# ION CREANGĂ STATE PEDAGOGICAL UNIVERSITY OF CHIŞINĂU

As a manuscript

CZU: 376.36:159.942-053.4 (043.2)

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# THE DEVELOPMENT OF EMOTIONAL INTELLIGENCE IN PRESCHOOL CHILDREN WITH SPEECH DISORDERS

Specialty 534.01 – Special Pedagogy

**SUMMARY** 

of the doctoral thesis in educational sciences

# CHIŞINĂU, 2025

The thesis was elaborated within the Department of Psychopedagogy and Special Psychopedagogy, "Ion Creangă" State Pedagogical University of Chişinău.

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The thesis and the abstract can be consulted at the Scientific Library of "Ion Creangă" State Pedagogical University of Chișinău (<a href="www.upsc.md">www.upsc.md</a> ) and on the website of ANACEC (<a href="www.cnaa.md">www.cnaa.md</a> ).

The abstract was sent on 18.11. 2025.

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# LIST OF ABBREVIATIONS

EI – Emotional Intelligence

GE – Experimental Group

CG - Control Group

EC – Emotional Competencies

SC – Social Competencies

GI - General Intelligence

E – Educator

P – Parent

SIDPEI - Integrated Strategic Project for the Development of Emotional

Intelligence

SL – Speech Disorders

SPU "Ion Creangă" – "Ion Creangă" State Pedagogical University of Chișinău

#### CONCEPTUAL REFERENCES OF THE RESEARCH

The relevance and importance of the research problem for the field of *special pedagogy* can be argued from both a theoretical and a practical perspective.

From a theoretical perspective, we take into account the influences exerted in recent decades within the educational environment by the conceptual and operational models promoted by the authors who launched and consolidated the theory of *emotional intelligence* (Peter Salovey, John Mayer, Daniel Goleman). At this level, we particularly valued the theoretical model with managerial impact, elaborated and developed by Daniel Goleman [12].

From a practical perspective, we consider the important role that emotional intelligence plays in everyone's life in general, and especially in the relationship between the educator (teacher, parent) and the learner (preschooler, pupil), with particular emphasis on different psychological ages (in our case, preschool age) and within various institutional contexts (in our case, the kindergarten as the basic unit of preschool education).

On the theoretical level, it is important to highlight that emotional intelligence, once recognized and defined conceptually, can be identified and operationalized through the development of an instrument capable of measuring the Emotional Quotient (EQ-i), created and applied in the U.S.A. by Reuven Bar-On [2].

Experiments have demonstrated that: a) such an EQ-i can be improved at any age, provided there is effective psychological and pedagogical intervention adapted to the characteristics of each individual case (individual, community, etc.); b) the process reaches an appropriate level of completion if initiated at an early age, particularly when critical issues are identified in the areas of social behavior and/or verbal and nonverbal language; c) delayed interventions have a negative impact in the short term (during preschool age), *medium term* (generating phenomena of school maladaptation), and even long term (inappropriate behaviors in adulthood) [2].

From a practical point of view, emotional intelligence is described as a psychological and social experience that capitalizes on the affective and cognitive resources of the learner's personality, in relation to the characteristics of age (preschool) and the community environment (the child's family and the kindergarten as the pedagogical institution, in our case). Currently, a new approach is required both from educators and parents, to facilitate the maximum potential development of preschoolers in accordance with societal demands and the challenges of the educational environment, which require creative methodological solutions for the optimal psychological and social development of every child.

Preschoolers with speech disorders often face significant difficulties in developing emotional intelligence, which may negatively affect their intrapersonal and interpersonal well-being, their adaptation to educational environments (formal and non-formal), and their social relationships. In turn, emotional disorders disrupt both the verbal and behavioral conduct of the child, within the context of constant deficits in communication (at the levels of understanding and semantic-pragmatic interaction), and hinder any process of fostering emotional and social intelligence.

Recent studies confirm the critical issue highlighted above. There is a significant increase in the number of children diagnosed with speech disorders, caused and/or maintained by a deficit in emotional intelligence (approximately 5–10% of the preschool population, according to the American Speech-Language–Hearing Association, 2020). Solutions can be found in improving the diagnosis and awareness of speech problems among parents and educators. These issues are not limited to verbal communication difficulties but also have implications for emotional and social development, leading to negative consequences in preschool (and later school) learning and in community behavior (within the family, kindergarten, school, etc.).

A second critical issue arises from the fact that most educational programs focus primarily on the recovery of linguistic abilities, while neglecting emotional and social aspects. Addressing this problem requires the implementation of *integrated interventions* designed to support children in all areas of their psychological and social development. Such interventions are increasingly necessary, given that: a) lifestyle changes have significantly affected the social and educational interactions of children, including those with speech disorders; b) the increased frequency of online learning has created additional challenges, leading to certain forms of isolation and even social anxiety; c) research has demonstrated a strong connection between performance in school (and preschool) learning and healthy social relationships—indicating a higher level of emotional resilience [13].

The development of emotional intelligence during the preschool period is essential for proper adaptation to the challenges of community life (family, kindergarten, school), with the special contribution of parents and teachers. The necessary solutions lie in the field of parental education and teacher training through innovative, integrated, and personalized intervention programs capable of supporting the development of emotional intelligence (EI) in preschoolers with speech disorders (SD). These programs ensure the acquisition of methods of speech therapy and emotional development techniques, grounded in and practiced through an interdisciplinary framework (educational and developmental psychology, special pedagogy, speech therapy, psycholinguistics).

An integrated approach to emotional and linguistic development in preschoolers with speech disorders is essential for improving their overall well-being and preparing them for school adaptation. Within an intervention program, the research seeks to provide practical and effective solutions to support children with speech disorders both personally and socially, thereby contributing to inclusive and equitable education.

Against this broader problematic background, the research *involved identifying* and overcoming the contradiction between the requirements of an innovative intervention program—based on all the psychological and social resources typical of the preschooler's personality—and the current possibilities of children with speech disorders, conditioned by their limited cognitive and socio-affective development. This was studied both longitudinally and transversally, as a phenomenon generated and sustained by cultural and community life constraints within the family.

**Degree of research on the problem**. Emotional intelligence has become an *essential concept* in psychology and education, significantly impacting how individuals interact and manage their emotions. With the popularization of this term, numerous authors have contributed to defining, exploring, and applying emotional intelligence in various fields, including psychology, education, and human resources. Among the authors with significant contributions in this area are: Daniel Goleman, Reuven Bar-On, John D. Mayer and Peter Salovey, Mihai Zlate, Tinca Creţu, Nicolae Mitrofan, Sorin Cristea, Mihaela Roco, Cojocaru Borozan Maia, Albert Ellis, Howard Gardner, Travis Bradberry, Lev Vygotsky, Carolina Bodea-Haţegan, Emil Verza, Ion-Ovidiu Pânişoară, Constantin Păunescu, and Valentina Olărescu.

These *studies* highlight the importance of integrating emotional intelligence into early education and special pedagogy programs. Findings suggest that progress in emotional and social education has the potential to support the development of these skills while simultaneously improving the effectiveness of speech therapy interventions. Therefore, the integration of emotional intelligence into education represents a promising approach to support the holistic development of children, addressing current challenges in the fields of education and therapy.

**Research problem.** Difficulties in developing *emotional intelligence* in children with speech disorders lead to poor self-regulation and intense, unprocessed emotional reactions, increasing the risk of encountering barriers due to underdeveloped *emotional vocabulary* and emotional communication/interaction skills. This

reduces the mediating role of emotional intelligence between language problems and reactive behaviors. *Addressing this scientific problem* requires resolving the contradiction between the limited/low development of emotional intelligence in preschoolers with speech disorders and the demands of interaction with their socioeducational environment (family, institutional, community) through the application of an innovative intervention program tailored to the specific needs and available resources of preschoolers with speech disorders.

From this perspective, it is necessary to: a) immediately understand the difficulties in linguistic expression, which are negatively stabilized; b) design and develop effective psycho-pedagogical and social corrective and supportive interventions; c) create an innovative intervention program aimed at improving the emotional intelligence of preschoolers with speech disorders, using techniques adapted to their specific needs; d) prioritize practical solutions for addressing critical situations—linguistic, socio-emotional, and behavioral—with immediate impact and major medium- and long-term risks; e) operationalize specific interactive activities, conducted cyclically through role-playing games and exercises in emotion recognition and expression, integrated into the daily routine of the children.

**Epistemological framework.** Our research focused on a comprehensive set of *epistemological references*, which constitute the theoretical foundation for the development of *emotional intelligence* (EI) in preschoolers with speech disorders. At the forefront, the study was based on the fundamental theories of emotional intelligence, including the ability model proposed by Mayer and Salovey (1997), which views EI as a set of distinct abilities, as well as the mixed model supported by D. Goleman (1995), which combines personality traits with essential *emotional competencies* [12, 13, 29].

The research was also guided by developmental psychology perspectives, drawing inspiration from the works of Jean Piaget (1952), which provide insight into how children construct knowledge about the world, and Lev Vygotsky (1978), whose theories emphasize the importance of social interactions for *learning and development*. Additionally, Erik Erikson's (1950) theories on psychosocial development provided a framework for exploring emotional stages and developmental crises through which a child progresses in forming their identity [24, 25, 39, 40].

In parallel, the study adopted principles of inclusive and special education, enabling the development of educational strategies that specifically address the individual needs of preschoolers with speech disorders. This approach was grounded in the works of authors such as P. D. Hallahan and J. M. Kauffman (2000) and their colleagues, who emphasized the importance of personalized interventions.

A key reference was the integration of the social and cultural context in the analysis of emotional development, based on the contributions of U. Bronfenbrenner (1979), whose ecological model highlights how different environments (family, school, and community) influence children's socio-emotional development. This approach underscores the importance of an educational system sensitive to cultural and linguistic diversity.

In the context of rapid changes in the field of education, emotional intelligence represents an essential element for supporting the socio-emotional development of children, particularly in preschool education. Numerous studies support this assertion, including the works of Asher and Rose (1997); Compas, Worsham, and Ey (1992); Crick and Dodge (1994); Denham (1999); Fox (1994); Garber, Braafladt, and Zelman (1991); Parke, Cassidy, Burks, Carson, and Boyum (1992); Saarni (1992); Thompson (1991); Wolchik and Sandler (1997) [1, p. 88].

Through these *epistemological references*, the research provides a robust framework for investigating and promoting EI in children, ensuring an interdisciplinary and comprehensive approach.

**Research object, hypothesis, aim, and objectives**. Object of the research: The process of emotional intelligence (EI) development in preschoolers with speech disorders (SD).

**Research hypothesis:** By developing and implementing an innovative intervention program aimed at enhancing EI in preschoolers with SD, which includes techniques adapted to the children's specific needs and applied both in institutional and family settings, practical and effective solutions are provided to support their personal and social development, thereby contributing to a more inclusive and equitable education.

**Aim of the research:** To explore and develop effective strategies for improving emotional intelligence in preschoolers with speech disorders.

**General objective:** To establish the theoretical and methodological framework for the development of emotional intelligence in preschoolers with speech disorders.

**Specific objectives**: Establishing the conceptual framework; Assessing the current level of socioemotional competencies in preschoolers with SD; Using standardized measurement tools and qualitative observations to evaluate the current level of emotional and social competencies; Identifying factors influencing the development of EI in these children; Developing and implementing an innovative intervention program; Experimentally validating the effectiveness of the applied intervention program.

**Axiological perspective:** Commitment to research ethics, particularly when working with preschoolers, ensuring the protection of their rights and well-being; emphasis on sensitivity to cultural and individual diversity, which influences the perception and expression of emotions.

**Research methodology:** Developed through the application of the theoretical framework to the issues of preschoolers with speech disorders. The research, methodologically guided in Chapter 2, introduces the intervention program, while operational details are described in Chapter 3. Implementing this program in the established context involves: a) combining longitudinal and cross-sectional research strategies; b) using research methods and procedures appropriate for the addressed problem.

**Research design:** The project proposes a mixed research design, combining qualitative methods (such as interviews and observations) for a deep understanding of the phenomenon, with quantitative methods (such as standardized questionnaires) for evaluating the specific effects of interventions or EI development programs.

**Scientific novelty and originality:** The research combines analytical perspectives from complementary domains—*epistemological*, *technological*, *and praxiological*—and represents an advanced activity within special psychopedagogy. Both intra- and interdisciplinary approaches are necessary to implement an effective program for fostering EI development in preschoolers with SD. This program is innovative, offering personalized interventions adapted to the emotional and communication needs of preschoolers.

**Practical value of the study:** Provides concrete solutions and methodological recommendations necessary to improve educational and therapeutic interventions, guiding special pedagogy practices and supporting the preschool family and educational environment. Raising awareness among education stakeholders addresses the challenges of preschoolers with SD and promotes equal opportunities for psychological development and pedagogical success.

**Approval and implementation of scientific results:** Results have been presented, examined, and validated by the methodological committee of the participating educational institution and the Department of Psychopedagogy and Special Psychopedagogy (SPU "Ion Creangă") through presentations at various scientific forums.

**Publications on the thesis topic:** The scientific findings were published in 14 scientific articles in specialized journals and presented at scientific conferences.

**Keywords:** emotional intelligence, preschoolers, speech disorders, cognitive development, early intervention, social intelligence, emotional competencies, intervention program, risk factors, educational support.

**Thesis volume and structure:** The thesis consists of: abstract, introduction, three chapters, conclusions and recommendations, bibliography 227 titles, 29 appendices, 39 tables, and 20 figures. The total volume of the thesis is 265, of which 149 is the main text.

#### **CONTENT OF THE THESIS**

In the introductory section, the relevance of the topic is highlighted, the current context of the studied field is analyzed, and the innovation introduced by the study is emphasized. The problem and subject of the investigation are clarified, while the aim, objectives, and hypothesis of the research are stated, outlining the methodology employed. The scientific novelty and originality of the work, as well as the resolved scientific problem, are emphasized. The theoretical importance and practical value of the conclusions are detailed, along with an explanation of the process of validating and applying the results obtained.

Chapter 1: Theoretical and Conceptual Approaches to the Development of Emotional Intelligence, provides a detailed overview of how emotional intelligence (EI) and general intelligence (GI) interconnect, having a significant impact on preschool child development. Through theoretical and practical exploration of these concepts, a pedagogical framework is proposed to support holistic development, where EI plays a central role in preparing preschoolers for the future challenges of formal education and life.

*Intelligence, as a general aptitude and multidimensional personality trait,* is defined and analyzed theoretically, methodologically, and practically, in relation to:

- a) reference domain: represented by the child's ability to carry out cognitive activities for solving both ordinary and complex problems in new situations [34];
- b) functions performed: general functions, involving understanding of information accumulated in formal, non-formal, and informal contexts; specific functions, including spontaneous understanding through recognition, as well as simple and discursive recombination through fundamental and instrumental operations of thought [21];
- c) basic structure, identified and analyzed according to relatively recent theories: Theory of Multiple Intelligences (H. Gardner, 1983, 2015), emotional intelligence theory (D. Goleman, 1996, 2000, 2008), and constructivist models—both structuralist-genetic (J. Piaget, 1971, 1972) and socio-cultural (L. Vygotsky, 1972)—which clarify, in complementary ways, the relationship between development and learning, and between learning and development, based on the special utilization of continuously evolving intelligence resources [29].

Analysis of historical theoretical and practical **EI** models established in recent decades:

**a.** The model developed by Peter Salovey and John Mayer:

Launched in 1990, it introduced the concept of emotional intelligence (EI). The term EQ later became a popular abbreviation for emotional intelligence. EI has three connotations: culturally broad, popular, and scientific, referring to the concepts and skills that allow for the processing of emotional information [29].

The "demonstrable theory" addresses: EI as a personality trait based on four processes and mechanisms (motivation, emotion, cognition, and awareness) through which specific models (of the self, the self in the world, and the world) can be constructed and certain general traits identified (extraversion–introversion, verbal–logical-mathematical intelligence, dogmatism–creativity, friendliness–hostility); EI as a mental aptitude, transformed into a "quadripartite model", (which articulates perception, integration, understanding, and management of emotions), providing access to intrapersonal and interpersonal intelligence (Gardner, 1983, 2015) engaged in the functional structure of emotional intelligence [19].

- b. The model developed by Reuven Bar-On: This model defines EI as "a set of non-cognitive capacities, competencies, and skills that influence a person's ability to succeed in adapting to environmental demands and pressures." The model proposes a self-assessment scale for EI in the form of EQ-i (EQ = emotional intelligence quotient), which allows for the identification of the functional structure of EI based on the relationship between intrapersonal aspects (emotional self-awareness, assertiveness, self-respect, self-actualization, and independence) and interpersonal aspects (empathy, interpersonal relationships, and social responsibility). These aspects are involved in problem-solving, stress management, and in creating a general mood (happiness and optimism) [1, 2].
- **c.** The model developed by Daniel Goleman. Conceptualizes IQ and EI as competencies that are not opposed but rather separate. In real life, "each of us has a mixture of IQ and EI"; at certain levels, "every person has both cognitive and emotional intelligence" with general and specific qualities that merge" [12].

The psychological development of preschoolers has highlighted the role of EI in language development within the community context (family, kindergarten, local community, etc.).

At a *general level*, increasingly advanced characteristics are observed: attitudes (affective, motivational) towards family and kindergarten; complex and sometimes contradictory emotional states; sustained willpower in the affective domain; primary needs and immediate interests expressed through strong emotions, affective states, and emerging feelings; communication, related to the development of verbal and nonverbal language according to age-specific characteristics [18, 40, 41].

The socio-affective state of the preschooler is evidenced by how the child acts, relates, plays, and participates in group and individual activities. It is supported by the development of observational skills that stimulate environmental knowledge and by an increased capacity for non-cognitive affective-motivational and volitional-character engagement in community life, in relation to family members, neighbors, the educator, and kindergarten staff, resulting in the "joy with which the child responds *emotionally* to adult requests" [24, 25, 35, 38, 39, 40].

The transition process from the preoperational to the concrete operational stage occurs alongside *language development*, which supports: a) *intuitive experience* through direct contact with various "objects" and "situations"; b) *representations* that engage *memory and imagination*, impacting the formation of emotional self-awareness; c) "Reproductive-static images" related to the exercise of mental operations [25, 40].

The intellectual development of preschoolers involves nearly all mental activity necessary to achieve the transition from: a) static reproduction to memorization capacity (activities such as play or reciting poems according to Leontiev); b) involuntary and mechanical memorization in the pre-preschool period to the logical forms of memorization appearing in preschool (according to L. Vygotsky); c) factual memory to verbal memory; d) reactive, involuntary attention to active, voluntary attention; e) symbolic thinking to intuitive thinking, which can be developed constructively [38, 40].

The development of preschoolers' language in social contexts (kindergarten, family, local educational community) mobilizes mental processes (cognitive, volitional, and affective) and personality traits (temperament, aptitudes, character, creativity) in specific activities (such as educational play, work-based, and creative activities). These activities are conditioned by acquired skills, motivation, and sustained socioemotional attention, resulting in the training of specific verbal language functions in the kindergarten context, such as: affective, connotative, referential; playful, practical, representational, dialectical; expressive-emotional, etc. [18].

The analysis highlights several attributes of preschoolers' language: a) an adequate tool for objective coding, dependent on the cultural and pedagogical quality of the environment (family, kindergarten, local community); b) an internal matrix structuring the entire cognitive (preoperational thinking) and affective

organization (intense emotions regulating or dysregulating verbal behavior); c) a *code for transmitting informational content* (representations memorized within the zone of proximal development and skills developed through multiple exercises integrated into activities aimed at both playful and educational goals); d) *greater volume, fluency, and expressivity*, anticipating "socialized and later cultured forms of speech" necessary for school integration; e) Special exercise of affective functions ("spontaneous or semi-deliberate expression of emotions and impulses") and playful functions (early active, rhythmic repetitions, phonetic adjustments and confrontations, combinations of effects) [35, 38, 39].

Specific objectives in preschool education involve designing activities based on "verbal play", which includes jokes and witty wordplay, and which stimulate: a) the practical use of language in both collaborative and competitive contexts; b) intervention through concise and energetic phrases proposed by the family (especially the mother) and the educator; c) the use of narrative and evocative language through "elementary educational presentations" that engage emotional intelligence [22].

The dynamics of preschoolers' language confirms its dual nature: An innate competence (as reported by N. N. Chomsky in reference to "generative grammar" inherent to every human); A flexible characteristic, interpreted differently by: J. Piaget, who emphasized the internal determination of language in accordance with stages of cognitive development (preoperational between 3–6/7 years, concrete operational between 6/7–11/12 years); L. Vygotsky, who emphasized the external, socio-cultural determination of language, seen as a "complex product of accumulated learning throughout history," resulting from *sociocultural interaction* between the *adult educator* (parent, teacher, tutor) and the child in an open context [24, 25, 38, 39].

The formation and development of preschool language indicates that "around age 5" children acquire complex language structures. Educationally, it is important to leverage models from language psychology, which highlight its qualities as: a) an innate capacity dependent on the maturation of the central nervous system (N. Chomsky); b) an acquired product, particularly developed in kindergarten during the preoperational stage, "ensuring access to object permanence" (J. Piaget); c) a sequence of social learning experiences leading to the efficient acquisition of knowledge through memory (L. Vygotsky), facilitated by actions, images, and symbols (L. S. Vygotsky, 1971, 1972; J. S. Bruner, 1970).

The refinement of preschoolers' language occurs during the transition from situational to contextual language, and from verbal behavior dominated by egocentric language (prolonged monologues even in group settings, where "each child speaks without regard to others") to verbal behaviors characteristic of socialized language (during the preoperational period, around 6–7 years).

Language disorders (LD) in preschoolers are analyzed based on multiple research models: systemic, categorial, analytic, and descriptive, identifying six categories of language disorders: auditory-verbal agnosia, verbal dyspraxia, phonological programming deficits, phonological-syntactic disorders, lexical-syntactic disorders, and structural-semantic disorders [19].

*In analyzing* preschool language development, attention must be given to the pre-kindergarten period (ages 2–3) and each developmental stage: small group (3–4 years), middle group (4–5 years), large group (5–6/7 years).

At ages 2–3, persistent pronunciation difficulties, word prolongations, and reduction of words to initial or final syllables occur, accompanied by negative socio-emotional experiences and behaviors. On this basis, "analysis of the child's developmental level" aims to identify risk factors or prognoses regarding the development of communication skills [30].

Preschool age is divided into two "age intervals": a) initiation preschool cycle (3–4 years), with characteristics dependent on language development: functional abilities, speech intelligibility, narrative and communicational skills, and emotional disorders. Within the verbal behavior model (internationally validated),

it is necessary to consider: causes (psychophysiological, cognitive, and emotional); facts confirming deviations or lack of verbal behavior skills (as per the Integrated *Development Scale, internationally validated*); and negative aspects observed under intervention conditions [30]. b) *Psychological maturation* (4–6/7 years) is characterized by grammatical structuring of language, with key features including: *configuration of functional communication skills, assertion of language prepositions, practice of functional communication skills in dialogues, use of 500–900 intelligible words, development of special skills (reading and writing), and correlation of these special skills with cognitive, socio-affective, and emotional aspects [30].* 

It is important to refer to those *language and communication disorders* that manifest through: "low levels of speech intelligence; deficient prearticulatory skills; reduced conversational abilities; expressive and receptive disorders, as well as emotional and behavioral disturbances" [42].

According to established research (Emil Verza, Valentina Olărescu, Carolina Hațegan, etc.), three categories of language disorders are considered "fundamental," based on anatomical-physiological, linguistic, and psychological criteria. In our research, we focus on dyslalia, which falls under the category of pronunciation disorders (including rhinolalia and dysarthria).

The classification model, developed from the perspective of language development, allows the identification or prevention of dysfunctions (related to dyslalia), which may occur at the level of language as: a) delayed, due to pathological and/or non-pathological causes (social, educational); b) manifesting as a tendency to "interrupt language development"; c) different from normal language [19].

**Dyslalia** is analyzed from two perspectives: a) speech therapy: "disorders in the articulation of speech sounds due to deficits in phonological processing" as well as "incorrect mobilization and coordination of the components of the speech apparatus," which may negatively affect speech intelligibility;

b) educational: establishing an accurate diagnosis (types of disorders), risk factors, and solutions with optimal educational impact, supported by didactic and psychosocial reasoning [19].

A global analysis of dyslalia involves:

- 1) Accurate *differential diagnosis*, completely distinguished from any pronunciation disorder caused by developmental delays or the presence of intellectual or neuromotor disabilities.
- 2) Definition of the main *forms of pronunciation disorders* included in the dyslalia diagnostic category: distortion, omission, substitution.
- 3) *Identification of risk factors* and causes that generate or maintain dyslalia, both organic and functional.
- 4) Construction of the intervention framework necessary to ensure that "physiological dyslalia does not become pathological," which requires: a) early intervention; b) educational partnership (educator, speech therapist, counselor, family); c) elimination of special causes: socio-cultural factors, negative speech models, tolerance or encouragement of incorrect speech, bilingualism or multilingualism, and lack of collaboration between educational partners [19].

Based on the research conducted in *Chapter 1*, the following essential conclusions were drawn:

- 1. *Intelligence* is a complex concept consisting of general and multidimensional components essential for problem-solving. Theories such as bifactorial, multifactorial, and multiple intelligences offer varied perspectives. Emotional intelligence (EI), as a non-cognitive aspect of intelligence, highlights self-awareness, self-motivation, self-regulation, and social skills, reflecting the relationship between cognitive and non-cognitive components, as well as the link between emotional and social aspects.
- 2. Theoretical models emphasize the differences and interactions between EI and emotional competencies (EC). EI, which combines cognitive and emotional elements, refers to the ability to perceive and understand emotions. EC, as defined by D. Goleman, are practical skills developed based on EI through early

social experiences and influence success in social relationships. In education, EI is used to develop EC through practice, allowing the application of cognitive-emotional skills.

- 3. Emotional competencies, developed through knowledge and skills, are divided into general and specific categories and are crucial for preschoolers' adaptation to socio-educational tasks. Emotional intelligence (EI) involves self-assessment, but for young children without fully developed language skills, evaluation is challenging, especially for those with language disorders (LD). Assessing emotional competencies (EC) at this stage is important for providing valuable data to educators and parents, facilitating pedagogical interventions, and supporting socio-emotional development and school readiness.
- 4. According to models such as Reuven Bar-On's, EI is a set of emotional and social skills important for managing emotions in relationships. In preschoolers, abilities such as emotional regulation and labeling are essential for social competence and peer acceptance. EI models, including D. Goleman's, emphasize a holistic approach, integrating social skills and relationship management. Goleman asserts that EI is not genetically predetermined and begins to develop in early childhood through emotional control. The preschool period is critical for emotional influences on a child's socio-affective state. Developing EI requires a suitable environment to achieve significant positive effects.
- 5. The transition of preschoolers from empirical knowledge to logical thinking is supported by the development of language, which aids the formation of representations and intuitive experiences. EI is crucial for psychological development at this age, promoting language growth in social contexts. Between ages 5–7, language disorders can negatively affect verbal intelligence and emotional behavior, limiting social interactions and psychological development. These disorders require integrated interventions that address both language development and the stimulation of emotional competencies, in order to support self-regulation and effective emotion management.

Chapter 2. The level of emotional intelligence development in preschoolers with language disorders This chapter aims to investigate the level of emotional intelligence (EI) in preschoolers with language disorders (LD), in accordance with the general aim and specific objectives of the research. To achieve these objectives, we employed effective research methods that can be integrated into adaptive compensatory strategies. These methods are essential for obtaining relevant data from pedagogical, psychological, and social perspectives.

In this effort, we implemented online questionnaires addressed to parents and educators, as well as screenings for emotional and social competencies (EC and SC) in versions designed for parents and educators. Additionally, an emotion test was administered to the preschool participants. Through these instruments, we aimed to gain a deeper understanding of the impact of language disorders on emotional intelligence in this age group.

The research design determined the selection of a significant sample that: a) provides a comprehensive perspective on the subject under study; b) includes representative groups.

Sample formation procedure: In the first stage, the institutional base of the research was established by selecting the preschool institution and conducting a screening of the participant population. We then formed the experimental group (EG) and the control group (CG).

For this research, a *quasi-experimental study* was chosen. This decision was motivated by the impossibility of fully *randomizing* participants due to objective reasons. In standard experiments, participants are randomly assigned to groups to control external variables. In a *quasi-experimental* study, such random assignment is not possible because groups are formed according to pre-existing characteristics.

This design allows researchers to study the effects of interventions and make comparisons between groups while maintaining a certain degree of control over variables. In educational settings and interventions for children, it is not always feasible to randomly assign participants to intervention and control groups.

Although it does not provide the same level of control as a randomized experiment, a quasi-experimental study can yield useful and relevant information under real-world conditions.

The study included 68 preschoolers aged 5–7 years, of which 34 had language disorders (LD) and 34 had typical development (TD). The EG included preschoolers with LD who were not receiving speech therapy services, while the control group included preschoolers with TD. Inclusion criteria were age and an official diagnosis of LD for EG, or the absence of language difficulties for CG.

It was found that the majority of children with LD were boys, reflecting general trends observed in the specialized literature. This gender distribution represents a limitation of the study but accurately reflects reality. The CG was formed randomly, with a gender imbalance having more girls than boys. Additionally, the research involved 100 educators and 236 parents.

Methodologically, each group was selected to answer research questions from different perspectives and to contribute to a holistic understanding of the investigated phenomenon.

The research was conducted during the 2023–2024 school year at Grădinița cu Program Prelungit Nr. 1 Valu lui Traian, Constanța County, a unit that also includes two other structures.

Within the *diagnostic experiment*, the aim was to identify and analyze the impact of language disorders (LD) on the socio-emotional development of preschoolers. This approach is necessary to better understand the needs of these children and to develop effective interventions that support their optimal development.

In line with the **research aim**, the **following objectives** were formulated for the diagnostic experiment: Assess the level of socio-emotional development in preschoolers with LD and typical development (TD); Identify specific difficulties encountered by preschoolers with LD; Analyze the factors that influence socio-emotional development; Promote appropriate interventions and improvement strategies tailored to the situation; Monitor progress over time.

*Working hypothesis*: Preschoolers with language disorders (LD) exhibit significant differences in socio-emotional development compared to preschoolers without LD.

**Research methods** included survey methods as well as standardized tests (table 1).

Table 1. Distribution of research instruments in the diagnostic experiment across respondent groups

Sample	Assessment Instruments	
		No.
Educators	- Emotional Competence Screening – Educator Form (SCE-E) 5–7 years, 18	68
	items	68
	- Social Competence Screening – Educator Form (SCS-E) 5–7 years, 24 items	100
	- Online questionnaire for teaching staff	
Parents	- Emotional Competence Screening – Parent Form (SCE-P) 5–7 years, 16 items	68
	- Social Competence Screening – Parent Form (SCS-P) 5–7 years, 22 items	68
	- Online questionnaire for parents	236
Preschoolers	- Basic Emotions Recognition Test (Paul Ekman Test)	68

Presentation and Interpretation of Screening Results on the Development of Emotional Competence (EC) in Preschoolers Aged 5–6/7 Years. The results of the screening, presented in Table 2, highlight significant differences between the evaluations made by educators and those made by parents. According to the table, the

codes SCE-E (Educator Form) and SCE-P (Parent Form) indicate three levels of emotional development: red, yellow, and green.

Table 2. Distribution of Subjects According to SCE-P and SCE-E Codes – Assessment Stage

f	Code							Code						
SCE- E	red*		yellow**		green***		SCE- P	red*		yellow**		green***		
	nr	%	nr	%	nr	%		nr	%	nr	%	nr	%	
GE	15	44,11	17	50,00	2	5,88	GE	24	70,58	9	26,47	1	2,95	
GC	11	32,35	7	20,58	16	47,05	GC	1	2,95	18	52,94	15	44,11	
Total	26	38,23	24	35,29	18	26,46	Total	25	36,76	27	39,70	16	23,52	

# **Code legend:**

- Red\* emotional competencies assessed as poorly developed
- Yellow \*\*- emotional competencies assessed as moderately developed
- Green\*\*\* emotional competencies assessed as well developed and consolidated

Educators' evaluations of preschoolers in the GE indicated that 44.11% of children were in the emotional risk zone (red code), 50% were at a medium level (yellow code), and only 5.88% had well-developed skills (green code). Parents perceived the situation more negatively, with 70.58% in the red code, 26.47% in yellow, and only 2.95% in green. Significant differences between parent and educator evaluations suggest contrasting perspectives and potential issues in the family environment for children with language disorders (LD). These discrepancies may be caused by different observation contexts and evaluation standards. The analysis emphasizes the need for collaboration between parents and educators to support children's emotional development, focusing on understanding, expressing, and self-regulating emotions.

# Screening of Social Competence (SC) Development in 5–7-Year-Old Preschoolers

Evaluations conducted by parents and educators provide a comprehensive view of children's social behavior both at home and in the educational setting. The study analyzes correlations and discrepancies between the two respondent groups to support the development of personalized interventions.

According to the results in Table 3, educators assessed 64.70% of preschoolers with a *red code* for social competencies, 32.35% *with yellow*, and only 2.95% with a *green code*, indicating significant deficiencies. In contrast, parents assessed 50% of children with a *red code*, 32.35% *with yellow*, and 17.65% *with green*, suggesting a more optimistic perception.

Table 3. Distribution of Subjects According to SCS-E and SCS-P Codes, Observation Stage

		Code						code						
SCS- E		red*	Yellow**		green***		SCS-P	red*		Yellow**		green***		
	nr	%	nr	%	nr	%		nr	%	nr	%	nr		
G.E.	22	64,70	11	32,35	1	2,95	G.E.	17	50,00	11	32,35	6	17,65	
G.C.	2	5,88	15	44,12	17	50,00	G.C.	1	2,95	12	35,29	21	61,76	
Total	24	35,29	26	38,23	18	26,47	Total	18	26,47	23	33,82	27	39,70	

The differences between parents' and educators' assessments reveal a discrepancy in the perception of social competencies (SC) of preschoolers, highlighting the need for personalized educational interventions. Collaboration among parents, educators, and specialists is essential for the development of these interventions, providing valuable insights into children's social competencies in different contexts. The analysis focuses on *rule compliance*, *social interaction*, *and prosocial behavior*.

Parallel evaluations conducted by educators and parents (Figure 1) offer a comprehensive and balanced view of the socio-emotional development of children, which is fundamental for designing personalized educational interventions and optimally supporting their development.

We observe clear differences in the development of competencies between the control group (GC, first four positions) and the experimental group (GE), with the red code serving as an indicator of a low level of competency development.

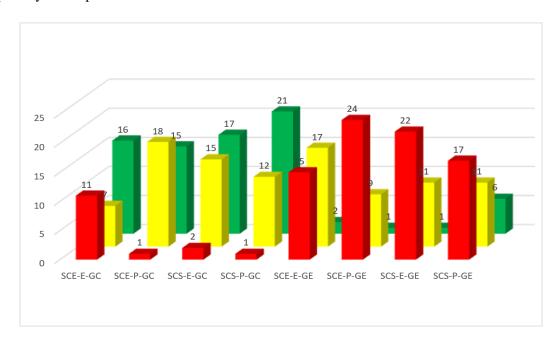


Figure 1. Results of SCS-E 5/7 years; SCS-P 5/7 years; SCE-E 5/7 years and SCE-P test

*Emotional Competencies*: Most scores fall within the yellow zone, indicating moderately developed competencies; a predominance of green scores, according to parents, suggests well-developed emotional competencies. Red scores are more frequent in educators' assessments, indicating areas in need of improvement.

Social Competencies: Green and yellow scores show a more balanced distribution, reflecting a varied perception of social competencies. Significant green scores indicate well-developed social skills, while a high presence of red scores in educators' evaluations highlights less developed competencies.

There is a *notable difference* between parents' and educators' perceptions, with parents tending to rate children's competencies as more developed. This may indicate the need for a collaborative approach to address differing perspectives and enhance support provided to the children.

## Results of preschoolers' basic emotion recognition test (Paul Ekman Test)

In the preschool context, the ability to recognize and respond appropriately to different emotions is essential for forming healthy interpersonal relationships and successfully navigating diverse environments. Emotion recognition tests thus become valuable tools for assessing and understanding these fundamental skills.

We aimed to examine the performance of the two groups of preschoolers in the emotion recognition test, focusing on basic emotions such as happiness, sadness, fear, anger, surprise, and disgust.

To assess in more detail the performance differences between the control group (GC) and experimental group (GE) regarding total emotion recognition, the mean rank and rank sums were calculated for each group using the Mann-Whitney U test (Table 4). These calculations allowed us to compare the distributions of emotion recognition scores between the two groups. The mean ranks for each group reflect the relative position of the scores, providing additional insights into which group generally achieved higher scores. The rank sums offer an overview of the total distribution of scores within each group, contributing to understanding the depth of performance differences. This information is essential for correctly interpreting and contextualizing the Mann-Whitney U test results, confirming or complementing conclusions regarding the statistical significance of differences between the groups.

			8
Group	N	Mean Rank	Sum of Ranks
Control	34	43.21	1469.00
Experimental	34	25.79	877.00
Total	68		

**Table 4. Mean Ranks for Emotion Recognition** 

Mean Rank (GC): The mean rank for the control group (GC) is 43.21. This indicates that, on average, participants in this group received higher ranks in the distribution. Mean Rank (GE): The mean rank for the experimental group (GE) is 25.79, suggesting that GE participants tend to have lower ranks compared to GC.

Sum of Ranks (GC): The sum of ranks for the control group is 1469.00, obtained by adding all ranks assigned to the GC participants. Sum of Ranks (GE): Similarly, the sum of ranks for the experimental group is 877.00. The significant difference between the mean ranks may indicate a statistical difference between the two groups. Specifically, the higher mean rank in GC suggests that participants in this group achieved higher scores on the variable of interest compared to GE.

The mean rank was significantly higher for GC (43.21) than for GE (25.79), indicating a superior level of emotion recognition among the children in the control group. The sum of ranks for each group, 1469.00 for GC and 877.00 for GE, further confirms this trend, highlighting a discrepancy between the two groups. These results emphasize the significant differences in emotion recognition abilities between the analyzed groups.

Based on these findings, we can conclude that there is a statistically significant difference between the two groups regarding the variable "total emotion recognition test." It is therefore reasonable to assume that the grouping factor had a significant effect on emotion recognition.

The questionnaires completed by teachers and parents regarding the importance of socio-emotional development in preschoolers with language disorders (LD) highlight the widespread recognition of this aspect as essential for children's academic and social success.

Teachers are aware of the significant positive influence that well-stimulated socio-emotional development can have on preschoolers' behavior and relational skills. The questionnaire also highlights the need for additional resources and ongoing professional training for teachers, enabling them to better support

this development. Furthermore, parental involvement and awareness are considered essential, yet variable, indicating the need to improve collaboration and communication with families.

Parents are aware of and concerned about the importance of their children's socio-emotional development, and the desire for improvement and active collaboration between family and educational settings is a priority. It is crucial to establish stronger connections between parents and teachers by providing appropriate resources and practical strategies, thereby encouraging a unified and effective approach to supporting children. Increased parental involvement and continuous information sharing are necessary steps to ensure the harmonious development of preschoolers with LD.

#### Conclusions:

- 1. Emotional intelligence (EI) requires self-assessment and complex tasks that may exceed the capabilities of young children, especially those with language disorders (LD). At this age, it is more appropriate to evaluate emotional competencies (EC), which more accurately reflect current abilities. Assessment tools adapted for preschoolers provide valuable information for psychopedagogical interventions. The research showed that preschoolers with LD have distinct socio-emotional profiles, requiring personalized approaches.
- 2. The analysis evaluated EC and social competencies (SC) in preschoolers in terms of understanding, expression, emotional self-regulation, rule-following, social interaction, and prosocial behavior. Preschoolers without LD demonstrated significantly higher competencies than those with LD. According to parents, these children had SC 19% higher and EC 24% higher, while according to educators, SC was 26% higher and EC 14% higher. These differences highlight the negative impact of LD on socio-emotional development and the relevance of the observational context. Educators tend to perceive EC more favorably due to the diversity of environments in which they observe the children. Differences in perception between parents and educators are valuable for developing intervention strategies for preschoolers with LD.
- 3. The emotion recognition test based on Paul Ekman's model showed that preschoolers without LD identified emotions better than those with LD, indicating a negative impact of LD on emotional skills. This emphasizes the need for early and personalized interventions. Differences between groups highlight the influence of LD on socio-emotional development. Personalized educational programs, including adapted emotional education, are essential for children with LD. Future research should explore the role of genetics and the environment, as well-developed language correlates with higher EC and SC, requiring integrative approaches in therapeutic programs.
- 4. The teacher questionnaire highlights the importance of close collaboration between teachers and parents to create a coherent educational environment for preschoolers with LD. Proper socio-emotional development is crucial for academic and social success, and additional resources and ongoing teacher training are necessary. Parental involvement is essential but variable, indicating the need for improved communication with families. The conclusions suggest the necessity of improving educational practices, providing continuous teacher training, and increasing parental involvement to optimize socio-emotional development.
- 5. The parent questionnaire shows a strong concern for children's socio-emotional development, emphasizing the desire to collaborate with teachers. It is essential to create strong connections between parents and educators through appropriate resources and practical strategies to support children's harmonious development. Active parental involvement and continuous information sharing are key to supporting children with language disorders.
- 6. The results underline the need for personalized and flexible interventions for children with LD, with collaboration between teachers, speech therapists, and psychologists being essential. Emphasis should be placed on developing emotional intelligence, with continuous assessment. Teacher questionnaires indicate a deep understanding of the impact of language disorders on behavior and highlight the need for differentiated

pedagogical strategies and continuous professional development. Collaboration with psychopedagogical specialists is essential for developing personalized intervention plans.

Chapter 3. Methodology for developing emotional intelligence in preschoolers with language disorders. Research in developmental psychology and education emphasizes that emotional intelligence (EI) influences communication, interpersonal relationships, and social adaptation. Language development plays a crucial role in social and intellectual evolution, and early interventions can significantly enhance children's emotional, social, and cognitive skills. Our program is based on interactive activities and experiential learning, involving both parents and educators to support children with language disorders. Through continuous assessment and program adjustments, we ensure that interventions are effective and tailored to the children. This program contributes to improving the quality of education and the support provided to children with communication difficulties.

The study explores the interaction between emotional intelligence (EI) and emotional competencies (EC), highlighting their impact on social relationships and socio-emotional adaptation in preschoolers. The integrated approach of EI–EC–SC (social competencies) serves as the foundation for educational interventions, transforming restrictive environments into stimulating ones. Drawing inspiration from Lev Vygotsky's ideas, we consider developmental deficits as dynamic and recoverable through adapted education and cultural mediation. Special psychopedagogical interventions aim not only to compensate for primary deficits but also to foster alternative development through social mediation, adapting individual strategies to approximate the child's behavior to typical social patterns. This holistic, potential-centered model utilizes unique compensatory strategies and supports development within the zone of proximal development.

The study of emotional and social competencies in preschoolers with language disorders highlights the close relationship between emotional evolution and linguistic performance. Emotional disturbances and communication deficits inhibit the development of emotional and social intelligence. Early interventions are crucial for improving EI, reducing the impact of language problems, and promoting effective collaboration with the social environment.

The EI development program for children with language disorders includes educational activities such as didactic games, art therapy, and reflective techniques, supporting self-regulation, self-acceptance, and acceptance of others. The integrated strategic project "Together for Success" promotes collaboration between educators and parents to ensure the continuity of EI development in preschoolers, providing effective interventions.

The training sample consisted of 34 *preschoolers with language disorders* aged 5–7 years, their parents, and 20 educators from the institution.

Informed consent was obtained from the parents for their participation and the involvement of their children in the project titled "*Together for Success*." The program included individual and group activities within the pre-school curriculum for the respective age group, carried out in the second half of the day with the institution's agreement and the approval of the Constanța County School Inspectorate.

The overall goal of the Integrated Strategic Project "Together for Success" is to promote and enhance the development of emotional intelligence in children with language disorders by developing social and emotional competencies. The project aims to create a favorable educational environment that facilitates harmonious child development through effective cooperation between the preschool and the family.

The objectives, formulated based on the results of the preliminary experimental study and our observations, focus on: a) active collaboration between educators and parents; b) encouraging parental involvement in activities conducted at preschool; c) enriching dialogue through organizing events to stimulate

preschoolers' EI; d) cultivating the preschool–family partnership, which is necessary for optimal socialization and psychological development of children.

Working hypotheses / operational hypotheses: Participation in socio-emotional intervention programs will strategically support the emotional (EC) and social competencies (SC) of preschoolers with language disorders (LD), compared to initial measurements and assessments; the differences in socio-emotional development between preschoolers with and without LD will be significantly reduced after implementing an adapted intervention program.

The Integrated Strategic Project for the Development of Emotional Intelligence (ISPDEI) for preschoolers with language disorders, "Together for Success", aims to strengthen the connection between activities conducted at preschool and those at home, to enhance the developmental process of preschoolers. The project seeks to increase socio-emotional competencies in children with LD and to actively involve educators and parents in ensuring effective educational interventions. Through various activities, constructive partnerships among all educational stakeholders are encouraged.

Training Programs for Beneficiaries within ISPDEI "Together for Success": Program "The Path to Understanding". This program was designed as an integral part of the strategic project, with the primary goal of deepening the communication competencies of educators involved in the development of emotional intelligence in preschoolers. The training program addresses the need for teacher professional development within a supportive and inclusive learning environment, ensuring: a) understanding and applying fundamental EI concepts in daily activities; b) effective communication with preschoolers in a constructive teaching—learning environment, through advanced interaction and emotional support techniques; c) collaboration with parents and other specialists; d) positive orientation of all necessary early education activities.

*General goal:* The program aims to effectively enhance educators' communication knowledge and skills to promote and support the development of EI in preschoolers with language disorders.

The "Path to Understanding" program for educators was implemented over 20 weeks and focused on improving educational skills through curriculum-based activities on various essential topics.

The program demonstrated effectiveness in equipping educators with essential skills and knowledge to support EI development in preschoolers. Through a comprehensive and structured approach, the program ensured: *improved communication skills*: teachers acquired advanced techniques, including active listening and empathetic expression, enabling effective interaction with children and constructive handling of emotional challenges; *creation of a positive learning environment*: educators were trained to create and maintain a safe and supportive educational climate, encouraging healthy emotional expression and supporting children's emotional development; *development of emotional support strategies*: educators learned to apply various methods for managing emotions individually and in groups, contributing to preschoolers' emotional well-being; *promotion of collaboration and participation*: the program fostered better collaboration between educators, parents, and specialists, creating an effective support network for children, enhancing school—community collaboration, and sharing valuable resources and experiences.

# Training Program for parents: "Family at the center of emotions"

This program targets parents eager to effectively acquire the knowledge and skills necessary to stimulate their children's EI. The program emphasizes parent emotional education, communication skill development, and promotion of effective emotional support strategies. Through these initiatives, parents learn to apply methods adapted to their children's needs, fostering a community environment that encourages healthy emotional expression.

*General goal:* The program aims to help parents effectively acquire the knowledge and skills necessary to stimulate and support children's EI, particularly for those with language disorders.

The "Family at the Center of Emotions" program for parents was structured over a 20-week period, offering continuous opportunities for the development of emotional and social skills.

Key Achievements Following Implementation: a) stimulating emotional awareness: parents gained a better understanding of fundamental and operational concepts about emotions and the role of EI in child development; b) enhanced awareness of emotion management in the family: parents learned to manage emotions effectively in various situations and contexts; c) improved communication skills: participants learned verbal and non-verbal communication techniques, including active listening and constructive feedback, enabling more effective interaction with children and other family members; d) effective emotion management: parents applied methods to identify and regulate negative emotions, developing emotional self-regulation skills that promote a positive family climate; e) strengthened parent—child relationships: the program encouraged a family style that promotes free and healthy emotional expression through improved communication and emotional bonding; f) fostering interaction and mutual support: parents were encouraged to share experiences and resources, building a socio-affective support community that provides ongoing support and opportunities for reciprocal learning.

The "Family at the Center of Emotions" program had a positive impact on parents' individual skills, with pedagogical consequences for the overall family dynamics. By acquiring new competencies, parents are better prepared to contribute to their children's emotional development, providing a solid foundation for future psychological and social challenges.

# Formative program for preschoolers: "Speak and feel"

The formative program for developing EI in preschoolers with language disorders (LD) aims to facilitate the development of socio-emotional competencies in older children with LD. The integrated program for preschoolers is based on a special psychopedagogical approach algorithm for developing socio-emotional competencies. The proposed algorithm includes the following essential stages, each with a specific role in the educational process: emotion recognition; emotion expression; emotion regulation; selection of emotional responses; application and practice of skills; conscious internalization and consolidation.

This comprehensive approach not only aims to develop socio-emotional competencies but also to create an emotional and social support framework for children with language disorders, facilitating their social integration and effective learning.

General Aim of the "Speak and Feel" program: The formative program, structured over 25 weeks, targeted the development of socio-emotional competencies through curriculum-specific activities focusing on EI development. It facilitated significant improvements in multiple areas of child development, contributing to a more harmonious educational and family environment.

Within the program for children with LD, a variety of teaching methods were used, including educational games, sports, role-playing, psychogymnastics, art therapy techniques, and cognitive storytelling. Reflection, as a form of retrospective emotional and semantic evaluation, helps children understand the importance of their actions and develop emotional bonds, contributing to self-acceptance and acceptance of others. A set of methods and techniques was selected specifically to develop EI in these children.

Activities for preschoolers with LD included optional activities for individual skill development, remedial activities in various domains, and games and activities in interest centers.

Key Conclusions Highlighted: development of emotional awareness; improvement of communication skills; emotion management; creation of a supportive environment; enhancement of social relationships.

The preschool program provided a solid foundation for the balanced development of children's EI, preparing them for subsequent transitions in school and social environments. With appropriate support from

parents and educators, these skills contribute to shaping future students who are more confident and better prepared to face current and future challenges.

# Impact of the experimental implementation of ISPDEI on preschoolers with language disorders

As part of the ongoing evaluation of EC, retesting was conducted to measure progress following the implementation of ISPDEI.

The aim was to observe whether previous interventions had a positive impact on these competencies compared to initial testing.

The retesting results are detailed in table 5.

**Table 5. Emotional Competencies Results – Parent/Educator (Retest)** 

SCE	Code						SCE-	Code							
- E	red*		yell	yellow**		en***	P	red*		yellow**		gree	n***		
		T				lo (				la :					
	nr	%	nr	%	nr	%		nr	%	nr	%	nr	%		
G.E.	3	8,82	15	44,12	16	47,05	G.E.	9	26.47	16	47,06	9	26,47		
G.C.	0	0,00	1	2,94	33	97,06	G.C.	2	5,88	12	35,29	20	58,82		
Total	3	4,41	16	23,53	49	72,06	Total	11	16,18	28	41,18	29	42,65		

Retesting GE for SCE-E: red: 3 participants (8.82%), yellow: 15 participants (44.12%), green: 16 participants (47.05%); GC: red: 0 participants (0.00%), yellow: 1 participant (2.94%), green: 33 participants (97.06%). Total: red: 3 participants (4.41%), yellow: 16 participants (23.53%), green: 49 participants (72.06%). Retesting GE for SCE-P: red: 9 participants (26.47%), yellow: 16 participants (47.06%), green: 9 participants (26.47%); GC: red: 2 participants (5.88%), yellow: 12 participants (35.29%), green: 20 participants (58.82%). Total: red: 11 participants (16.18%), yellow: 28 participants (41.18%), green: 29 participants (42.65%).

The retesting results indicate a general improvement in CE evaluated by parents and educators. Although there is still room for improvement, especially in critical areas, the general trend is positive, suggesting the beneficial impact of the implemented programs. Subsequently, focus should be placed on continuous consolidation of these skills and on reducing the number of critical cases.

For social competencies, the results are presented in tables 6.

**Table 6. Social Competencies Results Parent/Educator – Retest** 

SCS	Code	<del>)</del>					SCS-	Code					
- <b>E</b>	red*		yel	low**	green***		P	red	red*		yellow**		**
	nr	%	nr	%	nr	%		nr	%	nr	%	nr	%
G.E.	2	5,89	19	55,88	13	38,24	G.E.	1	2.94	9	26,47	24	70,59
G.C.	0	0,00	10	29,41	24	70,59	G.C.	0	0,00	8	23,52	26	76,47
Total	2	2,94	29	42,64	37	54,41	Total	1	1,47	17	25,00	50	73.53

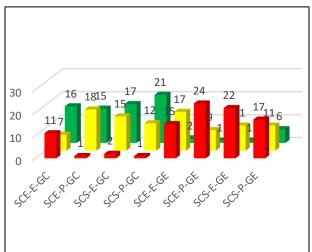
Retesting results for GE for SCS-E: red: 2 participants (5.89%), yellow: 19 participants (55.88%), green: 13 participants (38.24%); GC: red: 0 participants (0.00%), yellow: 10 participants (29.41%), green: 24 participants (70.59%). Total: red: 2 participants (2.94%), yellow: 29 participants (42.64%), green: 37 participants (54.41%).

Retesting **GE** for **SCS-P**: **red**: 1 participant (2.94%), **yellow**: 9 participants (26.47%), **green**: 24 participants (70.59%); GC: **red**: 0 participants (0.00%), **yellow**: 8 participants (23.52%), **green**: 26 participants (76.47%). **Total**: **red**: 1 participant (1.47%), **yellow**: 17 participants (25.00%), **green**: 50 participants (73.53%).

The results show a majority of participants in the green zone, indicating a high level of well-developed social competencies (SC) and the effectiveness of the interventions. However, the presence of a significant number in the yellow zone suggests the need for additional efforts to consolidate the competencies. These data emphasize the importance of optimizing and continuously monitoring future programs to ensure participant progress.

In the field of education and personal development, emotional competencies (EC) and social competencies (SC) play an important role in children's growth and formation. To determine the effectiveness of the interventions carried out, we compared the initial results with those obtained at retesting (Figure 2 and Figure 3).

This comparison helps us identify the progress made and adjust our educational strategies to maximize the positive impact on participants. The ultimate goal is to ensure continuous growth and the consolidation of competencies at an optimal level.



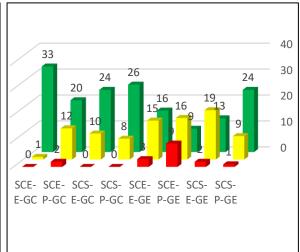


Figure 2 Test results: SCE-P, SCE-E, SCS-P, and SCS-E, (ages 5–7)

Figure 3 Retest results: SCE-P, SCE-E, SCS-P, and SCS-E (ages 5–7)

#### I. Initial testing vs. Final testing – Emotional Competence Scale GC-E

Red category: test -11 participants (approximately 32.35%); retest -0 (0%) = improvement (decrease from 32.35% to 0%); Yellow category: test -7 participants (20.59%); retest -1 (2.94%) = improvement (a decrease of 17.65% from 20.59% to 2.94%); Green category: test -16 subjects (47.06%); retest -33 (approximately 97.06%) = improvement (increase of 50.0% from 47.06% to 97.06%).

## II. Initial testing vs. Final testing – Emotional Competence Scale GC-P

Red category: test -1 participant (approximately 2.94%); retest -2 (5.88%) = regression (increase of 2.94% from 2.94% to 5.88%); Yellow category: test -18 participants (52.94%); retest -12 (35.29%) = improvement (decrease of 17.65% from 52.94% to 35.29%); Green category: test -15 subjects (44.18%); retest -20 (approximately 58.82%) = improvement (increase of 14.64% from 44.18% to 58.82%).

## III. Initial testing vs. Final testing – Emotional Competence Scale GE-E

Red category: test -15 participants (approximately 44.12%); retest -3 (8.82%) = improvement (decrease of 35.30% from 44.12% to 8.82%); Yellow category: test -17 participants (50.0%); retest -15 (44.12%) = improvement (decrease of 5.88% from 50.0% to 44.12%); Green category: test -2 participants (5.88%); retest -16 (approximately 47.06%) = improvement (increase of 41.18% from 5.88% to 47.06%).

## IV. Initial testing vs. Final testing – Emotional Competence Scale GE-P

Red category: test -24 participants (approximately 70.59%); retest -9 (26.47%) = improvement (decrease of 44.12% from 70.59% to 26.47%); Yellow category: test -9 participants (26.47%); retest -16 (47.06%) = improvement (increase of 20.59% from 26.47% to 47.06%); Green category: test -1 participant (2.94%); retest -9 (approximately 26.47%) = improvement (increase of 23.53% from 2.94% to 26.47%).

The significant reduction in the number of participants in the red category for GE and the substantial increase in the yellow and green categories indicate a notable improvement in emotional competence, according to both educators' and parents' perceptions. It is essential to maintain and consolidate these progressions to ensure long-term sustainable social development.

## I. Initial testing vs. Final testing – Social Competence Scale GC-E

Red category: test -2 participants (approximately 5.9%); retest -0 (0%) = improvement (from 5.9% to 0%); Yellow category: test -15 participants (44.1%); retest -10 (29.4%) = improvement (a decrease of 14.7% from 44.1% to 29.4%); Green category: test -17 subjects (50.0%); retest -24 (approximately 70.6%) = improvement (increase of 20.6% from 50.0% to 70.6%).

# II. Initial testing vs. Final testing – Social Competence Scale GC-P

Red category: test -1 participant (approximately 2.6%); retest -0 (0%) = improvement (total elimination from 2.6% to 0%); Yellow category: test -12 participants (31.6%); retest -8 (21.1%) = improvement (decrease of 10.5% from 31.6% to 21.1%); Green category: test -21 subjects (55.3%); retest -26 (approximately 68.4%) = improvement (increase of 13.1% from 55.3% to 68.4%).

Both perspectives, educators and parents, show a significant improvement in social competence (SC) for GC, with most participants progressing to the green category. It is essential that these improvements are pedagogically supported over the long term.

## III. Initial testing vs. Final testing – Social Competence Scale GE-E

Red category: test -22 participants (approximately 64.7%); retest -2 (5.9%) = improvement (decrease of 58.8% from 64.7% to 5.9%); Yellow category: test -11 participants (27.5%); retest -19 (47.5%) = improvement (an increase of 20.0% from 27.5% to 47.5%); Green category: test -1 participant (2.5%); retest -13 (approximately 32.5%) = improvement (increase of 30.0% from 2.5% to 32.5%).

# IV. Initial testing vs. Final testing – Social Competence Scale GE-P

Red category: test -17 participants (approximately 42.5%); retest -1 (2.5%) = improvement (decrease of 40.0% from 42.5% to 2.5%); Yellow category: test -11 participants (27.5%); retest -9 (22.5%) = improvement (a decrease of 5.0% from 27.5% to 22.5%); Green category: test -6 participants (15.0%); retest -24 (approximately 60.0%) = improvement (increase of 45.0% from 15.0% to 60.0%).

Both perspectives, educators and parents, show a significant improvement in EC and SC for GC and GE, with most participants progressing to the green category. It is essential that these improvements are maintained over the long term.

Regarding the emotion recognition test according to P. Ekman, we have Figure 4, which presents the results of the participants from the two groups. The six emotions evaluated are: happiness, sadness, fear, anger, surprise, and disgust. Each emotion was initially tested, followed by a retest, with the purpose of understanding the impact of the applied interventions, if any.

*Happiness:* GC remained constant between test and retest (34); GE showed a decrease from test (34) to retest (30), suggesting a possible reduction in the feeling of happiness over time.

*Sadness:* GC increased from 24 to 33, indicating a significant increase in the feeling of sadness at retest; GE remained stable between test and retest (18).

*Fear:* GC slightly increased from 32 to 37; GE increased from 22 to 27, both groups indicating heightened sensitivity or awareness of the emotion of fear over time.

**Anger:** GC remained constant (32); GE showed a minor increase from 24 to 27, suggesting a moderate increase in the emotion of anger.

*Surprise:* GC showed a slight increase from 29 to 30; GE, a significant increase from 24 to 33, signaling a clear improvement in the perception of surprise.

*Disgust:* GC increased from 20 to 25; GE showed a significant increase from 17 to 22, suggesting a pronounced improvement in disgust reactions.

The results obtained from the test and retest highlight changes in the participants' ability to recognize emotions over a given period. In the continuation of this analysis, it is important to deepen the understanding of these changes, emphasizing both the statistical significance and the practical implications of the observed differences.

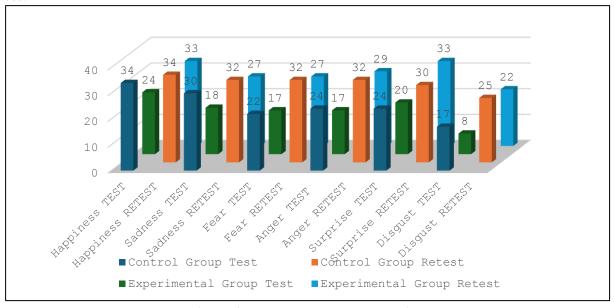


Figure 4. Test–retest results – emotions

This chapter analyzes the implementation of **PSIDIE** for preschool children with TL, structured around three training programs dedicated to parents, educators, and preschoolers, each designed to meet the specific needs of its group and support the children's overall development.

- 1. Training program for parents. This program emphasizes the importance of raising awareness about emotional and social development issues in children with TL. It facilitated improvements in parents' skills in managing their own and their children's emotions, using positive communication techniques and socioemotional bonding activities. This led to stronger positive relationships between parents and children, with significant benefits for children's development.
- 2. Training program for educators. This program provided educators with greater clarity in understanding the psychosocial context of children with TL, introducing effective educational techniques such as playful activities and reflective exercises. Educators also acquired skills for effective collaboration with parents, establishing communication channels that support educational interventions and family- and community-level support.
- 3. *Training program for preschoolers*. This program highlighted improvements in children's ability to recognize and express emotions as a result of structured activities such as role-playing games and practical exercises. Children showed progress in emotional intelligence, socialization, cooperation, and better integration into the educational environment.
- 4. Effectiveness of PSIDIE. The synchronized involvement of parents, educators, and children created a comprehensive support system, facilitating significant improvements in children's emotional and social competencies. Assessments conducted by parents and educators, along with the emotion test administered to preschoolers, confirmed these advances in emotion recognition and social interaction dynamics. Parental feedback highlighted not only improvements in children but also benefits in parent—child relationships, as well as progress in vocabulary, sentence structure, and conversational skills.
- 5. Conclusions. The findings attest to the program's success in enhancing emotional intelligence (EI) through the development of emotional and social competencies, suggesting the need to continue and expand these initiatives. Identifying key elements of success is essential to amplify them in future implementations.

## FINAL GENERAL CONCLUSIONS

To achieve the main objective of the thesis, which aimed to explore and develop effective strategies for improving EI in preschoolers with TL, two essential actions and stages were carried out: a theoretical study and an experimental study.

The *theoretical study* involved an extensive review of the existing literature in the field of EI and language disorders in preschool children. Key concepts and theories were analyzed, identifying and synthesizing the most relevant theories and models describing emotional development and the challenges faced by preschoolers with TL. This approach provided a solid theoretical foundation for the proposed interventions.

The *experimental study* was conducted through the active participation of preschoolers, parents, and educators, aiming to implement and evaluate personalized interventions designed to improve EI in preschoolers with TL. These interventions were specifically adapted for children facing such difficulties. The results obtained during this process were used to validate and adjust the proposed strategies, providing valuable conclusions and practical recommendations.

Analysis of the results led to the following *conclusions:* 

1. The study of EI highlights its complexity as a *multidimensional personality trait*, essential for the child's overall development. EI plays a crucial role in children's psychosocial development, influencing their relationships and adaptability. Its importance is particularly emphasized in the preschool period, a critical stage for *forming the child's emotional and behavioral foundation*. Establishing a clear conceptual framework facilitates the identification of the most relevant EI components, such as *empathy, self-awareness, and emotion management*.

- 2. Language development and EI are closely interconnected during the preschool years. Communication skills directly influence the ability to express and regulate emotions, underscoring the importance of harmonious development in both areas. TL represents a significant challenge at this stage, with the potential to affect relationships and social adaptation. Kindergarten, family, and the educational community play an important role in the development of language and EI in young children.
- 3. Data analysis showed that *preschoolers with TL have distinct socio-emotional profiles*, requiring personalized interventions. Screening and applied tests, including the emotion recognition test based on Paul Ekman's model, indicated that preschoolers with TL exhibit both deficits and real, unexplored potential in emotion recognition and management.
- 4. Evaluations revealed that preschoolers with TL may face significant difficulties in areas such as emotion recognition, emotional regulation, and the ability to establish positive relationships with peers. The combined use of standardized tools and qualitative observations provides a comprehensive perspective on each child's capacities and needs. Detailed assessment allows the identification of specific patterns of behavior and social interactions, thereby facilitating effective interventions. The results suggest that although children with TL start with a disadvantage in socio-emotional competencies, early interventions can support their development and reduce disparities.
- 5. Factors such as *family support* through positive interactions with siblings and parental involvement in educational activities have proven beneficial in promoting EI. This suggests that strategies involving and educating the family can amplify the positive effects of intervention programs.

The type and severity of TL influence how preschoolers develop their emotional skills. Children with verbal expression difficulties may face additional challenges in effectively communicating emotions, highlighting the importance of personalized approaches in educational and therapeutic interventions.

6. The retest results of preschoolers with language disorders (TL) for emotional competencies (EC) indicate a significant improvement compared to the initial testing. The percentage in the red category decreased remarkably, from 70.59% to 26.47% (GE-P), while the green category experienced a substantial increase, from 5.88% to 47.06% (GE-E).

Similarly, social competencies (SC) showed significant improvements. The red category was dramatically reduced, from 64.70% to 5.90% (GE-E), while the green category experienced a substantial increase, from just 2.50% to 32.50% (GE-E). These results demonstrate essential progress in the development of emotional and social skills, as well as the emotional intelligence of preschoolers with language disorders.

- 7. Intervention programs personalized according to the individual needs of children with language disorders have clearly demonstrated improvements in emotional intelligence. Successful implementation of a program requires close collaboration among all educational stakeholders to ensure consistency across formal and informal learning environments. Educational training of staff and parental involvement are essential to create a supportive environment that fosters the development of the child's emotional intelligence.
- 8. The results are reflected both in subjective assessments by parents and educators and in objective measures through the emotion test based on P. Ekman. *The intervention demonstrated a remarkable ability* to enhance both emotion recognition and social interactions of the participants. Collaboration between educators and parents was essential for the project's successful implementation. Identifying the most effective components of the program provides a solid foundation for extending these interventions to other groups of children and adapting programs to individual needs. Ongoing periodic evaluations can help monitor the sustainability of observed improvements and identify new opportunities for intervention.

#### Recommendations

The theoretical, methodological, and practical content of the thesis can be implemented in the short term through three categories of recommendations:

- *I. For educators:* Deepen theoretical, methodological, and practical aspects of EI, with an emphasis on a specialized approach model—both psychological and social—of the preschooler's personality; refine strategies for understanding the socio-affective dimension of the young child's personality, as well as methods for activating their psychological and social resources within the context of educational play as a fundamental activity with multiple pedagogical functions and roles; implement the training program "The Path to Understanding", which can be adapted to the specifics of each educational community and provides varied resources for pedagogical, didactic, and extracurricular self-improvement.
- *II. For school leaders:* Implement normative and methodological conceptual models that define and analyze EI and its psychological and social impact at the global educational level; promote the strategic project "Together for Success" in the specific context of school inspection activities and continuing education for preschool, primary, and special education teachers.
- III. For parents: Utilize the normative and methodological information included in the training program "Family at the Center of Emotions"; participate in methodological activities organized by educators, focused on understanding and developing emotional intelligence within the community context.

**This study** highlights the importance of an integrated and personalized approach in educational and therapeutic interventions for preschool children with language disorders (TL). These disorders represent a significant barrier to social relationships and emotional development, negatively affecting the accumulation of essential socio-affective experiences necessary for harmonious development.

An integrated approach that includes interventions focused on developing EI has proven effective in mitigating these difficulties. Incorporating emotional competencies (EC) and social competencies (SC) into the therapeutic process has facilitated not only the improvement of children's communication skills but also the deeper development of EC and SC. Thus, EI has been identified as an essential component that can function both as a preparatory stage and concurrently within therapies targeting language disorders.

In conclusion, the study emphasizes the need to implement integrated strategies in the education and therapy of children with TL, focusing on their holistic development. Emphasis on the development of EI is considered a key factor in overcoming difficulties associated with TL, ensuring long-term harmonious and balanced development.

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#### List of the Author's Publications on the Thesis Topic

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- 2. **Ursu, Miluța**. Emotional Intelligence: A Pedagogical Perspective. In: Didactica Pro..., Journal of Educational Theory and Practice, 2025, No. 1(149), pp. 9–12. ISSN 1810-6455.
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#### ANNOTATION

# URSU Miluţa. Development of emotional intelligence in preschoolers with language disorders. phd thesis in special pedagogy. Chişinău, 2025.

**Structure of the thesis:** The thesis is composed of annotations, a list of abbreviations, an introduction, three chapters, general conclusions and recommendations, a bibliography of 227 titles, 29 appendices, 149 pages of text, 20 figures, and 39 tables. The results obtained are published in 14 scientific papers.

**Keywords:** emotional intelligence, preschoolers, language disorders, emotional development, cognitive development, early intervention, social competencies, emotional competencies.

Field of study: Pedagogy.

The purpose of the research: Establishing the theoretical and methodological framework for developing emotional intelligence in preschoolers with speech disorders.

General objectives: Establish the conceptual framework; to assess the current level of emotional and social competencies in preschoolers with language disorders; to identify the factors that influence the development of emotional intelligence in these children; to implement an innovative intervention program; to experimentally argue the effectiveness of the applied intervention program.

**Novelty and scientific originality:** The research combines perspectives from complementary fields of special psych pedagogy concerning the particularities of emotional intelligence development in preschoolers with language disorders to refine the activities necessary for their recovery. The resulting program is innovative and personalized, with specific interventions adapted to the emotional and communication needs of preschoolers with language disorders.

**Theoretical significance:** The research approach, grounded both intra- and interdisciplinary, delves into the general issue of applied emotional intelligence in a special context—the situation of preschoolers with language disorders, offering a solid theoretical foundation. This understanding facilitates the development of practical recommendations for teachers, special education professionals, and parents, based on empirical data and theoretical concepts, to improve recovery interventions.

**Practical value of the work:** It provides practical solutions and recommendations for improving educational and therapeutic interventions, guiding policies, supporting families, developing resources, and increasing awareness. Implementing these recommendations enhances the development of emotional intelligence in children with language disorders, ensuring them equal opportunities for development and success.

The scientific problem solved: It addresses the enhancement of emotional intelligence in preschool children with language disorders, with the aim of increasing their capacity for emotional self-regulation and effective social interaction. The proposed solution is an innovative intervention program, personalized to meet the specific needs of these children, allowing them to overcome challenges related to emotional development and communication.

The implementation of scientific results focused on the ongoing training of preschool educators facing special issues located in the relationship between language development and emotional intelligence. Adapting these suggestions in education and family support contributes to the balanced growth of children, ensuring them equal opportunities for development and success.

# URSU MILUŢA

# THE DEVELOPMENT OF EMOTIONAL INTELLIGENCE IN PRESCHOOL CHILDREN WITH LANGUAGE DISORDERS

**Specialty 534.01 – Special Pedagogy** 

**Summary of the Doctoral Thesis in Education Sciences** 

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Paper format: 60×84 1/16

Print run: 20 copies

Order No.: [to be completed]

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