Trait Emotional Intelligence in Maternal Caregiver Groups

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The Pine River Institute (PRI) is an in-patient treatment program for youth, aged 13 to 19 years old, suffering from addiction and concurrent mental health issues. All parents/caregivers commit to a parallel therapeutic process at PRI, primarily involving psychotherapeutic group work.

While youth trait emotional intelligence (TEI) research at PRI has been published, any therapeutic changes in parent/caregiver TEI levels are unknown. This dissertation sought to examine secondary de-identified caregiver TEI data over the duration of their stay. Maternal caregivers provided enough data from March 2020- March 2024 to be examined.

We wished to examine the potential impact on TEI of attendance in PRI's caregiver psychoeducational groups and to examine if attendance in these groups are agents of change for caregivers in adolescent substance or mental health treatment to support the continued clinical importance of

Interventions that improve familial functioning improve substance use treatment outcomes so there is a need for greater evidence-based direction in youth substance services examining how caregivers can contribute to post-program and longer-term outcomes.

caregiver group work.

OBJECTIVES & RESEARCH QUESTION

Why Trait Emotional Intelligence?

Parental trait EI represented a significant antecedent of parental autonomy support and psychological control, confirming that parents with lower trait EI managed their stress and negative feelings by using more controlling strategies in the relationship with their adolescent.

Parents with high levels of trait EI are more able to understand the feelings and needs of their adolescent more naturally. autonomy-supportive parents tend to promote expression of opinions and emotions, facilitating adolescent self-regulation, and therefore developing high levels of trait EI

Why Caregiver Groups?

- "Parental involvement, restriction of mature-related content, parental monitoring, authoritative parenting styles, parental support and knowledge helps with prevention of adolescent substance use"
- "I'm not alone" Parents of children with eating disorders benefitted from virtual support groups
- "Families play a critical role in supporting adolescents with SUDs, and interventions that **improve familial functioning improve treatment outcomes**"

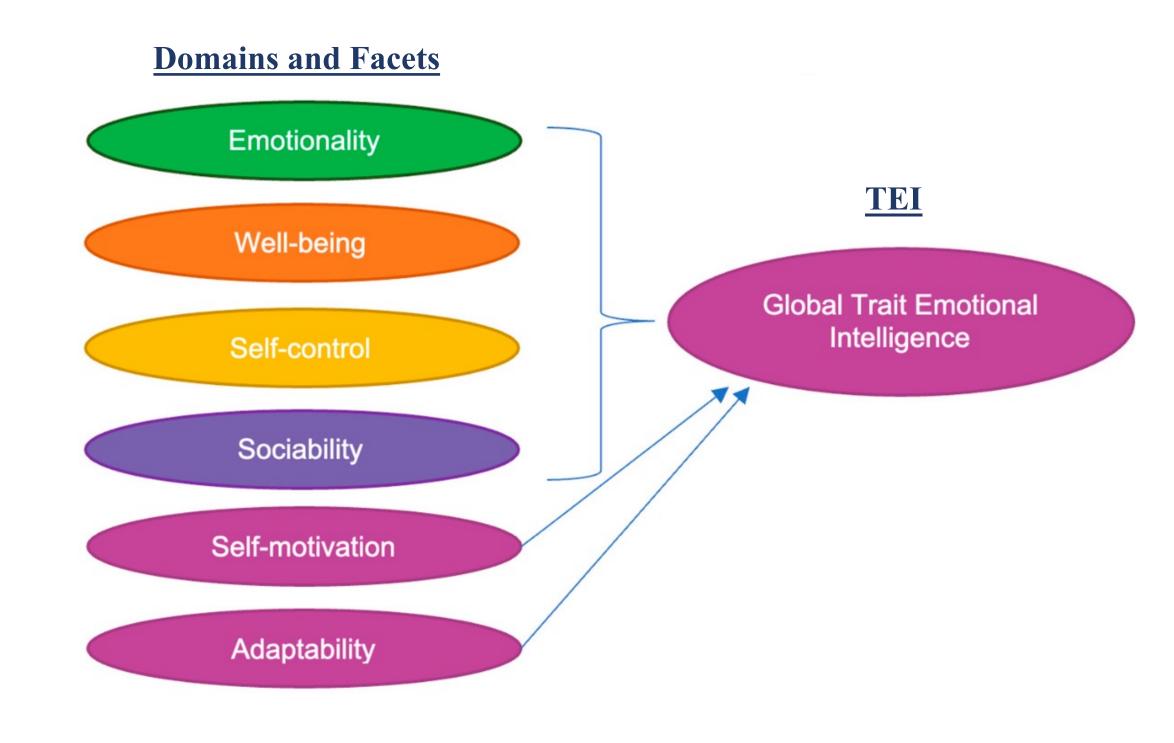
Research Question

Does attendance in caregiver psychoeducational groups improve maternal caregiver TEI scores?

Data was investigated using the maternal caregiver's global TEI score at the beginning and end of treatment, along with the number of hours they had attended psychoeducational groups. Data concerning maternal age, gender of child and length of stay was also considered.

MATERIALS

Trait Emotional Intelligence Questionnaire Short-Form



TEIQue-SF Instructions: Please answer each statement below by putting a circle around the number that best reflects your degree of agreement or disagreement with that statement. Do not think too long about the exact meaning of the statements. Work quickly and try to answer as accurately as possible. There are no right or wrong answers. There are seven possible responses to each statement ranging from 'Completely Disagree' (number 1) to 'Completely Agree' (number 7). Completely Disagree Expressing my emotions with words is not a problem for me. 1 2 3 4 5 6 2. I often find it difficult to see things from another person's viewpoint. 3 4 5 6 1 2 3 4 5 6 On the whole, I'm a highly motivated person. I usually find it difficult to regulate my emotions. 1 | 2 | 3 | 4 | 5 | 6 1 2 3 4 5 6 . I generally don't find life enjoyable. I can deal effectively with people. 1 2 3 4 5 6 I tend to change my mind frequently. . Many times, I can't figure out what emotion I'm feeling. 1 2 3 4 5 6 I feel that I have a number of good qualities. I often find it difficult to stand up for my rights. 1 2 3 4 5 6 11. I'm usually able to influence the way other people feel. 12. On the whole, I have a gloomy perspective on most things. 13. Those close to me often complain that I don't treat them right. 1 2 3 4 5 6 14. I often find it difficult to adjust my life according to the circumstances. 1 | 2 | 3 | 4 | 5 | 6 1 2 3 4 5 6 15. On the whole, I'm able to deal with stress. I often find it difficult to show my affection to those close to me. 17. I'm normally able to "get into someone's shoes" and experience their 1 2 3 4 5 6 7 emotions.

Pine River Psychoeducational Groups

- 1. Weekly online (1 hour)
- 2. Workshop, up to three in-person (16 hours)
- 3. Intensive, in-person (20 hours)

Sample PRI Groups from 2020

Month	Theme	Topics	Trait Emotional Intelligence Factor Self-motivation & Adaptability in all WEEKLY PARENT GROUPS In colour = TEI Domains, Plain = facets
January	Self-awareness	Satir Mandala Defenses - including projection Self-deception (good ted talk on this) Iceberg Johari Window 3 circles - how does your self circle look? Parent - Brad Reedy PRI Masterclass	Well-Being (Self-esteem) Sociability (social awareness) Emotionality (emotion perception)
February	What is love?	Love languages Enmeshment - when love is too much Boundaries 3 circles Parents - narcissistic parenting	Self-Control (stress management, impulsivelness) Emotionality (emotion perception, trait empathy, relationships & emotional expression)

RESULTS

Demographics

37 Maternal Caregivers provided data at both admission & completion of the program

Caregivers were attached to 22 Male and 15 Female youth

Average Age Of 35 Maternal Caregivers = $50.5 (\pm 5)$ Years Old

Average total attendance hours in groups per caregiver

96 (\pm 23) or **1.1 hours** per week

Average Length Of Stay - 86 weeks (\pm 10) or 19.8 months

Global TEI results

Measure	Mean	Standard	Min/max
		deviation	scores
Global TEI at admission	5.13	0.75	2.0/6.0
Global TEI at completion	5.46	0.56	4/6.5
Change in global TEI	0.33	0.54	+1.7/-1.00

Maternal caregiver means at both admission and completion of the PRI program were **higher than the population mean** (4.94)

At completion their mean was 10.5% higher than the population.

Overall, mean global TEI scores for maternal caregivers increased by 0.33 ± 0.54 or 6.6%

26 of 37 caregivers (70%) experienced an increase in TEI score

TEI	Average admission	Average completion	Gain/loss	SD increase (≥ .67)	SD decrease (≤ .67)
Global score	5.13	5.46	0.34 (6.6%)	16 (43.2%)	2 (5.4%)
Note. In terms o	f data distribut	tion, there was	one outlier at ac	dmission, who	scored 2 on globa

Sixteen (43%) maternal caregivers exhibited a significant increase in TEI of at least one standard deviation

Significant bivariate correlations were found (p-value <.001) between **global TEI scores at admittance and completion**.

45% of variability in global TEI upon completion can be attributed to global TEI at admission

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DISCUSSION & FUTURE DIRECTIONS

Time spent in psychoeducational groups did not correlate with maternal caregiver TEI change

What other issues may need to be considered?

Context – Covid-19

Measurement – Engagement Vs. attendance

Intervention Issues – Delivery consistency, community

Additional Factors - Higher TEI admittance scores, higher aged participants, social desirability, family functioning

Create manualized caregiver programming

Use TEIQue-SF as screener to Identify Need

Build clinician group therapy skills to enhance engagement and relationship

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