

EMOTIONAL LITERACY DEVELOPMENT WITH CHILDREN IN VULNERABLE COMMUNITIES

by
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Abstract

Children living in vulnerable communities experience multiple risks impacting their academic development and long-term emotional and physical wellbeing. Preventative interventions focusing on Emotional Intelligence (EI) earlier in a child's development equips the child with the necessary skills to navigate additional stressors that exist in lower socio economic status (SES) communities. EI is one of three pillars of intelligence, with academic intelligence and aptitude. However, EI is the only flexible indicator of intelligence. Development of EI skills with children will ensure the wellbeing of the children and ultimately improve the community's overall public health.

This paper reviews theoretical approaches to EI, measurement tools, and interventions that are culturally appropriate. The development of an EI program will be demonstrated in a case study of an elementary school in Richmond, CA. Richmond, CA is the largest city in West Contra Costa County. The collaborative preventative intervention is being implemented to increase EI skills and improve the long-term emotional and physical health of school-age girls. The intervention is piloted with 3rd through 5th grade girls and provides evidence-based curricula in the school and with a partnering afterschool program, Girls Inc. of West Contra Costa County.

Implementing preventative interventions in vulnerable communities similar to Richmond, CA will support the development of EI skills in children and are hypothesized to have long- term impacts for success in the workforce and emotional/physical health. Two arguments will be made throughout the paper. The first is for more research to be conducted on effective, culturally appropriate EI measurement tools and interventions for children in vulnerable communities. The second is for collaborative interventions to

be implemented in local vulnerable communities to increase EI skills of children in those communities.

Glossary of Terms

ABCD model	Affective/Behavioral/Cognitive/Dynamic model
CASEL	Collaborative for Academic, Social and Learning
DANVA/DANVA-2	Diagnostic Analysis of Nonverbal Accuracy Scales
EA	Emotional Adaptiveness
EI	Emotional Intelligence
EK	Emotional Knowledge
EKT	Emotional Knowledge Test
EQ-i	Emotional Quotient Inventory
EQ-I: YV	Emotional Quotient Inventory: Youth Version
IQ	Intelligence Quotient
JACBART	Japanese and Caucasian Brief Affect Recognition Test
MSCEIT	Mayer Salovey Caruso Emotional Intelligence Test
MSCEIT: YV	Mayer Salovey Caruso Emotional Intelligence Test: Youth Version
PATHS®	Promoting Alternative Thinking Strategies Program
SEL	Social and Emotional Learning
SES	Socio-economic status

Introduction

Emotional Intelligence (EI) has been identified as a foundational building block for successful leadership in the professional world. Until the 1990s, academic intelligence, or Intelligence Quotient (IQ), was the predominant tool to gauge an individual's abilities in the workplace and to understand a child's academic potential. As a stand-alone tool the IQ score was not an accurate reflection of the individual's capabilities. For example, a child's high IQ does not align with his or her being successful as an adult (Weinberg, 1989).

EI was first introduced by Mayer-Salovey in 1990 and was popularized by Goleman in 1995 (Levesque, 2011). IQ is a stable indicator that reflects an individual's ability to understand, learn, recall, and think rationally. The revolutionary concept, EI, introduced a flexible indicator that reflects the ability to learn (Plaisted Fernandez, n.d.). EI focuses on how one interacts with peers and one's ability to navigate complicated interpersonal relationships.

After Goleman published two books about EI the concept rapidly spread from leadership assessment for adults and was applied to children's development. The flexibility and learned characteristics of EI are particularly important with childhood development (Goleman, 1995; Goleman, 1998). There was a huge push to gain an understanding on how to enhance a child's ability to develop EI, including identification and removal of barriers inhibiting its development. Studies have shown that children that have high EI scores have a stronger ability to get along with their peers and are less likely to engage in deviant behaviors and as adults have a better job performance and success (Levesque, 2011). This is specifically important with children from lower socio-

economic status (SES) communities, where there is correlation to lower academic scores and socio-emotional development (Bradley & Corwyn, 2002). Lower SES communities can experience higher dropout rates and violence, causing additional barriers to EI development. Preventative interventions focusing on EI development with youth residing in lower SES communities increase healthy behaviors and decrease maladaptive behaviors that are linked to public health issues, such as violence or alcohol abuse (Coelho, 2012).

One area of contention in the field is a lack of agreement on the definition of EI. The definition shifts from a specific to global application of EI creating a variety of measurement and intervention tools (Mayer, Roberts, & Barsade, 2008). For the purpose of this paper EI is defined as “an individual's capacity to process emotional information in order to enhance cognitive activities and facilitate social functioning” (Zeidner, Mayer, Salovey, Rivers, & Brackett, 2008, p.2).

This paper reviews theoretical approaches to EI, measurement tools, and interventions that are culturally appropriate. The importance of EI programs within communities with lower SES will be discussed. A case study will review the development of EI program for an Elementary school in West Contra Costa County School District, in California. Two arguments will be made throughout the paper. The first is for more research to be conducted on effective, culturally appropriate measurement tools and interventions for children in vulnerable communities. The second is for collaborative interventions to be implemented in local vulnerable communities to increase children EI skills.

Emotional Literacy: What and Why

Intelligence has been historically measured through a singular tool, Individual Intelligence tests (IQ), to assess intelligence as ‘the biological underlay of all cognitive activities responsible for individual differences in the ability to perform cognitive tasks’ (Weinberg, 1989, p. 100). IQ has been associated with multiple controversies: it was developed through the lens that intelligence was created through nature and excluded the impact of nurture; biased against learning disabilities; did not address educational, cultural or socioeconomic factors (Weinberg, 1989). In the 1980s into the 1990s there was a shift from the single view of intelligence to a multi-prong view, incorporating aptitude and Emotional Intelligence (*Figure 1*). IQ and aptitude remain fairly stable, and EI can be learned through practice and life experiences. (Plaisted Fernandez, n.d.)

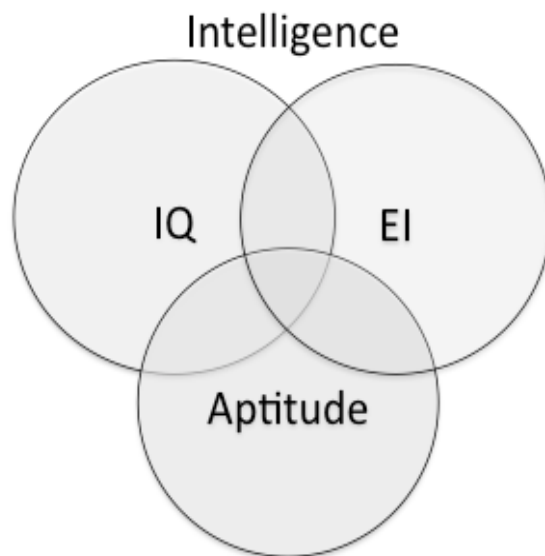


Figure 1 (Source: Plaisted Fernandez, n.d.)

Emotional Intelligence is comprised of four categories: self-awareness, self-management, social awareness, and relationship management. Self-awareness, having insight on one’s own behaviors, is the foundation for the other three categories. From

these, an individual can have empathy, or social awareness towards other people's situations (Goleman, Boyatzis, & McKee, 2002). One major difference between EI and other mental processes is EI's primary focus on problem solving. (Mayer et al., 2008).

For the first few years of their lives children have emotional responses to situations but are not 'thinking' about the response. At this time emotional responses are similar across cultures. During the toddler phase a shift occurs from emotional responses to 'thinking', allowing the child to experience more complicated emotions. Once a child becomes a 'thinker' responses to situations are not uniform between two individuals or between cultures. Emotional responses and awareness are developed through external and internal factors impacting the child (Meyerhoff, 2007).

The lack of agreement on the exact definition of EI results in disagreement on the parts of the brain involved. This can include basic neural processes associated with emotional stimuli to high-level thoughts and emotions associated with understanding life events. EI is controlled through a combination of sub-cortical emotion centers and cortical systems of the brain (Matthews, Zeidner & Roberts, 2003). However it is known that both genes and experiences sculpt the brain. A child's brain that has experienced toxic stress will be weakened. Change can happen at any time, nevertheless development earlier in life is more beneficial (Center for Developing Children Harvard University, 2015).

Emotional responses can inhibit or enhance the development of a child's brain. Children from a lower SES often have additional psychological stressors that result in higher rates of health conditions, less education, and less job satisfaction as an adult. By college individuals from high SES communities have significantly higher EI scores

then individuals from lower and middle SES communities (Naik, Bharat, 2014).

Possessing the skills to manage one's emotions and handle stressful situations has also shown to be beneficial in decreasing the chance of the child engaging in violent acts (Gower, Shlafer, Polan, McRee, McMorris, Pettingell, & Sieving, 2014). Building EI skills in lower SES communities will increase long-term impacts on an individual's success within the workforce and ability to become an effective leader. Providing an EI intervention earlier in a child's development will support skill acquisition and practice throughout the academic journey.

Additional environmental stressors impacting vulnerable children result in higher rates of violence, increased rate of emotional/mental health challenges, higher rates of smoking/heavy drinking, and obesity and other physical health issues.

Approaches to EI

This section explores the different approaches to EI, moving from specific to global approaches. *Table 1* provides an overview of the approaches and associated measurement tools.

Specific Ability Approach

This approach focuses on the individual's mental abilities associated with EI, in a manner similar to traditional intelligence tests. It identifies a set of skills that combine emotions and cognition. Utilizing this approach Mayer and Salovey (2002) developed the Mayer Salovey Caruso Emotional Intelligence Test (MSCEIT), reviewed in more detail in the section *Measurement Tools* (Papadogiannis, Logan, & Sitarenios, 2009).

The first section of this approach is the perception of emotions (Papadogiannis et al., 2009). The section focuses on how an individual perceives the emotions of another person using non-verbal cues, a foundational component of social awareness, to accurately assess another person's emotion through facial expressions and/or body language (Mayer et al., 2008). Perception is frequently measured through two tools: Diagnostic Analysis of Nonverbal Accuracy Scales (DANVA, DANVA-2) and Japanese and Caucasian Brief Affect Recognition Test (JACBART) (Mayer et al., 2008).

The ability to use emotions to elicit a cognitive reaction is the next section (Papadogiannis et al., 2009). This is a higher-level emotional skill that includes cognitive reactions like decision making and reasoning. The individual must quickly assess the emotion and information and have a response to it using the important pieces of the information. An individual who is highly frustrated might lose the capacity to assess the situation from a global viewpoint and subsequently misinterpret key pieces of information (Mayer et al., 2008).

In the following section, understanding emotions requires an individual to possess the ability to comprehend the complicated nature of emotions. This includes how emotions transition from one to another, can include a combination of emotions at the same time, or can incorporate impacts from previous/present/future situations (Papadogiannis et al., 2009). An example of this is when an individual experiences a situation that elicits fear, which can cause the person to remember previous fear-based incidents or possible trauma, and the individual responds by fleeing the situation.

The final category of the Specific Ability Approach includes managing emotions. This combines an individual's capacity to identify emotions and to manage the emotion

by maintaining or shifting to a different emotion. This requires the individual to assess if the internal emotional state is appropriate for the situation encountered and to possess the knowledge and ability to shift it accordingly (Papadogiannis et al., 2009). For example, an individual can be overly happy for the situation and needs to shift to a somber emotion in order to effectively interact with the desired group.

Mixed Model Approach to EI

This approach took the initial definitions of EI created by Mayer and Salovey, globalized and broadened them from cognitive intelligence to general intelligence. It moves from testing EI through performance tests/problems that require an individual to understand and apply emotion to a test that uses self-report instruments (Emotional Quotient Inventory (EQ-i)) to measure a combination of cognitive, personality, and affective attributes (Papadogiannis et al., 2009).

Bar-On (date) created a common trait model. He defined EI as non-cognitive traits that impact an individual's ability to function within environmental circumstances (Papadogiannis et al., 2009). Core emotional processing abilities associated with EI plus items typically associated with effective functioning create 15 conceptual components, which are grouped into five theoretical clusters: intrapersonal, interpersonal, stress management, adaptability, and general mood (Papadogiannis et al., 2009). The intrapersonal cluster includes five diverse abilities of an individual and his/her emotions; the most important is emotional self-awareness. The interpersonal cluster includes abilities associated with social interactions and the emotional state of other people. Stress management and adaptability clusters include an individual's ability to cope with upsetting situations, problems or changes. The last cluster, general mood,

incorporates an individual's overall satisfaction of current and future life (Papadogiannis et al., 2009).

Integrative Approach

This approach integrates components of the previous two theories, Specific Ability Approach and Mixed Model Approach (Izard, 2002). Integrative Approach has two core components: Emotional Knowledge (EK) and Emotional Adaptiveness (EA). EK includes emotional perception and labeling is the ability to receive information about emotions and to process the information accurately, decoding and encoding of emotions. This is an essential skill to develop sympathy and empathy. EA identifies that emotions can be result in adaptive behaviors without the influence of knowledge or cognition. When infants have an emotional response to caregiver's facial expressions is an example of the innate capability of emotional perception, without using knowledge or thoughts. Within this approach emotions can inhibit the development of cognition, emotional perception, behaviors, and personality traits. Children that live in stressful living conditions and experience more negative emotions may have difficulty regulating the emotional response in other environments and communicating the experience with other people. Trait emotions, such as shyness or anxiousness, can impact the behaviors and result in behavioral problems. Emotional patterns of infants are linked to personality traits as preschoolers (Izard, 2002).

The developmental components of this approach make it especially applicable with children (Izard, 2002). Izard's Emotional Knowledge Test (EKT) is a measurement tool for the approach. An example question would be to identify an emotion to a

situation and assess non-verbal communication, such as facial expression (Mayer et al., 2008).

	Specific Ability Approach	Integrative Approach	Mixed Model Approach
View of approach	Specific	Combination of specific and global	Global
Components	Perception of Emotions Use of Emotions Comprehension of Emotions Management of Emotions	Perception of Emotions Emotional Adaptiveness	Intrapersonal Interpersonal Stress Management Adaptability General mood
Measurement Tools	MSCEIT DANVA/DANVA-2 JACBART	EKT	EQ-i

Table 1 Theoretical Approaches to Emotional Intelligence

Measuring EI

This section explores different tests to measure EI. Each test is reviewed to determine applicability with children and diverse populations.

Mayer Salovey Caruso Emotional Intelligence Test (MSCEIT)

MSCEIT measures EI in the four categories of Specific Ability Approach: perception of emotions, use of emotions, comprehension of emotions, and management of emotions. The test is comprised of eight different tasks which includes emotional perception of (1) faces and (2) environments, using emotions in (3) synesthesia and to (4) promote thought, comprehension of emotional shifts over (5) time and (6) combinations, and managing emotions (7) internally and (7) with others. Each task has a different scale. There are long (402 questions) and short (141 questions) test versions. Two scoring options are available for MSCEIT, General Consensus and

Expert Consensus. In General Consensus answers are scored for correctness against a normative sample, which was created from 5000 participants (ages 17 – 79) from 50 different sites internationally. Expert Consensus compares the responses to a panel of 21 emotion experts (Papadogiannis et al., 2009).

MSCEIT: Youth Version (YV) is a tool to assess EI for youth ages 10-18 years. YV measures the same categories as the adult version of MSCEIT. YV does not use a General Consensus scoring since many frequently endorsed views of youth were clearly lack skills and knowledge to accurately label their emotions. Preliminary results do not find a correlation with MSCEIT scores and academic success (Papadogiannis et al., 2009).

DANVA/DANVA -2

The Specific Ability Approach utilizes DANVA/DANVA-2 to assess perception of emotions through receiving and relaying non-verbal cues. It was created to help identify children who may have difficulty processing non-verbal information pertaining to affect. DANVA/DANVA-2 measures the ability to receive and transmit non-verbal signals through facial expression, postures, gestures, and tone of voice. Answers are scored against a normative group of people judging non-verbal cues. Correlation has been found between DANVA scores and academic success with children. Further research is needed regarding DANVA appropriateness across cultures (Nowicki & Duke, 1994).

JACBART

This measurement tool was created from JACFEE, a tool created in 1988 by Matsumoto and Ekman, to measure an individual's ability to identify emotions. This test uses seven universal emotions shown in video format using facial pictures from two

faces (Japanese and Caucasian) with equal distribution between races and genders. A face portrays one of seven emotions: happiness, contempt, disgust, sadness, anger, surprise, and fear. JACBART is limited in application within diverse populations. There needs to more research of the effectiveness with children (Matsumoto, LeRous, Wilson-Cohn, Raroque, Kookan, Ekman, Yrizarry, Loewinger, Uchida, Yee, Amo, & Goh, 2000).

EKT

EKT is an umbrella label for many tests, including Assessment of Children's Emotional Skills (ACES). ACES contains three categories: facial expressions (26 faces), social situations (15 vignettes), and social behavior (15 vignettes) (Mayer, et al., 2008). This measurement tool has shown that emotional knowledge acts as a mediator between verbal ability and academic competence. ACES can be implemented with pre-school age children and up, has shown a positive relationship between identifying and interpreting emotional cues, and has a positive impact on social behavior and academic competence. ACES has been implemented effectively in lower SES communities, where teachers have been shown to inhibit child academic performance with their lower expectations of the children. Further research is needed to establish an effective application of the tool in diverse communities (Izard, Fine, Schultz, Mostow, Ackerman, & Youngstrom, 2001).

EQ-i

The global, multi-dimensional model created by Bar-On was used to create the Bar-On Emotional Quotient Inventory (EQ-i), one of the most widely used self-report assessments. It was initially created for adults 17 years and older. EQ-I is comprised of 133 questions representing the five categories of the Mixed Model Approach:

intrapersonal, interpersonal, stress management, adaptability, and general mood. EQ-I creates three scores: a total EQ scores, five cluster scores, and individual scores on the 15 subscales that reflect the 15 subcategories of the five clusters. There is also a short version (EQ-i: Short) for when the long version is not needed or when time does not permit (Papadogiannis et al., 2009).

Emotional Quotient Inventory: Youth Version (EQ-I: YV) is a self-reported EI measurement developed for children 7-18 years of age. This tool contains five clusters and a positive impression factor. There is also a short version available (EQ-i: YV (2)). Due to the level of self-awareness and individual needs to possess to complete a self-report questionnaire, EQ-i: YV also contains a questionnaire to be completed by a parent and teacher. A growing literature connects EQ-i: YV and academic achievement (Papadogiannis, et al., 2009).

Social and Emotional Learning (SEL)

Society holds the school system partially responsible to prepare children to be responsible adults that are able to contribute to society. Focusing on improving only children academic functioning has been found to be insufficient, and for vulnerable children it can be potentially harmful, resulting in higher rates of violence, emotional/mental health challenges, and poor health (Matthews, Gerald, Zeidner, Moshe, Roberts, & Richard, 2008) Development of EI with vulnerable children would help mitigate the negative impacts.

Social and Emotional Learning (SEL) is based on the belief that children need to practice integrating cognition, affect, and behavior through culturally appropriate

development activities. SEL is comprised of two essential pieces. One focuses on the processing, integrating, and selection of emotional and social skills, while the other creates a safe and nurturing learning environment. Typically a school psychologist leads implementation of SEL into the school. From implementing SEL in schools, there have been positive results in the following three categories: attitudes (motivation), behaviors (participation/study habits), and performance (grades). (Matthew, Gerald. et al., 2008)

Collaborative for Academic, Social and Learning (CASEL)

The Collaborative for Academic, Social and Emotional Learning (CASEL) is the leading national organization working in the educational system with children from pre-school through high school to integrate SEL. CASEL has identified the following five core competencies for school children:

1. Self awareness: recognizing one's emotions and thoughts and how they impact behavior;
2. Self-management: regulation of one's emotions, thoughts, and behaviors in various environments and circumstances;
3. Social-awareness: empathy for others from diverse background, identification of social and ethical norms, and knowledge of support system;
4. Relationship skills: ability to create and maintain healthy relationships with individuals from diverse backgrounds;
5. Responsible decision-making: cultural and ethically aware choices about individual and social interactions. (CASEL: Collaborative for Academic, Social, and Emotional Learning, 2015)

The following is a review of three different intervention types and examples of curriculum utilized to engage children, including PATHS® (Promoting Alternative Thinking Strategies) Program, Positive Action®, and Girl's Circle®.

School Based Intervention

PATHS Program is an evidenced-based curriculum for elementary schools to improve child social and emotional skills (Channing Bete Company, 2015). Initially PATHS was created as a program to support children who are deaf with tools for expression, understanding, and regulation of emotion. Since then it has been applied to schools serving children with and without special needs. PATHS contains a public health section to support families and schools promoting healthy choices and behaviors (Channing Bete Company, 2015). It uses the ABCD model, affective/behavioral/cognitive/dynamic child development model. The foundational component is the developmental integration of affect, having the vocabulary to talk about emotion, and the cognitive ability to understand how it relates to emotional competence. An interdisciplinary team implements PATHS in schools, but the goal is for teacher implementation. The school psychologist manages the project and trains teachers; the teacher implements the lessons in the classroom and provides activities throughout the day for generalization. Team members observe the children in structured and un-structured settings and they meet to review each child's growth (Kelly, Longbottom, Potts, & Williamson, 2004).

PATHS is built upon four assumptions: behavior dictates the child's ability to comprehend and communicate emotions with others; socialization practices have developed the child's ability to control, comprehend and communicate emotions;

effective problem solving requires self-assessment skills and empathy towards others; and applying EI in schools is key to creating effective change. (Kelly et al., 2004).

PATHS seeks to enhance a child's EI through multiple actions, building on the four assumptions. PATHS works to increase a child's vocabulary pertaining to emotions and opportunities for the child to discuss their emotions with adults and peers. Increasing awareness of the meta-cognitive components of emotions includes recognizing cues for emotions, awareness of social structure, capacity to practice problem-solving skills with peers. These are achieved through six volumes of curriculum covering the following topics: Readiness and Self Control, Feelings and Relationships, Problem Solving (Kelly et al., 2004).

Positive Action® is an evidenced-based curriculum that has been implemented for over 30 years in diverse communities with positive results in increasing academic achievement and decreasing problem behaviors. The curriculum comes with Kits for each grade that includes 140 lessons. Lessons take approximately 15 minutes to implement, and lessons can be conducted in school, community, or family home. Positive Actions is built on a cycle that starts with thoughts that turn into action that result in feelings about oneself (TAF). Positive cycles result in positive learning experiences for children, and negative cycles have a negative learning outcome (Positive Action, 2015).

Each kit is separated into the same six units, allowing an entire school to participate in the same program. The units include self concept, positive actions for body and mind, managing oneself responsibly, treating others the way one wants to be treated, telling oneself the truth, and continual self-improvement (Positive Action, 2015).

After-School Based Intervention

Girl's Circle® is a structured support group for young girls. The model used is based on relational theory, resiliency practices, and skills training with the overall goal of increasing emotional support, internal and external emotional strength, and emotional competency. Sessions occur weekly in a safe setting from 90 minutes to two hours. The girls participating in the group teach each other, rather than being taught by the facilitator. There are thirteen different sessions, including a mother-daughter circle. Other topics include 'Who am I', 'Relationship with Myself', and 'Expressing Myself' (One Circle Foundation, 2012). Research has shown that participants had an increase in self-efficacy, decrease in self-harming behavior, decrease in rates of alcohol use, increase in attachment to school, increases in positive body image, and increases in social support (One Circle Foundation, 2012).

School & Home Intervention

The third intervention type involves the school and family working together to increase EI skills. Recent research has shown that school and family involvement has a synergistic positive impact on the child's development of EI (Bahman & Maffini, 2008).

For successful collaboration the teachers need to educate parents of the importance of their involvement in their child's educational development, and parents need to be included in the training so they can successfully implement their portions of the curriculum. Different activities can support the parents' investment in participating in the curriculum. This can include a space at the school for the parents to socialize together, have access to literature regarding EI activities to implement in the home, and where ongoing workshops and regular child progress meetings with the school team are

held. One specific tool is creating circle-time in the home that allows the child to discuss emotions experienced during the school day. This structured activity helps to link the EI curriculum into a safe place in the home (Bahman & Maffini, 2008).

Case Study For Application of EI Principles with Vulnerable Children

Background on Richmond, CA

In the mid-1980s to early 1990s, the crack epidemic impacted many cities throughout the United States. The introduction of crack cocaine resulted in a significant increase in violence, disproportionately impacting African American males. Richmond, a city located in Contra Costa County in California, suffered profound impacts with violent criminal activity and school attendance and has continued to struggle to shift the drug and violent culture permeating the streets. Richmond was ranked the 11th most dangerous metropolitan city in 2005 (O-Leary & Morgan, 2005). That year after a brutal homicide the Richmond City Council declared a state of emergency to create a focused plan to decrease the violence, which included bringing in additional support from Contra Costa Sheriff department and California Highway Patrol (Zamora, 2005). Most of the violence was concentrated in two parts: the Iron Triangle and North Richmond.

The cycle of violent crimes and drugs has resulted in devastating social impacts within Richmond, leading to higher rates of poverty, unemployment, and incarceration. Violent crimes disproportionately impact younger people. In 2009 19% of the city's murder victims were under 18 years of age and 50% were under the age of 24 (Brown, 2010). In 2012 the average annual household income was \$54,000, compared to \$75,000 for Contra Costa County (City-Data.com, 2012). In addition to violence and

drugs, the community also experiences other environmental stressors. This includes toxic elements from the Chevron refinery, Santa Fe train and diesel truck emissions, highways and the Richmond Shipyard (Lopez, Cohen, Zota, & Morello-Frosch, 2009). The environmental stressors and low SES status of the residents in Richmond result in significant public health issues such as obesity, asthma, violence, drug and alcohol abuse, and high school drop out. These factors highlight Richmond as a vulnerable community and severely impact its children's ability to thrive academically and to develop EI skills.

The City of Richmond has taken vast steps to create a 'Healthy Richmond' by address the significant barriers through a public health approach. The diverse community of 39% Latino, 24% Black/African American, 18% Caucasian, creates opportunities and challenges for developing effective plans (City-Data.com, 2012). Through the support of the California Endowment Foundation and Building Healthy Communities, the city has created a ten-year strategic plan to improve the health of children, including environment, education, and emotional wellness (City of Richmond, 2015). The Healthy Richmond strategic plan creates a foundation for organizations and corporations in Richmond to collaborate on programs with children.

Girls Inc. of West Contra Costa County

Girls Inc. of West Contra Costa County is a regional chapter of a national organization supporting school age girls to be "strong, smart and bold" (Girls Inc of West Contra Costa County, 2015).

In October 2014 I started an internship with the organization as part of my Masters of Public Administration practicum experience. Part of my responsibilities

included researching and developing an EI program to support girls to increase their self-awareness, social-awareness, and ability to communicate about their own and other's emotions. At the time I started the internship, Girls Inc. offered programs to develop academic skills (Science, Technology, Engineering, and Mathematics) connect the girls to colleges, increase financial literacy, and provide social activities. These programs have resulted in positive impacts for participating girls. Girls Inc added additional goals to meet the needs of the girls living in Richmond, CA. The additional environmental stressors impacting the Richmond community and its children, and to permit for the girls at Girls Inc. to successfully avail of its services and achieve success, there was a need to equip the young girls with a preventative intervention that improves EI skills in order for them to navigate their daily lives successfully and prepare them to be future leaders in the workforce.

For this program, a collaborative, multi-pronged intervention provides the greatest impact with young girls in the program. This approach is aligned with the culture gaining currency in the City of Richmond. Girls Inc. identified the West Contra Costa School District as a foundational component of the program. There already has been an established partnership between the two through Girls Inc's academic program and the school district. Richmond Community Foundation and Chevron Richmond provide financial and strategic development support and volunteers for events.

The collaborative team has implemented the program with girls in third through fifth grade at one elementary school in West Contra Costa County. Girls predominantly come from low SES homes, and appear from my observation to be predominantly Latina and African-American. The program is currently operational, and after 6 months

of implementation, depending on outcome and financial capacity, the collaborative team will determine how to expand. Though the program lacks such capacity at this time, there is strong desire to incorporate parents in the program's next phase, so that families can provide their positive influence on EI development.

Intervention

Izard's Integrative Approach was the theoretical model used to develop the program. The model's development components and measurement tool were important factors in choosing this approach. In addition, emotional adaptiveness was believed to an important concept and applicable to stressors impacting the girls (Izard, 2002).

Social and Emotional Learning (SEL) was the intervention selected for the program. SEL is built to provide culturally appropriate developmental behaviors with children. Another key component is the focus on creating a safe and nurturing environment, which is essential in order for the children to have a positive experience (Matthew et al., 2008). The program includes two separate curricula: Girls Circle and Positive Action.

Girls Circle is conducted at Girls Inc. by a facilitator who has participated in the Girl's Circle Facilitator Training. Girls Circle is built on cultural responsiveness and trauma-responsive practices and is particularly appropriate for the girls residing in Richmond. According to data collected as part of this research on the curriculum, girls demonstrated an increase in self-efficacy, attachment to school and social support (One Circle Foundation, 2015). The Collaborative Team identified all three as priorities during program design.

Positive Action is implemented in one-third, fourth, and fifth grade classroom in a Richmond elementary school. One of the driving factors in choosing this curriculum was largely due to its proven effectiveness in diverse communities, specifically with African American and Latino children, and for children on lunch subsidy programs. These two population characteristics eliminated the majority of EI curricula. Positive Action also contained a community component, which was unique (CASEL, 2015).

Measurement

In addition to using assessment tools from these curricula, ACES (Assessment of Children's Emotional Skills) is administered to the girls participating in the program. A pre-test has been given, and a post-test will be administered to compare the impacts of the EI skill interventions. ACES was chosen because of the effectiveness in assessing children EI. However, as stated previously, it has shown limited effectiveness in diverse communities. (Izard et al, 2011).

The program is in the initial stages of implementation. The girls have completed the pre-test and are currently engaged in Girl's Circle and Positive Action. Positive Action has had consistent participation by the girls. One barrier has been sporadic attendance in Girl's Circle. Transportation support between the school and the Girls Inc is being solidified to provide safe and affordable transportation for the girls.

Conclusion and Recommendations

EI is considered to be one of the three indicators of intelligence and the most malleable. However, there is a lack of understanding and consensus on the definition of EI as it relates to how interventions vary for children versus adults. The lack of culturally

effective measurement tools and interventions has limited the application of EI programs within diverse communities, and especially in those with vulnerable populations. This paper has shown that EI skill building is a preventative intervention for children in communities whose lower SES, higher rates of high school dropout, and violence make them extremely vulnerable. Targeting younger children provides support earlier in children's formative academic and emotional development, equips them with skills to navigate severe environmental stressors, ultimately decreases the risk of violent behavior and engagement in other risky behaviors, and increases physical health. EI skill building represents a preventative approach that has a direct impact on the long-term public health of vulnerable communities.

This paper reviewed how to implement EI programs within vulnerable communities with younger children, questions still remain about what needs to be done in the future. Based on this review of the EI literature and the Richmond case study the following are four recommendations to improve children's abilities to develop interpersonal and leadership skills focusing on vulnerable communities:

1. More research to be conducted on effective, culturally appropriate measurement tools and interventions for children in vulnerable communities;
2. Continue the collaborative program in Richmond, CA and to expand it to more grades and elementary schools within the city;
3. Provide collaborative interventions in vulnerable communities similar to Richmond CA, to increase the children's EI skills.
4. Provide insight on the generalizability of this child-focused vulnerable community approach to EI with the general population of children.

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