teachers and peers, and young children who are rejected by their peers are significantly more lonely than other children (52).

We believe that children’s development of social support illustrates the role of emotional intelligence in this area. Specifically, children learn from role models how to process and regulate emotional information and experiences. The emotional intelligence that emerges from this learning process influences how a child interacts with her peers, which determines how successful she will be at developing a supportive group of friends (9). Gottman and his colleagues have made a similar point in their research on meta-emotion (53). They find that parents’ awareness of their own sadness and tendencies to coach their children about their anger have a considerable impact on children’s emotion regulation abilities. At age five, children whose parents possess these meta-emotional abilities show less negative play styles and physiological distress. At age eight, these same children show fewer behavioral problems, higher academic achievement in mathematics and reading, and better physical health. Thus, when emotionally intelligent behavior is modeled, children are better equipped to form essential social ties. As we have discussed, the social ties have positive direct effects and will provide a buffer against stress and negative life events.

Of course, emotional intelligence influences adults’ social skills and relationships as well. For example, we have argued elsewhere (54) that people who help others may be more likely to receive social support later when they need it. Ironically, this suggests that altruism can be used as a means of emotional self-regulation—individuals who help others may incur the short-term costs of helping in order to build their long-term social resources. Those who are skilled at such a strategy are more likely to work well within a social network and to acquire and maintain close relationships. As a result, they are more likely to benefit from the positive effects of social support, especially when they are attempting to cope with a negative event. Clearly, many people have good social support networks. It seems possible, however, that emotionally intelligent individuals will be more likely to build, maintain, and rely on social networks because of their skills. Emotional intelligence not only enables individuals to build solid social ties, but it also enables them to recognize the emotional benefits of utilizing their social networks in times of stress. Thus, emotionally intelligent individuals should be more likely to seek out their family (if not too toxic) and form and maintain friendships as a means of coping because they understand how important emotional sharing and support is in the coping process.

To summarize, emotional intelligence equips individuals with many of the skills that are needed to build solid and supportive social networks. Understanding that social support provides an emotional buffer against stressful events, these individuals will be more likely to utilize their social resources throughout the coping process. As a result, emotionally intelligent individuals are more likely to experience negative life events against a backdrop of social resources.
Emotional Disclosure

The importance of disclosing emotional experiences as part of the coping process was foreshadowed in our discussions of rumination and social support. Reaching out for social support characterizes effective coping. Internalizing emotions through ruminative thinking does not. Pennebaker (see chapter 4 in this volume) has studied the effects of emotional disclosure extensively and finds that the simple act of disclosing emotional experiences in writing, even anonymously, improves individuals’ subsequent physical and mental health (see 61 for a review). For instance, students assigned to write about a traumatic emotional experience subsequently made fewer health center visits and received higher grades than students assigned to write about a trivial topic (e.g., 55, 56). The benefits of emotional disclosure also include broadly enhanced immunological functioning (e.g., 57), and many studies have observed decreases in self-reported physical symptoms, distress, and depression (e.g., 58; cf. 57, 59). These impressive findings have proved robust across dozens of studies conducted by several investigators and among such disparate populations as college students, maximum security prisoners, and recently unemployed professionals (see 60 for a meta-analysis).

How exactly does writing or talking about negative life events facilitate coping? The answer to this question is not entirely clear. However, Pennebaker (61) offers two possible models of disclosure’s underlying mechanism. The inhibition model of psychosomatics is drawn from both psychodynamic and psychophysiological theorizing and research. This model suggests that inhibition is a form of stressful, physiological work that burdens and hence impairs both physical and mental health. Emotional disclosure lifts the burden of inhibition and thus improves health. The cognitive changes model, on the other hand, emphasizes the benefits of cognitive housekeeping. The individual’s thoughts and feelings about a traumatic experience become progressively more organized through repeated disclosures. This cognitive housekeeping is essential because traumatic life events dramatically alter our experiences of the world—they may leave us victimized, on our own, terminally ill, or otherwise vulnerable. The individual must struggle to restructure his or her view of the world in order to assimilate such changes. The disclosure of traumas facilitates this process. Through the structure of language, disturbing experiences become more coherent and are given a meaningful place in the individual’s world.

The mind thus adapts and moves on less cluttered.

Although the inhibition model is theoretically consistent with the beneficial effects of disclosure, evidence linking emotional disclosure to decreases in inhibition (and, in turn, to improved health) is lacking. In contrast, the cognitive changes model is consistent with related research and is quickly gaining direct empirical support of its own. Consider, for instance, Wegner’s work on ironic processes (e.g., 62), which has shown that attempts to inhibit a thought actually increase the availability of that thought. This ironic result presumably occurs because the repressed thought is maintained in order to determine how successful the act of repression has been. Wegner’s research suggests that repression of a traumatic experience would only serve to maintain thoughts of the experience. This conclusion is consistent with the cognitive changes model—even if a person tries to repress a traumatic experience, the experience will continue to challenge the thoughts and feelings until it is resolved adequately. Added support for the cognitive changes model comes from Pennebaker and his colleagues (63, 64), who have provided convincing evidence that specific cognitive changes mediate the benefits of emotional disclosure. Written disclosures characterized by increased insight and causal thinking are most apt to lead to improved physical health. Similarly, health improves most when individuals use the appropriate balance of emotion words in disclosing traumas (i.e., a moderate amount of negative emotion words accompanied by a greater amount of positive emotion words). These contingencies make it clear that a person must confront, make sense of, and integrate a trauma in order to cope effectively.

Emotional intelligence is closely related to aspects of personality involving openness to experience and the repression of thoughts and feelings. It is not surprising, then, that we can apply the emotional intelligence framework to emotional disclosure. Individuals must be able to recognize that they are experiencing emotions that require a response. Those who are unable to perceive and appraise their own emotional states accurately may fail to recognize the origin of their troubles. If so, the coping process will stall, precluding effective emotional disclosure. In our own work, individuals open to emotional experience (even when negative) report lower levels of depression than those who claim to “fight the feeling” or that “everything is okay” (65).

Beyond this basic level, and more particular to emotional disclosure, are how emotional knowledge and the ability to regulate emotion can facilitate disclosure. We believe that the linguistic features characterizing effective emotional disclosure (i.e., insight, causal thinking, and a balance of emotion) reflect a person’s ability to understand, analyze, and actively regulate their emotions. Insight and causal thinking are associated with the understanding and analysis of the emotions surrounding traumatic experiences. People who are able to recognize their emotional responses to a trauma as natural, who can see the trauma and their emotions in the broader context of their lives, and who can make positive attributions about the trauma and their emotions must have a strong sense of what emotions are and how emotions arise from life experiences and, more important, from one’s construal of these experiences. Compared to those who continue to be overwhelmed by their negative life experiences, these emotionally intelligent individuals are more likely to cope effectively. They are more likely to engage in the disclosure process through personal writing (e.g., diaries, journals) and through sharing their thoughts and feelings with friends and family simply because they have the emotional knowledge to do so effec-
tively. Moreover, emotional knowledge should motivate emotional disclosure to begin with, especially when it is understood that writing or sharing is an efficient means of organizing and, thus, regulating one’s emotions.

Pennebaker’s findings complement the research on rumination by demonstrating that the outward, linguistic expression of traumatic experiences facilitates the coping process. Similarly, Pennebaker has observed that individuals naturally turn to others in order to discuss and make sense of negative life events (66), a point that acknowledges that disclosure is more often social than anonymous. Thus, emotional disclosure is closely tied to social support as well as rumination. Recognizing that these three aspects of coping are interrelated helps define the coping process. For example, a person’s social support network, if it is strong, should prevent rumination by inviting the disclosure of negative emotional experiences. We believe that the framework of emotional intelligence further illuminates the interrelationship of these aspects of coping and, in doing so, further defines the coping process. Specifically, the perspective of emotional intelligence is that individuals have skills that enable them to avoid rumination, build and utilize social support, and effectively disclose traumas. In the final section of this chapter, we discuss how the framework of emotional intelligence can be used as a guide to intervene in the coping process, and we further illustrate the common emotional competencies that we believe underlie these aspects of coping.

The Application of Emotional Intelligence

Readers may ask at this point whether the framework of emotional intelligence can be used to intervene to enhance the coping process. Clinicians may wonder if it serves as a useful guide to assessing and treating their clients’ reactions to negative life events. Individuals who are having difficulty coping may wonder if they are handling their emotions “intelligently.” These are questions worth asking. Indeed, we are optimistic about both clinical and personal applications of emotional intelligence. Yet, we feel uneasy about recent claims touting emotional intelligence as the comprehensive solution to a variety of psychosocial problems, from ineffective managerial styles to inner-city turmoil (e.g., 67). Emotional intelligence is certainly no cure-all. Nonetheless, the framework of emotional intelligence appears to be a promising means of addressing some of life’s problems. We envision it as a tool that can help us understand ourselves better, those around us, and the challenges we face. With this caveat in mind, we advocate the judicious application of this tool to instances of problematic coping.

At the very least, individuals and clinicians may benefit simply because the framework of emotional intelligence calls greater attention to the importance of emotional competencies. Sufficient attention is already paid to emotion, but the attention is largely unfocused and dismissive. Emotions often are viewed as renegade mental states that must be reigned in by reason, otherwise, our emotions will “run away with us.” When we separate emotion and reason in this way, setting them at opposition, we fail to appreciate their subtle interrelationship. Emotions are not renegade mental states. Rather, they serve as a compelling and rational source of information about one’s surroundings and inner states, and they play an important role as motivators (4). The significance of emotion, both informationally and motivationally, clarifies the relationship between emotion and reason. It is much more of an alliance than a conflict. The framework of emotional intelligence acknowledges this by refocusing the attention paid to emotion on the emotional competencies involved in negotiating the emotion-reason alliance. Some clinical perspectives are already quite compatible with this view (e.g., 68), attitudes that are less dismissive with respect to emotional competence are creeping into other schools of therapy as well.

Although calling greater attention to emotional competencies is a good first step, we originally proposed the framework of emotional intelligence in order to enumerate and describe specific emotional competencies. Indeed, we believe the framework’s greatest strength is that it establishes a hierarchy of emotional competencies (69). The Emotional Coping Hierarchy should serve as a guide to pinpointing where the process of coping breaks down (i.e., at the level of basic emotional competencies, emotional knowledge, or emotional regulation). Of course, a great deal of empirical work still needs to be carried out, but it is not difficult to imagine how we would apply this framework. For example, imagine that you are acquainted with the following person.

Carol is a writer. She has made a career out of her writing and has little trouble publishing in national magazines and newspapers. She is admired in the profession and has been described as creative, insightful, inspired, and thought-provoking. Carol does most of her writing at home and finds her greatest inspiration in the winter-time, writing in front of the fireplace. Her closest companion and friend is Percy, her dog, who Carol has had since her writing career began over seven years ago.

Late one evening, after eight grueling hours of work, Carol decides to run to the grocery store and treat herself to a midnight snack. She returns one hour later to find her home surrounded by firetrucks and engulfed in flames. Already, the damage is irreparable. Her home has been completely destroyed. Among her lost possessions is a collection of writings, including the only copy of what would have been her first full-length novel. Far worse, Carol learns that the fire and emergency crew arrived too late to save Percy. Her previously fulfilling life has been forever altered. Over the next few weeks, Carol sinks into a deep depression. She is immobilized, constantly revisiting the fire. She feels useless, cut-off from friends and family, and utterly alone. After nearly a year, Carol’s depression has not lifted. She remains withdrawn and has not returned to writing. Gradually, friends’ attempts to comfort Carol grow less frequent. Many give up, weary of having their efforts rejected and unable to understand why Carol remains despon-
dent. Carol knows she cannot go on living this way, and yet she cannot bring herself to move on.

If you knew Carol, what would you do? Where and at what point did Carol’s coping skills break down? These are not simple questions to answer, but you might begin by considering Carol’s ability to assess and identify the emotions she has been experiencing. Thinking back to her work as a writer, you remember people describing her as “in touch with the human experience.” Although her skilled insight into other people’s lives may not generalize to insight into her own life, you might assume that Carol’s basic abilities to perceive and express emotion are superb. Moreover, the quality and depth of Carol’s writing exhibits an amazing ability to understand the way emotions work. You remember, for example, Carol skillfully describing the plight of a widowed young mother on welfare who simultaneously felt intense love and torturous anger toward her dead husband. If Carol is able to label, express, and understand emotions so well, then perhaps her difficulties lie elsewhere. Perhaps Carol’s problem is that she is unable to apply her emotional knowledge and insight when she is the one who needs help. What, if anything, has Carol done to regulate her emotions? Has she written about her emotions? If not, Carol’s failure to cope effectively may stem primarily from her inability to move beyond rumination and on to regulation of her emotional experience.

Although the link between emotional intelligence and coping does not provide a clear strategy for changing Carol’s behavior, it does provide a rationale for deciding where to intervene. After evaluating Carol’s situation, you may decide that she needs to be motivated, in small steps, to resume her writing. Perhaps more immediately, she needs to be distracted. Or maybe she needs help in opening up to her friends and family. The benefit of taking the perspective of emotional intelligence is further illustrated by contrasting Carol with a second woman, Suzanne, who does not share Carol’s writerly insights into emotions. After experiencing a traumatic car wreck, Suzanne immediately distracts herself by jumping back into a busy social life. Nevertheless, she has as much difficulty coping as Carol. It seems that Suzanne refrains from talking to others about the event, not because of an inability to apply emotional skills, but because of an inability to label, express, and understand her emotional experiences. Before attempting to regulate her emotions, Suzanne may need to learn the vocabulary for expressing her emotions. We employ these examples in order to help illustrate how the construct of emotional intelligence is subdivided into specific competencies. When an individual has difficulty coping, the problem may be attributable to one or more of these competencies. Although a solution to the individual’s problem does not follow directly from this perspective, it is clear that a successful intervention must address the level at which emotional skills are weak or lacking.

This discussion raises a very important issue. Emotional intelligence is sometimes described as a trait. That is, you either have it or you don’t. We wish to convey the idea that all people can learn and use emotionally int-
ents, counselors, and other related professionals, we have opportunities to teach children and adults about their emotions all the time.

Although these kinds of programs are popular at the moment, many have not been evaluated adequately. We don’t really know if they work. Optimistic claims are made about the benefits of classes on emotional literacy—that they will reduce drug use, school drop-out, violence in the schools—and we share this optimism. Nonetheless, we will only be able to speak with confidence about the value of these programs after they have been subjected to rigorous, controlled evaluation.

Conclusion

In this chapter we have argued that coping, as a response to emotion, is influenced by a person’s emotional intelligence. Individuals who are emotionally intelligent accurately perceive and appraise their emotional states, know how and when to express their feelings, and can effectively regulate their mood states. These competencies facilitate successful coping through a number of distinct processes—they forestall rumination, prompt emotional insight and disclosure, and often lead to increased use of social support. And, of course, emotional intelligence may influence the coping process in ways beyond these. Although we have discussed substantial evidence that is consistent with this view, more research is needed that directly examines the relationship between emotional intelligence and the coping process. For example, demonstrating that interventions designed to improve emotional competencies do, in fact, foster effective coping would provide particularly compelling evidence in support of our position. In many ways, however, the significance of emotional intelligence is self-evident—problematic coping is often attributable (and quite clearly so) to a breakdown in emotional coping skills. The strength of the emotional intelligence framework lies in its ability to describe a hierarchy of specific emotional competencies that lead to effective coping. These skills are required to respond successfully to emotion. They enable the individual to cope intelligently.

References


