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The Role of Emotional Intelligence Education in Promoting Psychological Well-being: A Review Study

O. O. OLUBODE, T. A. AZEEZ
University of Maiduguri, Nigeria

Abstract. Emotional intelligence (EI) — broadly defined as the capacity to perceive, understand, manage, and utilise emotions effectively — has attracted considerable scholarly attention over the past three decades. This review synthesises empirical and theoretical literature examining how EI education influences psychological well-being across developmental stages, from childhood through adulthood. Drawing on seminal theoretical frameworks, including Salovey and Mayer's ability model and Goleman's mixed model, as well as evidence from school-based social-emotional learning (SEL) programmes, workplace EI interventions, and clinical applications, the review demonstrates that structured EI education is consistently associated with reduced psychological distress, improved affect regulation, greater life satisfaction, and enhanced interpersonal functioning. Despite methodological heterogeneity in the extant literature, the collective evidence supports the integration of EI education into formal curricula and organisational training as a cost-effective strategy for promoting mental health at both individual and population levels. Recommendations for future research and practice are outlined.

Keywords: Emotional intelligence, Psychological well-being, EI education, Mental health, Social-emotional learning, Affect regulation

1. Introduction

The global burden of mental ill-health has reached unprecedented proportions. According to the World Health Organisation (2022), approximately one in eight people worldwide lives with a mental health disorder, with depression and anxiety disorders representing the most prevalent conditions. Against this backdrop, there is growing recognition that preventive, capacity-building approaches — rather than purely clinical, remedial responses — are essential to address the mental health crisis at scale. Emotional intelligence education has emerged as one such approach, offering a theoretically grounded and practically accessible framework for cultivating the psychological resources that underpin well-being.

The construct of emotional intelligence was formally introduced by Salovey and Mayer (1990), who defined it as a subset of social intelligence involving the ability to monitor one's own and others' feelings and emotions, to discriminate among them, and to use this information to guide thinking and action. This conceptualisation was subsequently popularised and expanded by Goleman (1995), who argued that EI encompasses a broader range of competencies including self-awareness, self-regulation, motivation, empathy, and social skills. Although debate persists regarding the precise boundaries and measurement of EI (Brackett, Rivers, & Salovey, 2011), there is broad consensus that emotionally intelligent individuals are better equipped to navigate stress, maintain meaningful relationships, and sustain psychological equilibrium.

The educational dimension of EI is particularly significant because it implies that these competencies are not fixed traits but learnable skills amenable to systematic instruction. A burgeoning literature on social-emotional learning (SEL) programmes — particularly within school contexts — has sought to test this premise, with largely encouraging results (Durlak et al., 2011). However, a comprehensive review integrating findings across educational, organisational, and clinical domains remains valuable for consolidating the evidence base and informing policy. This paper accordingly reviews the theoretical foundations of EI, the mechanisms through which EI

education promotes well-being, and the empirical evidence from diverse intervention contexts.

2. Theoretical Frameworks

2.1 The Ability Model of Emotional Intelligence

Mayer, Salovey, and Caruso (2004) conceptualise EI as a set of four hierarchically organised mental abilities: (i) perceiving emotions accurately in oneself and others; (ii) using emotions to facilitate thought; (iii) understanding emotional language and the ways emotions evolve; and (iv) managing emotions reflectively to promote emotional and intellectual growth. This ability model is distinctive in its insistence that EI be operationalised and measured as a genuine cognitive capacity, assessed through performance-based tasks rather than self-report questionnaires. From an educational standpoint, the model implies that teaching EI involves developing discrete, trainable skills — perceiving facial expressions of emotion, labelling emotional states with precision, predicting how emotions change over time — that can be scaffolded and assessed much like academic skills.

The ability model has been particularly influential in guiding the development of curriculum-based EI programmes. Roberts et al. (2010) demonstrated that children who received training in emotional perception and emotional labelling showed significant improvements in their performance on ability-based EI assessments, and that these gains were correlated with reductions in internalising symptoms. The model's emphasis on emotional knowledge is consistent with cognitive theories of well-being, which posit that the ability to accurately appraise and label emotional states — what Torre and Lieberman (2018) term 'affect labelling' — attenuates the intensity of negative affect and supports adaptive coping.

2.2 Goleman's Mixed Model and Competency Frameworks

Goleman's (1995, 1998) model of EI, whilst attracting criticism for its breadth and for conflating ability-based and personality-based constructs (Locke, 2005), has been immensely influential in educational and organisational practice. Goleman identifies five core competencies — self-awareness, self-regulation, motivation, empathy, and social skills — and argues that these competencies are more predictive of life success than traditional measures of cognitive ability. From a well-being perspective, self-regulation occupies a particularly central role: the capacity to manage impulses, inhibit unhelpful emotional responses, and persist through adversity is foundational to emotional stability and mental health (Gross, 2015).

Educational programmes informed by Goleman's framework tend to be broad-based, addressing emotional vocabulary, impulse control, perspective-taking, and collaborative problem-solving within integrated curricula. Bar-On's (2006) model of emotional-social intelligence similarly highlights the relevance of intrapersonal skills (self-regard, emotional self-awareness, assertiveness), interpersonal skills (empathy, social responsibility), adaptability (problem-solving, reality testing), and stress management to overall psychological health. Collectively, these frameworks converge on the view that EI is a multidimensional, educable construct with direct implications for mental health outcomes.

3. Mechanisms Linking EI Education to Psychological Well-being

3.1 Emotion Regulation

One of the most robust pathways through which EI education promotes well-being is the enhancement of emotion regulation capacity. Gross's (2015) process model of emotion regulation distinguishes between antecedent-focused strategies — such as cognitive reappraisal, which involves reinterpreting a situation to alter its emotional impact — and response-focused strategies — such as expressive suppression, which involves inhibiting emotional expression after it has arisen. A large body of evidence indicates that cognitive reappraisal is associated with greater psychological well-being, fewer depressive symptoms, and better interpersonal outcomes, whilst expressive suppression is associated with poorer mental health (Aldao, Nolen-Hoeksema, & Schweizer, 2010). EI education that explicitly teaches cognitive reappraisal and other adaptive emotion regulation strategies therefore represents a mechanistically coherent approach to improving mental health.

Brackett et al. (2012) found that students who received instruction in the RULER programme — an evidence-based SEL curriculum designed around the ability model — demonstrated significant improvements in cognitive reappraisal use and corresponding reductions in anxious and depressive symptoms compared with control groups. These findings suggest that EI education operates, at least in part, by expanding learners' repertoire of adaptive regulation strategies.

3.2 Social Connectedness and Interpersonal Functioning

A second mechanism involves the impact of EI education on social functioning and relationship quality. Loneliness and social isolation are among the most powerful predictors of poor mental health; conversely, the quality and depth of social relationships are consistently associated with psychological well-being, subjective happiness, and even physical health (Holt-Lunstad, Smith, & Layton, 2010). EI education fosters empathy, perspective-taking, and prosocial communication skills, each of which supports the formation and maintenance of satisfying relationships. Lopes et al. (2004) demonstrated that individuals higher in emotion management ability — as assessed by the Mayer-Salovey-Caruso Emotional Intelligence Test — reported higher quality relationships, greater satisfaction with their social lives, and less conflict in their interactions.

Furthermore, research by Schutte et al. (2001) indicated that EI is positively associated with cooperative social behaviour and the capacity to provide effective emotional support to others. This suggests that EI education not only benefits the individual learner directly but may have positive spillover effects on the social ecology of classrooms and workplaces, thereby enhancing collective well-being.

3.3 Stress Appraisal and Coping

EI education also affects how individuals appraise and respond to stressful events. Individuals with higher EI are more likely to engage in problem-focused coping — actively addressing the sources of stress — and less likely to resort to avoidant or maladaptive coping strategies such as rumination or substance use (Saklofske et al., 2007). The ability to accurately perceive and understand one's own emotional reactions to stress facilitates more adaptive appraisals of challenges as manageable, thereby reducing the psychological toll of adversity. Ciarrochi, Deane, and Anderson (2002) demonstrated that students with higher trait EI reported significantly lower stress and depression in response to life challenges, and this relationship was partly mediated by more adaptive coping strategies.

4. Evidence from Educational Interventions

4.1 School-Based Social-Emotional Learning Programmes

The most extensive body of evidence for the effectiveness of EI education derives from school-based SEL programmes. The landmark meta-analysis by Durlak et al. (2011), encompassing 213 school-based SEL programmes involving over 270,000 students, found that SEL participants demonstrated significantly improved social and emotional skills, attitudes about self and others, and school performance, alongside a significant reduction in conduct problems and emotional distress. The mean effect size for academic achievement gains was 0.27, whilst that for reduced internalising problems was 0.24, and that for reduced externalising problems was 0.22. These effect sizes are educationally and clinically meaningful, especially given the population-level scale at which SEL can be delivered.

The RULER programme developed by Brackett and colleagues at the Yale Centre for Emotional Intelligence is among the most rigorously evaluated EI education curricula. RULER — an acronym representing the skills of Recognising, Understanding, Labelling, Expressing, and Regulating emotions — is grounded in the ability model and has been implemented in thousands of schools across North America. Taylor et al. (2017), in a meta-analysis of follow-up studies examining the long-term effects of SEL programmes, found that well-being benefits were sustained for an average of 3.5 years after intervention, lending support to the view that EI education produces durable improvements in psychological health rather than ephemeral skill gains.

4.2 Higher Education Contexts

Whilst much of the SEL literature focuses on primary and secondary schooling, a growing body of research addresses EI education in higher education. University students face distinctive psychological challenges, including academic pressure, identity formation, and the transition to independence, that render them a particularly important target population for EI interventions. Hen and Goroshit (2014) found that university students who participated in an EI skills training programme reported significantly lower levels of procrastination and higher academic self-efficacy, each of which is associated with better mental health outcomes. Similarly, Castillo et al. (2013) demonstrated that higher EI was associated with greater life satisfaction and less emotional exhaustion in a sample of Spanish university students, with emotion regulation identified as a key mediator.

These findings suggest that incorporating EI education into undergraduate curricula — whether through dedicated workshops, integration into existing courses, or student support services — may represent

a cost-effective strategy for addressing the student mental health crisis that has been widely documented in UK and international higher education contexts (Hughes & Spanner, 2019).

5. Evidence from Organisational and Clinical Contexts

5.1 Workplace EI Interventions

Beyond formal education, EI education has been extensively applied in organisational settings, where it is typically delivered as part of leadership development, team effectiveness, or employee wellbeing programmes. A meta-analysis by Mattingly and Kraiger (2019) examined 58 studies of EI training in workplace contexts and found a substantial mean effect size of 0.47 for improvements in EI competencies, with corresponding benefits for job performance, workplace relationships, and employee well-being. Programmes that incorporated multiple training modalities — including didactic instruction, role-play, reflective exercises, and ongoing coaching — produced larger effects than single-component interventions, consistent with broader principles of effective training design.

The relevance of EI to occupational well-being is particularly well established in the healthcare and education sectors, where emotional labour — the effortful management of emotional expression as a professional requirement — is pervasive and where burnout rates are disproportionately high (Maslach, Schaufeli, & Leiter, 2001). Codier and Codier (2017) demonstrated that nurses who received EI training reported significantly lower burnout scores and higher work engagement, suggesting that EI education may constitute an important protective factor against occupational stress in emotionally demanding professions.

5.2 Clinical and Therapeutic Applications

Within clinical psychology and psychotherapy, the relevance of EI has been acknowledged through its conceptual overlap with constructs such as alexithymia (the difficulty in identifying and describing one's emotions), mentalization, and emotional awareness. Dialectical behaviour therapy (DBT), developed by Linehan (1993) for individuals with borderline personality disorder, explicitly incorporates emotion regulation and distress tolerance skills that parallel the competencies cultivated by EI education. Whilst DBT is a clinical intervention rather than a preventive educational programme, its efficacy in reducing self-harm, suicidality, and hospitalisation supports the broader premise that systematic emotional skills training is therapeutically valuable (Koons et al., 2001).

More recent research has explored the integration of EI-based psychoeducation into stepped-care mental health models, in which lower-intensity, universally accessible EI skill-building workshops serve as a first step in a continuum of care that escalates in intensity for individuals with more severe difficulties. Preliminary evidence from such models suggests that EI psychoeducation can produce modest but meaningful reductions in subthreshold anxiety and depressive symptoms in non-clinical community samples (Clarke et al., 2011).

6. Limitations and Future Directions

Despite the generally encouraging findings reviewed above, several important limitations merit acknowledgement. First, methodological heterogeneity — including variation in EI conceptualisation, measurement instruments, intervention design, outcome measures, and follow-up periods — renders cross-study comparison challenging and limits the strength of conclusions that can be drawn. The field would benefit from the adoption of more standardised outcome batteries and from greater use of pre-registered, randomised controlled trials with active control conditions.

Second, the mechanisms through which EI education exerts its effects on well-being remain incompletely understood. Whilst emotion regulation, social functioning, and stress coping have been identified as plausible mediators, mediation analyses are relatively rare in the extant literature, and the relative importance of different mechanisms may vary across populations and contexts. Future research should employ theoretically informed mediation and moderation analyses to clarify these pathways.

Third, there are important questions of equity and cultural validity. Most EI education research has been conducted in Western, educated, industrialised, rich, and democratic (WEIRD) contexts, and the extent to which EI constructs and interventions translate meaningfully to other cultural contexts remains insufficiently explored (Matsumoto & Hwang, 2012). The expression and regulation of emotion are deeply shaped by cultural norms, and EI curricula developed in one cultural context may inadvertently privilege particular emotional display rules or coping strategies that are not universally adaptive.

Future research should also attend more carefully to implementation fidelity and organisational context as moderators of EI intervention effectiveness. Evidence suggests that even well-designed interventions produce variable outcomes depending on the quality of implementation, the degree of educator buy-in, and the broader organisational climate (Domitrovich et al., 2008). Understanding what conditions maximise the impact of EI education is essential for informing scalable policy and practice.

7. Conclusion

This review has synthesised theoretical and empirical evidence demonstrating that emotional intelligence education plays a meaningful role in promoting psychological well-being across diverse populations and contexts. Grounded in robust theoretical frameworks and supported by a substantial body of intervention research, EI education enhances adaptive emotion regulation, strengthens social connectedness, improves stress appraisal and coping, and reduces psychological distress. Whilst methodological limitations and questions of cultural generalisation counsel caution, the weight of evidence supports the systematic integration of EI education into school curricula, higher education provision, workplace training, and community mental health programmes.

The implications for policy and practice are significant. As policymakers, educators, and mental health professionals grapple with the escalating global burden of psychological ill-health, EI education offers a scalable, evidence-informed, and cost-effective avenue for building the emotional capacities that underpin human flourishing. Continued investment in high-quality research — particularly longitudinal studies, cultural adaptation studies, and implementation science — will be essential to realise the full potential of this approach.

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