EFFECTS OF EMOTIONAL INTELLIGENCE AND LOCUS OF CONTROL ON THE PSYCHOLOGICAL WELL - BEING OF ADOLESCENTS WITH VISUAL IMPAIRMENT

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ABSTRACT

Psychological well-being of adolescents with visual impairment has been a source of great concern. Most often, efforts have been focused on academic progress, achievements and performance, with very little attention given to their psychological well-being. The attainment of a good quality psychological well-being of adolescents with visual impairment is observed to be fundamental in order to cope with the challenges imposed on them by their visual impairment. Observably, the documented training programmes on Emotional intelligence and Locus of Control focused on adolescents without visual impairment. This study, on the contrary investigated the effectiveness of emotional intelligence and locus of control training in enhancing the psychological well-being of adolescents with visual impairment in Oyo and Ondo States, Nigeria.

A Pretest-posttest, control group, quasi experimental design with 3x2x2 factorial matrix was adopted. The sample consisted of one hundred and twenty participants with visual impairment. Ninety-one totally blind and twenty-nine partially sighted adolescents were drawn from three integrated secondary schools purposively selected for the study; junior secondary school classes I and II and senior secondary school classes I and II. They were randomized into the two treatment conditions (Emotional Intelligence and Locus of Control) and the control group. Two instruments – Snellen Scale (Screening Scale) and the adapted version of Ryff's Scale of Psychological Well-being (r=0.77) were used. Seven null hypotheses were tested at 0.05 level of significance, data were analysed using Analysis of Covariance (ANCOVA) and Duncan post hoc test.

There was significant main effect of treatment on the psychological well-being of the participants ($F_{(2,107)} = 21.02$; $p<0.05$). The Emotional Intelligence group had the highest post-test psychological well-being mean score ($\bar{x} = 80.0$), followed by the Locus of Control group ($\bar{x} = 75.1$) and then the control group ($\bar{x} = 61.5$). Type of visual impairment had no main significant effect on the participants' psychological well-being though the partially sighted obtained higher post-test psychological well-being score ($\bar{x} = 74.9$) than those with total blindness ($\bar{x} = 71.1$). Gender had no significant main effect on psychological well-being of adolescents with visual impairment. Male participants recorded higher mean score ($\bar{x} = 72.1$) while female participants had mean

ii

score ($\bar{x} = 70.1$). Also no significant interaction effects of treatment, gender and type of visual impairment on the psychological well-being of participants were observed.

Emotional intelligence and Locus of control training were effective in enhancing the psychological well-being of adolescents with visual impairment. Therefore, the two treatments were recommended for use in managing adolescents with visual impairment. It is recommended that adolescents with total blindness should be exposed to more therapeutic treatments in order to improve on other areas of psychological problems.

Keywords: *Visual Impairment, Psychological well-being, Locus of control, Emotional Intelligence*

Words count: *434*

DEDICATION

This study is dedicated to:

The most high God

The pillar of my life

and

My family

ACKNOWLEDGEMENTS

CERTIFICATION

I certify that this work was carried out by Mrs. Anthonia Ifeoma AJOBIEWE (77767) in the Department of Special Education, University of Ibadan, Nigeria.

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TABLE OF CONTENTS

CHAPTER FIVE: DISCUSSION OF FINDINGS, CONCLUSION AND RECOMMENDATIONS

LIST OF TABLES

xi

Background to the Study

It might be difficult to relate correctly the experience and challenges faced by adolescents with visual impairment based entirely on literature. This is because they are different from one another with different personality, unique needs and the ability to face different challenges. Adolescence is a very critical and important stage in the development of human beings. Most psychological, physiological and social changes in individuals take place during this period. This period can be looked upon as a time of struggle and turmoil when compared to the period of childhood (Rathi & Rastogi, 2007). In recent times, adolescents live in a society which has become multi-complex, thus engaging in several activities inclusive of those that pose real threat to their psychological well-being (Adeyemo & Adeleye, 2008).

Adolescents with visual impairment face dual problems. First they have to contend with problems rooted in their inability to understand who they are. Second, the limitations imposed on them by the loss of vision.

Visual impairment is generally presumed to have psychological consequences on the individual. As observed by Jernigan (2002), Adebiyi (2004) and Ayoku (2006), such psychological consequences might be acute or severe conditions or chronic difficulties that could lead to sustained levels of depression, anxiety or emotional instability. These also affect a person's psychological well-being.

Psychological well-being is seen as a subjective, dynamic or multi-faceted concept which means different things to different people. It is also thought of as one of the hallmarks of outcomes resulting from educational encounters and experiences that guide students in the search of direction in life as well as help them realise their potentials (Seifert 2005, Adeyemo and Adeleye, 2008).

Studies on psychological well-being such as Ryff (1989), Shek (1997), Sastre and Ferriere (2000), Vanwel, Linssen and Abma (2000) and Ryan and Deci (2001) report the distinct dimensions of psychological well-being and debated that the general quality of well-being refers to optimal psychological functioning and experience. Notably, the dimensions were operationalised by Ryff (1989) to include autonomy, personal growth, environmental mastery, positive relations with others, purpose in life and self-acceptance. These are key components that make up psychological well-being.

Evidence from studies has revealed that adolescents with visual impairment experience a lot of problems at least in one or more of the areas stated above. These studies include Williams (1998), Simon's (2000), Adejumobi (2007), and Kolo (2007). Further, these other studies serve as a pointer to show that there are problems of psychological well-being among adolescents generally and among those with visual impairment in particular especially in such areas as environmental mastery, self-acceptance, decision-making, self-awareness, emotional identification and perception (Adeyemo & Adeleye, 2008; Adeoye, 2008).

Corroborating the above, adolescents with visual impairment breakdown because they have problems fitting into groups, establishing relationships, problems of self acceptance, self-awareness and emotional stability. Nevertheless, the coping abilities of adolescents with visual impairment when confronted with such problems differ from one person to the other. Inability to cope with stress in an adaptive manner, lead them to develop problem behaviours, mannerism and misinterpretation of people's actions, emotions and behaviours that affect their psychological well-being.

From the foregoing, it is important to work towards attainment of psychological well-being in adolescents with visual impairment. Therefore, the focus of this study is on enhancing the psychological well-being of adolescents with visual impairment. One of the ways to accomplish this is to put in place training activities that would enable them to be taught the various skills or approaches which would lead to the attainment of a better psychological well-being. Such training programme include emotional intelligence and locus of control (Mayer & Salovey, 1993; Goleman, 1995; Rotter, 1966).

Emotional intelligence is conceptualised as a set of interrelated abilities. It is also described as an eclectic mix of traits, and disposition such as happiness, self-esteem, optimism and self-management rather than being ability based (Petrides & Furnham, 2001; Bar-On, 2003; Boyatzis & Sala, 2004,). In addition, Salovey and Mayer (1990) opine that emotional intelligence involves abilities that may be classified into four domains. These include: self-awareness, managing emotions, motivating ones self, empathy and handling relationships. Studies on emotional intelligence have largely been fuelled by the inability of traditional intelligence as measured by intelligent quotient test to account adequately for the variability in success criteria in human endeavour. Training or teaching of emotional intelligence skills in schools or rehabilitation centres brings about positive influence in adolescents with visual

2

impairment (Kolo, 2007). Seligman and Sikszentmilayi (2000) and Kolo (2007) report that emotional intelligence has implications for the way problems are tackled and prevented. The acquisition of emotional intelligence skills are useful for intervention in schools, families, communities and rehabilitation centres.

Locus of control dimension indicates a person's belief regarding the placement of control over his or her life events (Jonassen & Grabarski, 1993; Rotter, 1975). It has been pointed out that an adolescent's locus of control reflects his or her attitude, academic success, emotional and psychological status. If an individual believes success, achievement or failure is due to factors within his/her control, such an individual is said to have internal locus of control. On the other hand, if a person believes his/her success, progress, achievement or failure is due to factors outside his/her control such as fate or luck, the individual has what is known as external locus of control (Sinclaire, 1991; Abe, 1995; Bode, 1995). Interestingly, external and internal locus of control of individuals differ from their emotional awareness and psychological well-being. (Howard 1996, Emeke, 1997).

Gender has been identified as an important moderating variable in enhancing psychological well-being of adolescents with visual impairment. Cheshire (2004) explains that women who had an internal locus of control are reported to be more self described than men. In another study, Bookwala and Boyar (2008) report that body mass was a significant predictor of low psychological well-being for women and that they experience stronger social stigma for being overweight relative to their male counterparts. Also, Arantzazu (2009) reveals that boys have greater psychological well-being than girls due to their better physical self-concepts and that this relates positively with psychological well-being.

Type of visual impairment has also been identified as another moderating variable in this study. Studies have revealed that types of visual impairment affect a person's psychological well-being and that the impact of visual loss, either total blindness or partial sight are often accompanied by difficulties in various aspects of life. (Branch, Horrowitz and Carr 1989; Cherry, Keller and Dudley 1991; Williams, Brody, Thomas, Kaplan and Brown, 1998).

The above studies despite their scope and depth only examined some socio-psychological variables such as, academic achievement, intelligent quotient, general intelligence and self-determination. However, neither provided empirical evidence or

attempt to explain the effects of the independent variables in enhancing the psychological well-being of adolescents with visual impairment.

The observed inadequacies in earlier studies underscore the need to undertake the present research, for a better understanding and utilization of the independent variables in the enhancement of a positive psychological well-being.

Statement of the Problem

Foremost, there is the excessive focus on the academic progress, achievement and performance of adolescents with visual impairment at the expense of due attention to their psychological well-being. It is generally known that regardless of academic progress and performance, individuals may not be psychologically fulfilled and happy with their quality of life. Notedly, adolescents with visual impairment experience problems of positive psychological well-being in various aspects such as self-acceptance, autonomy, environmental mastery, etc. These are equally problems found among adolescents with visual impairment which should be addressed.

Relatedly, most studies on psychological well-being have focused more on individuals without visual impairment particularly in Nigeria and rarely in the focus of the area of emotional intelligence and locus of control. This has created dearth of literature in this field of study. Finally, there is the need to ascertain the impact of certain moderating variables (gender and type of visual impairment) on the psychological well-being and quality of life of adolescents with visual defects or problems.

Purpose of the Study

The broad purpose of this study is examine the efficacy or otherwise of emotional intelligence and locus of control on the psychological well-being of adolescents with visual impairment in Oyo and Ondo States, Nigeria. This purpose (objective) is prompted by the apparent neglect of the psychological well-being and quality of life of these adolescents while focusing on their academic progress and performance.

In addition to this main purpose, the study attempted to attain the following specific purposes:

- Highlight the impact, of gender and type of visual impairment as moderating variables on psychological well-being of adolescents with visual defects.

4

- Ascertain which of the two treatment packages, emotional intelligence and locus of control, is more potent (effective) in positively impacting on the psychological well-being of adolescents with visual impairment.

Significance of the Study

Adolescents with visual impairment face more problems than their sighted counterparts. Thus, they require well-grounded and affective training programme such as, emotional intelligence and locus of control in enhancing their psychological well-being. The study is anticipated to assist adolescents with visual impairment to become aware, knowledgeable, have adequate understanding about themselves, those of other people and enable them develop self-confidence, happiness and contentment. Also, the expectation is that the study would expose them to pertinent skills of emotional intelligence and locus of control and hopefully prompt them to strive to attain and maintain better psychological well-being.

The expected result of this study should be of relevance to professionals in the field of special education and counselling psychology in organizing more effective training programmes and in the treatment of their students and clients with problems of psychological well-being. The results of this study is expected to provide the needed empirical information for special educators, rehabilitation officers, parents and researchers in the area of emotional intelligence and locus of control. The discourse from this study would enable and equip stakeholders see the need to look beyond the conventional training approach for adolescents with visual impairment and strive towards modifying their training packages such that these individuals would be confident, happy and satisfied with their quality of life in spite of their special needs and be able to live a normal life as others in the society.

The anticipated outcome of the study should provide vital and useful information to curriculum planners and policymakers and be a veritable guide to appropriately modify the curriculum of adolescents with visual impairment and thus, make them benefit adequately from it. The findings generated from the study would help to reduce the problem of lack of self-awareness and misinterpretation of feelings, actions and behaviours of self and of other people.

In addition, the study is expected to generate pertinent issues that will serve as a basis for professional improvement to special education personnel at various levels. This viewpoint is informed by the inherent exposure concomitant with the issues to be treated in the study.

This study is expected to serve as a knowledge-based databank and intellectual source for future researchers, parents, special educators generally and those charged with the education/training of learners with visual impairment, education policymakers, heads of special schools and curriculum planners.

Hypotheses

The following null hypotheses were tested at 0.05 level of significance

Ho_1 There is no significant main effect of treatment and the control group on the psychological well-being of adolescents with visual impairment

Ho_2 There is no significant main effect of type of visual impairment on the psychological well-being of adolescents with visual impairment.

Ho_3 There is no significant main effect of gender on the psychological well-being of adolescents with visual impairment.

Ho_4 There is no significant interaction effect of treatment and type of visual impairment on the psychological well-being of adolescents with visual impairment.

Ho_5 There is no significant interaction effect of treatment and gender on the psychological well-being of adolescents with visual impairment.

Ho_6 There is no significant interaction effect of type of visual impairment and gender on the psychological well-being of adolescents with visual impairment.

Ho_7 There is no significant interaction effect of treatment, type of visual impairment and gender on the psychological well-being of adolescents with visual impairment.

Scope of the Study

The study is delimited to three secondary schools (integrated settings) in Oyo and Ondo states, where adolescents with visual impairment school side by side with sighted counterparts. The schools are:

(i)   Adeniran Memorial Grammar School, Ogbomoso.

(ii)   Aperin Oniyere Commercial High School, Ibadan and

(iii)   Owo High School, Owo, Ondo State.

Operational Definition of Terms

The terms defined in this study are operational.

Adolescents: These are students between the ages of 12 and 21 years of age in this study. This is due to the delay imposed on learners with visual impairment to start school at the right age like their sighted counterparts.

Emotional Intelligence Training (EIT): This refers to the ability to recognise and understand one's feelings, emotion and those of others and be able to use this to manage oneself when dealing with other people.

Locus of Control Training (LOCT): This is the belief of adolescents with visual impairment that their success or failure is within or beyond their control.

Partially Sighted: In this study, it refers to students who can only read prints with the aid of special equipment or special condition. They can only read large or bold prints because they have limited vision.

Psychological Well-being: This relates to the ability to be happy, satisfied and contented with one's self and efforts.

Totally Blind: This refers to those who cannot read or write print not even with the aid of glasses or magnifiers. Braille is their only means of reading and writing.

Visual Impairment: Problems with the effective use of the eye. It could be inability to see at all (total blindness) or inability to see fully (partially sighted).

CHAPTER TWO

LITERATURE REVIEW

This chapter discussed literature related to the study.

2.1 Theoretical Review

- Background on Visual Impairment (Types of Visual Impairment)
- Emotional Intelligence
- Locus of Control
- Psychological well-being
- Emotional Intelligence versus Psychological Well-being
- Locus of Control versus Psychological Well-being
- Gender and Psychological Well-being
- Types of visual Impairment and Psychological Well-being
- Attribution Theory
- Social Learning Theory.

2.2 Empirical Review

- Emotional Intelligence versus Psychological Well-being
- Locus of control Training versus Psychological Well-being
- Gender and Psychological Well-being
- Types of visual Impairment and Psychological Well-being

2.3 Appraisal of Literature

2.4 Conceptual Model of the Study

2.1   Theoretical Review

Background on Visual Impairment (Types of Visual Impairment)

The human eye serves as light to the human body, once there is an impairment of the organ resulting into a total or partial loss of vision, it is often assumed that the victim lives in perpetual 'darkness'. Eventually, this poses some limitations on the individual concerned and members of his/her family; ranging from all forms of discrimination and negative attitude to lack of acceptance, isolation and neglect. The visually impaired person on his/her part, faces a lot of challenges, which include social, emotional and psychological problems. Most often, these challenges arise in such areas as lack of visual feedbacks, lack of understanding of others misinterpretation of people's emotions, feelings and lack of understanding of self among others. This is so because, almost 75per cent of what people learn in every day life is based on vision (Abosi & Ozoji, 1985, Adediran, 2000; Ajobiewe, 2004).

Abang (1992) views persons with visual impairment as those with some amount of visual problems which could be remedied either by surgical operation or by optical corrections. Abang further states that persons with severe visual impairment are those with serious visual problems, whose eyesight is so bad that they are unable to write or read printed materials.

Visual impairment according to Mba (1995) refers to those who are totally blind, partially sighted, with low vision and those who suffer from errors of refraction. Heward (2000) reports that a blind person is one who has acuity (sharpness of vision) of 20/200 or less in the better eye after correction with glasses or optical aids (contact lenses) or restricted field of vision. Related to the above, Jernigan (2002) defines a blind person as anyone who has an inability to see or perform activities requiring the use of sight normally, thus, requiring alternative devices or technique to efficiently carry out activities he/she would have done without normal sight.

To the ophthalmologist providing the diagnosis and sometimes referral for placement services, the working criteria for blindness are a distance visual acuity of 3/60 Snellen or less in the better eye after optimal correction by lenses. This means that inability to read at more than three metres the standard symbols legible by most people at 60 metres can lead to the classification of blindness. In addition, if there is a marked contraction in the width of the visual field, even if the acuity is as good as 6/60, it can also constitute blindness. It was further stated that those with vision between 6/60 and 6/18 can be registered or classified as partially sighted persons.

In line with the above, Jernigan (2002) further stresses that one is blind if he/she utilises alternative techniques to perform effectively those activities that require the use of sight. Ajobiewe (2004) contends that those with visual impairment include persons who cannot read or write print when all efforts to achieve success has failed, they also include persons with residual vision using it only for movement and to perceive light at a very minimal degree.

Emotional Intelligence

Considering the importance of learning, work, play and all other domain of human activity, it can be observed that these activities have an influence either positively or deter the psychological well-being of individuals. It is pertinent to state that the issue of success, achievement and psychological well-being in various aspects of human life is no longer based on Intelligence Quotient (IQ) alone but is being judged by a new additional yardstick in recent times, the introduction of some fundamental new theories such as, the multiple intelligence theory (Gardner, 1983) and the emotional intelligence theory (Mayer & Salovey, 1990 and Goleman, 1995.) With these developments, attainment of better psychological well-being depends on several intelligence and self-awareness. Supporting these views, Epstein (1999), Abraham (1999), Labs (1999), Barrier and Bates (1999) contend that in the work place, all kinds of articles are written, workshops and conferences are held to help workers become aware of the new development. They further reported that employees and managers are equally becoming aware of the component of emotional intelligence so that they can improve themselves. With these, it becomes imperative to teach the components of emotional intelligence to sighted or visually impaired students. Since, the awareness or knowledge of Emotional Intelligence could affect students' psychological well-being, the issue of raising self-awareness to improve their psychological well-being needs consideration. Hence, Emotional intelligence has been identified as one of the training packages to use in enhancing the psychological well-being of adolescents used in this study.

Salovey and Mayer (1990) comment that Emotional Intelligence may subsume Gardner's inter- and intrapersonal intelligence as well as involve abilities that may be categorised into some domains, such as self-awareness, observing yourself and recognising a feeling as it happens:

✓ Managing emotions, handling feelings so that they are appropriate, realising what is behind a feeling, finding ways to handle fears and anxieties, anger and

sadness;

✓ Motivating oneself, channeling emotions in the service of a goal, emotional self-control, delaying gratification and stifling impulses.

✓ Empathy, sensitivity to others feelings, concern and taking their perspective, appreciating the differences in how people feel about things.

✓ Handling relationships, managing emotions in others, social competence and social skills.

Further, Mayer and Salovey (1993) and Caruso (2004) suggest that emotion is a true form of intelligence which has not been scientifically measured until they began their research work (Mayer & Cobb, 2000.) But the definition they proposed focused on the ability to process emotional information, particularly as it involves the perception, assimilation, understanding and management of emotions. This form of intelligence consists of four branches of mental ability and are assessed by criterion-based test, they are as follows:

▪ Emotional identification, perception and expression

▪ Emotional facilitation of thought

▪ Emotional understanding and

▪ Emotional management

Summarising their definition, Mayer and Salovey (1993) comments that emotional intelligence involves the ability to monitor and regulate one's and others' emotion, to discriminate among them, and to use the information to guide one's thinking and actions. According to Goleman (1995), emotional intelligence is the ability to recognise one own feelings and those of others, for motivating ourselves, managing emotions well in ones self and in relationships. Also, he describes abilities distinct from, but are complementary to academic intelligence, the purely cognitive capacities measured by IQ. He further states that emotional quotient (EQ) lies on two aspects of intelligence. The first premise is, to be successful requires the effective awareness, control of one's emotion (i.e. understanding oneself, goals, intentions, responses, behaviour and all). The second premise is to understand the feelings of other people. In addition, Goleman identifies five domains of EQ to include:

o Knowing one's emotions.

o Managing one's emotion

o Motivating oneself

o Recognising and understanding other people's emotions.

11

o   Managing relationships (i.e. managing the emotions of others)

It is worth mentioning that Goleman brought attention to the fact that emotions play a crucial role in everyday life and that the so called `normal' people can enhance their emotional competency. In his view, the five domains of emotional competencies are built on a hierarchy, one is the ability to identify one's emotional state, meaning that knowledge of the first competency is required to move to the next competency. Also, the knowledge and or skills in the first three competencies are essential to judge correctly or identify other peoples' emotion in the fourth competency. The awareness and understanding of the first four competencies lead to increased ability to attain and sustain good relationships in the fifth competency.

Presenting his own view, Bar-On (1997) defines emotional intelligence as an array of non-cognitive capabilities, competencies and skills that influence one's ability to succeed in coping with environmental demands and pressures. Caruso (2004) opines that emotional intelligence is the ability to: accurately identify emotions, use emotions to help one think, understand what causes emotion, and manage to stay open to these emotions in order to capture the wisdom of our feelings.

In addition, Hein (2005) contends that emotional intelligence is an innate ability which gives people emotional sensitivity and potential for learning healthy emotional management. Going through the various definitions by the different authorities, it is important to note that they focus on the importance of knowing one's feeling and the feelings of others. It is also observed that people who are unable to know or understand their feelings are at a tremendous disadvantage considering the fact that adolescence period is characterised by "stress and storm". It requires that adequate and guided knowledge on the issues of their emotional feelings be taught, because if most of the reactions, decisions and behaviours are not well guided or directed at this period, it may lead to catastrophe.

Considering the above, one could link Glasser's (1981) assertion that all behaviour is generated from within oneself, people have choices in what they do and these have psychological consequences. This potrays the fact that adolescents with visual impairment require proper guidance and knowledge of emotional intelligence so that whatever choice they make or feelings and behaviours they exhibit would add or enhance their psychological well-being, not such that would lead to self deception, lack of satisfaction, depression or psychological imbalance.

Further, Ayoade (2006) notes that understanding the psychological paths to

successful development is crucial in promoting healthy development and behaviour as well as preventing high risk behaviours common among adolescents. As a person matures to the adolescent stage, his/her feelings begin to shape and improve thinking by directing his/her attention to important changes.

Non-the-less in examining literature on the definition of emotional intelligence, it is observed that the issue of separating abilities related to cognitive intelligence from abilities, traits and competencies related to emotional competency remains a complex one since all definitions of emotional intelligence represent a .combination of cognitive and emotional abilities (Cherniss, 2001.) Still in line with the above, Davidson (2003) found that this is a reflection of a growing understanding in neuroscience which recognises that cognition and emotions are interwoven in mental life rather than discretely independent when related to complex decision making, self-awareness, affective self regulation, motivation, empathy and interpersonal functioning, all these are aspects of emotional intelligence.

Sternberg (1997) observes that by expanding the definition of intelligence, a more realistic and valid assessment of factors that lead to personal effectiveness and adaptation would be obtained. Emmerling and Goleman (2003) reportes that to a great extent, scientific interest in emotional intelligence has begun to challenge long held assumptions of what leads to success in life, the emotional intelligence paradigm, has helped to create a balance view of the role of cognition and emotion in determining life outcome.

Interestingly, it is pertinent to state that several theories associated with emotional intelligence paradigm exist, of which three prominent ones have generated the highest interest in terms of research and application. These are the theories of Mayer and Salovey (1997), Baron (1988) and Goleman (1998, 2002.) Examining these theories, it would be seen that there is a significant divergence in the specific language each used to label his theory. This represents a unique set of constructions the theoretical orientation and context in which they frame their theories. However, all the theories share a common desire to understanding and measure the abilities and traits related to recognising and regulating emotion in oneself and in others (Goleman, 2001.)

Concluding the issue of emotional intelligence, Ciarroch, Chan and Caputi (2002) comment that although definitions within the field of emotional intelligence differ, they tend to be complementary rather than contradictory. All theories of emotional intelligence sought to understand how individuals perceive, understand,

utilise and manage emotions in an effort to predict, as well as foster personal effectiveness. Therefore an understanding, knowledge and or awareness of the origin of each of these theories would give additional insight into the reasons for the difference in specific constructs and the methods used to measure them. Non-the-less, the main elements such as to manage, understand, perceive, predict and utilisation of feelings would adequately be addressed in this study during the treatment programme in order to address the issue of psychological well-being of adolescents with visual impairment. The next issue for discussion is locus of control.

Locus of Control

Locus of control can be defined as an individual's perception of the locus of events as determined internally by his/her own behaviour versus fate, luck or external circumstances. According to O'Brien (2004), locus of control is a dispositional characteristic that determines whether people typically, believe they have control over events and are responsible for their outcomes or whether they are due to forces outside their control, such as luck or fate are what control their life events. Locus of control could be internal or external; people who develop an internal locus of control believe they are responsible for their own success. Those with an external locus of control believe external forces like luck determine their outcomes.

Further Olaleye (2004) explains that locus of control concerns people's generalised expectancies, that they may or may not control reinforcement in their lives. People who hold expectancies that they control reinforcements are considered internal while people who hold expectancies that outside forces or luck control reinforcement are considered external. Locus of control therefore refers to the extent to which individuals believe they can control events affecting them (Adeoye, 2008; Fayombo, 2001; Rotter, 1969). Individuals with internal locus of control believe events in their lives are generally the results of their own behaviour and actions. Individuals who have external locus of control believe chance; fate and other people generally determine events in their lives. In addition, it is explained that the extent to which a person believes that he/she can control what happens to him/her is referred to as a belief in internal control of reinforcement. A belief that one is controlled by luck, fate or powerful others is referred to as belief in external control of reinforcement (Rotter, 1971 in Howard, 1996).

Psychological Well-being

Well-being is a concept that encompasses a well-rounded, balanced and comprehensive experience of life. It includes health in social, physical, mental, emotional, career and spiritual domain. There are different theories of well being, these includes subjective well-being and psychological well-being. This study focused on psychological well-being which is a more sustainable practice and character driven view of well-being. Ryff (1989) opines that, happiness has generally been viewed as the outcome of variable for one's psychological well-being. In the same vein, Mc Culloch (1991) note that cheerfulness, optimism, playfulness, self-control, a sense of detachment and freedom from frustration, morale, positive affect and social support constitute psychological well-being. Also, Diener and Diener (1995) held that little attention has been paid to whether the predictor of psychological well-being differ in various cultures. It was concluded that the variables that influence people's evaluations of their psychological well-being vary across culture.

In addition, Sonnentag (1996) submits that psychological well-being is an individual experience and, is that individual who is satisfied with him/herself as regards self awareness, job opportunities, experiences tension or does not suffer psychosomatic complaints has positive psychological well-being. Similarly, Adeyemo and Adeleye (2008) maintain that psychological well-being is an issue of great concern in the society in recent times, in the past, while insurance companies and society in general once thought of a person's health mainly in physical terms. In modern society today, personal wellness has come to refer to and focus on a more thorough definition of happiness, joy, satisfaction, contentment as aspects of psychological well-being.

Psychological well-being includes the following skills

- *Self Acceptance:* This is a major source of well-being and living a happy life. It is self-acceptance or attitude one holds about one's self. The feeling of satisfaction with one's self as well as being at peace and contentment with ones current situation. Acceptances emphases coming to terms with what one cannot change or control.

- *Self Growth:* This also relates to expanding ones knowledge and beliving that it is a never ending process. Also, being open to new experiences, curiosity and interest in seeking for more opportunities.

- *Purpose & Meaning of Life:* There is a real sense of aliveness in the individual. This relates to being focused in one's areas of strength rather than faults or

mistakes. The focus must be on ones values, potentials, talent and strengths. This would go a long way to improve or establish relationship. Others are autonomy, connectedness, environmental mastery, etc.

Emotional Intelligence versus Psychological Well-being

Based on the information gathered while reviewing literature on the concept of Emotional intelligence, it can be further presented that it involves the integration of emotions with thoughts, enabling one to understand what other people are feeling while cognitive skills involves the integration, organisation and ordering of thoughts (Goleman, 2001). Further, emotional intelligence skills add to and strengthen the critical cognitive problem solving skills of pattern recognition and perspective taking (Sally, 2000; Wolf, Pescoshodo & Druskat, 2002).

Emotional intelligence is important because it provides social information to other people and affects behaviour. The expression of emotions is important both in interpersonal and intrapersonal relationship (Denham, Mason, Cavelry, Schmidt, Hackney, Caswell & Demulder, 2001). Emotional intelligence, therefore, is the ability to sense, understand and effectively apply the power of emotions, appropriately channeled as a source of energy, creativity and influence. It requires that one learns to acknowledge and understand feelings in self and others and also appropriately respond to them, creatively applying the energy to various situations in daily life, work and relationship (Goleman, 1995). Persons with high emotional intelligence will have more confidence and trust in themselves and more understanding of others and therefore empathise with them, make better relationship and experience more achievement, love and joy in their life (Mayer & Cobb, 2000).

Emotional intelligence has wide applicability across various fields and discipline such as Psychology, Education, Neuroscience, Guidance and Counselling, Special Education and in Social Work as well as Industrial Organisations (Adeoye, 2008). One main reason for this is that, the concept can be learnt. It also offers a language and framework capable of integrating a wide range of research findings and it has implications in the way many problems are solved daily (Seligman & Csikszentraigalyi, 2000; & Hamid, 2001).

Goleman (1998) comments that a person can have the best training, an incisive, analytical mind and an endless supply of smart ideas, but still would not make a great leader. From his researches on how emotional intelligence operates at work, he found that intellect was a driver of outstanding performance and cognitive skills such as big

picture, thinking and long term vision are equally essential. In his analysis, Goleman revealed that emotional intelligence played increasing role in the highest level of the company's performance, and the higher the rank of a person considered to be a star performer, the more intelligence capabilities showed up as the reason for his/her effectiveness.

One other reason for Emotional intelligence lies with the claim associated with traditional intelligence. Traditional measure of intelligence, although providing some degree of predictive validity has not been able to account for a large portion of the variance in work performance and career success (Goleman & Emmerling, 2003), with IQ test scores are correlated, with how well people perform in their careers, the highest estimate of how much difference IQ accounts for is about 25 per cent (Hunter & Hunter, 1984; Schmidt & Hunter, 1981). From the forgoing, it is pertinent to present various theories as would be discussed below:

A. Bar-On and Emotional Intelligence

This theory was the first to emerge in 1988; Bar-On (1988) coins the term emotional quotient (EQ) as an analogue to intelligence quotient (IQ). This was prominent with the increasing interest in the role of emotion in social functioning and well-being. He further presented an array of traits and abilities related to emotional and social knowledge that influence peoples' overall ability to effectively cope with environmental demands. This can be viewed as a model of psychological well-being and adaptation, the model/domain include the following:

1. The ability to be aware of, to understand and to express oneself.

2. The ability to be aware of, understand and relate to others.

3. The ability to deal with strong emotions and control one's impulses.

4. The ability to adapt to change and solve problems of a personal or social nature. In addition, there are five main domains of Bar-On's model; they include (i) interpersonal skills, (ii) intrapersonal skills, (iii) adaptability. (iv) stress management and (v) general mood (Bar-On, 1997.)

Interestingly, Bar-On (2000) did not leave the model just like that. In order to measure the model, he constructed the EQ inventory. This is referred to as "self-report measure". It specifically measures emotional and social competence behaviours that estimate an individual's emotional and social intelligence as against the traditional personality traits or cognitive capacity.

It is worth mentioning that within personality psychology, the practice of using

17

self-report measure to assess individual is consistent with recent practices. Finally, it is pertinent to state that with Bar-On's initial publication of the EQ-inventory, there has been provision of valid and reliable estimate of an individual's ability which helps one to be able to cope with the pressure and demands of daily life (Bar-On, 2000.)

B. Mayer and Salovey on Emotional Intelligence

Mayer and Salovey (1997) in their own view define emotional intelligence as a group of mental abilities which are best measured using a testing situation that is performance and ability based. The most current measure of the Mayer and Salovey model is the Mayer, Salovey, Caruso Emotional intelligence test V.20 (MSCEIT V. 20). As stated earlier, it makes use of performance base model for example, if an individual wants to have an insight into other peoples' ability or to perceive emotions in others, a presentation of variety of images is given for identification of emotions. The use of this approach provides scores that are based on an individual's performance on a set of items designed to measure the four branch model of emotional intelligence earlier discussed in this study. Further, this measure is an application to a variety of settings like - the clinical assessment, educational setting and workplace.

Mayer, Caruso and Salovey (1999) reason that to say that one is actually intelligent, several criteria must be met, such as individual's ability to reflect actual mental performance rather than behaviour patterns of self-esteem or construct or labeled traits. These authors contend that intelligence, most importantly, should develop with age. These theories have provided evidence to support their claims or demands (Mayer, Salovey, Caruso & Sitarenios, 2001).

Further, Sternberg (2002) comments that the impressive aspect of the work of Salovey et al (2001) is that within a short period of time, they have developed a careful validation to assess the construct validity to their theory. However, examining some aspects of the performance-base activity or model in this theory, it can be observed that adolescents with visual problems may encounter a little difficulty if they have to associate emotions as related to images or pictures presented, as postulated by the authors especially youths with total blindness. Consequently, in utilising the performance-based model, some modifications are highly essential. This could be done through replacing those images with sound/audio input. For instance, having such emotional feeling expressed verbally, like laughter, crying, exclamation, continuous sighing, heavy breathing and yawning would enable them to effectively participate in

either associating feelings with sound or linking emotional reaction to what they heard on a recorded tape during the treatment stage.

C. Daniel Goleman and Emotional Intelligence

Goleman's (1998) theory involves a framework of emotional intelligence that reflects how an individual's potential of mastering the skills of self-awareness, self-management, social-awareness and relationship management translate into success in the workplace. This model offers four major domains:

• Emotional identification, perception and expression,

• Emotional facilitation of thought,

• Emotional understanding and

Emotional management which postulate that each of these domains becomes the foundation for learned abilities or competences and underlying strength in the relevant emotional intelligence domain.

In sum, Goleman (1995) seeks to develop a theory of work performance based on social and emotional competencies. These competencies can be used to predict work performance in a variety of organisational settings with emphasis on those in leadership positions (Boyatzis, 1982; Spencer & Spencer, 1993) In a model of vocational success of adults with disabilities, Ginsberg, Gerber and Ryff (1994) point that the biggest factor of success and the one that distinguishes degree of success is control over one's life. Having control over one's life, is a special competence, so this should be encouraged among adolescents with visual impairment. With adequate up-to-date knowledge in the skills or components of emotional intelligence, attainment of better psychological well-being can be possibly attained.

D. Feldman's and Emotional Intelligence

Feldman (1999) presents that emotional intelligence and cognitive reasoning are distinct but they reinforce each other. In taking successful decision pertaining to life and work, emotions are involved. Also, emotions play essential role in taking decisions, questioning and instructing people. He further divided emotional intelligence into core skills and higher order skills. The combination of core skills and higher order skills leads to effectiveness in individuals. The core skills include identification and understanding of emotion, self control, empathy, accurate perception and effective communication, regular interaction, helping people identify and understand emotions,

self-control, as well as understanding the feelings of others and relating with them while the higher order skills include accountability, flexibility, clarity and personal effectiveness.

Locus of Control and Psychological Well-Being

Locus of control theory was proposed by Rotter (1954) and subsequently used in researches to find out the influence on human behaviour in an academic situation, it has proved to be a highly useful personality dimension for understanding the role of reinforcement in a variety of the behaviour situation. Locus of control is another treatment package used in this study to address the problems of psychological well-being of adolescents with visual impairment. Within psychology, locus of control is a construct considered to be an important aspect of personality. The concept of control plays an important role in several psychological theories. People have a generalised belief about the amount of control they have over their own lives (Miani, 1991.) Control is central to Seligman's probability analysis of control, theories of learned helplessness, Wieners attributional analysis of motivation and emotion and it is the key concept in Bandura's self-efficacy theory (Wise, 1999.) Control has been described as knowing how to change or affect any given condition so that the outcome is that which is described. For instance, relating this to the psychological well-being of adolescents with visual impairment, in the area or teaching mobility and orientation skills, a mobility specialist could teach a person with visual impairment how to manage or control his/her emotions when disoriented, identify or regulate emotions, while using cane techniques for movement in order to reduce fear and enhance good mobility skills that would lead to self satisfaction and awareness of the environment.

One's locus of control explains one's success, failure or other experiences when environmental conditions do not provide an obvious explanation (Sears, Peptau &Taylor, 1991). Doherty (1993) suggests that locus of control can also change in response to very distributing or disrupting life events. Being a generalised expectancy, locus of control can determine an outcome if a situation is ambiguous but if a situation is by its nature associated with chance outcomes or outcomes dependent on personal skills; the situation not the locus of control will determine outcomes.

Further, locus of control as stated by Spector and Fox (2003) is an individual difference regulating the degree that individuals attribute responsibility for outcomes, both positive and negative to either themselves or to an outside influence, Spector and

20

Fox linked this to job performance. Also, locus of control as a personality construct refers to an individual's perception of the locus of events as determined internally by his/her own behaviour versus fate, luck or external circumstance. It is a dispositional characteristic that determines whether people typically believe they have control over events and if they are responsible for their outcomes or whether they believe that forces outside their control such as fate and luck are what control their life events (Brien, 2004.)

Therefore, individuals with external locus of control believe that their behaviour is guided by fate and luck or other external circumstances, whereas, people with internal locus of control believe behaviour is guided by their personal decision and efforts. In addition, Aremu (2008) affirms that through locus of control, individuals view reinforcements as outcomes that are either as a result of luck, chance, fate or merely unpredictable. Interestingly, it is pertinent to find out one's locus of control. This is because its development stems from or could be influenced by various factors such as family, culture and past experiences leading to rewards. For instance, it has been observed that most internals have been seen to some families that focus on efforts, education and positions of some families, as they hold high esteem, their family values of education, hard work, discipline and self-control. Their beliefs are that such values are not taught but learnt through the exposure of the younger ones to role-models. From their youths, they would have learnt over time to imbibe such values or beliefs. Also, having an internal locus of control can be referred to as self--agency, personal control and self-determination.

As observed by Mamlin, Harris & Case (2001) internals can be psychologically unhealthy and unstable; their orientation usually needs to be matched by competency; self-efficacy and opportunity in order that the individual is enabled to successfully experience the sense of personal control and responsibility. However, where these are not enhanced or encouraged, overtly internal people who lack competence, efficacy and opportunity can become neurotic, anxious and depressed. Therefore, in order to achieve or experience success, internals need to have a realistic sense of their circle of influence.

Similarly, psychological research has found that people with more internal locus of control seem to be better off, for instance, they tend to be more achievement oriented and to get better paid jobs. Nonetheless, thought regarding causality of such is required here as well; whether it is the environmental circumstances (less privileged and

disadvantaged) that cause the locus of control or the other way round (Harris, 2000; Hattie, Marsh, Neil & Richards, 1997.) In addition, those with internal locus see the world through a more adaptive perspective; this leads to more positive outcomes and make them more likely to meet challenges and success in their future endeavours. Although in some cases one's hard work and personal abilities may not lead to positive outcomes and one's actions may not have any contribution to an outcome, but the belief that internals can do greatly and achieve through personal efforts, abilities and hard work greatly aids one's psychological well-being (Miami, 1991.) It was concluded that those who attribute a sense of personal responsibility to their future thoughts and aspirations are much more adept to living in the social world.

In simplistic terms Mamlin, Harris and Case (2001) report that males tend to be more internal than females. It can be inferred that this is because males tend to have strong will-power to take decisions and actions on their own with little or no influence or independently than females.

Schultz and Schultz (2005) state that there no significant differences in the locus of control found among adults in U.S. population; they cited that males have a greater internal locus for questions related to academic achievement than females. Further research in the area of age and locus of control examined the health effect of childhood locus of 7,500 British adults, who had been followed from birth and had shown an internal locus of control at the age of 10 years; those children who had internal locus of control also appeared to have higher levels of self-esteem (Pareek, 1997)

In another age related study, by Aldwin and Gilmer (2004), it was revealed that changes in locus of control in later life related more visibly to increased externality rather than reduced internality. Also, most literature in this field of knowledge states that internals are particularly well suited to leadership positions and job requiring initiatives, complex thinking and high motivation. Internals have been found to be more satisfied with their jobs, cope better in stressful situations and are more motivated in performance-based reward systems (Andrisani and Nastel, 1976; Howell & Avolio, 1993; Spector, 1982.)

Examining the issue of age and locus of control, Mamlin et al (2001) observe that as people get older, they tend to become more internal moreso that some psychological and educational interventions have been found to produce shifts towards internal locus of control siteing , outdoor education programmes. Also, they observed that people higher up in organisational structures tend to be internal.

Scheier and Carver (1993) suggest that the way individuals approach their goal influences their psychological well being, while other researchers suggested that having a coherent sense of one's personality and acting in accordance with that responsibility are positively related to well-being (Donahue, Robin, Rorts & John, 1993; Sheldon, Ryan, Rawthrone & Lardi, 1997.) Locus of control (internal or external) has deep cultural and social implication. For instance, when one plans to do something, it is pertinent to consider the effect of such behaviour. If as a student one, desires to excel or top the class, (an internal) and believes that his/her destiny is controlled by himself/herself, he/she will definitely work very hard towards attainment of that goal. On the other hand, if he/she is external, one who believes that his/her efforts will not influence his/her destiny/achievement, his/her hard work will not be rewarded except one is lucky, then working hard for success would not be a priority to such a student due to his/her believe that hard work alone does not count much.

Similarly, Lynch, Hurford and Cole (2002) state that enabling parents tend to have children with external locus of control and that having an external locus of control and that having an external versus internal locus of control was a statistically valid predictor of academic success. Since its introduction, most externals are said to come from families of low socio-economic status where there is lack of life control (Jack, 2004).

More so, because externals blame outside forces or bad luck for their failures and attribute their successes to good fortune, they generally do not learn from previous experiences; because they attribute their successes and failures to luck or chance. Based on this, they tend to lack persistence, are not steadfast and do not have very high level of expectation. Externals are said to lead easy-going, somewhat care free and relaxed happy lives (Hans, 2000.)

Gender and Psychological Well-being

On the issue of the possible impact of gender on psychological well-being, literature was reviewed on adolescent research and theory. According to Gilbert (1992), when theories developed using male subjects as the norm are applied to female subjects, different results often emerged. Gilbert (1992) further notes that gender refers not only to biological sex, but also to the psychological, social and cultural features and characteristics that have become strongly associated with the biological categories of female and male. Dada (2004) asserts that it is very rare to find a society which makes

23

no distinction at all between male and female in the area of behaviour. In some societies, being male or female depends largely on what kind of life the individual leads; education is therefore expected to prepare girls to be womanly and boys to be manly. Arantzazu (2009) study on psychological well-being and gender, findings revealed that boys have greater psychological well-being than girls due to a better physical self-concept. It was also revealed that physical self-concept is related in a positive manner with psychological well-being of the individual and in a negative manner to psychological unwellness in such a way that the more one is happy with one's physique, the more psychological well-being one has.

In addition, Engel, Welsh and Lewis (2000) in their study using the psychological well-being of older people in Cleveland report that older adults suffering vision loss experienced relatively greater decline in the ability to perform activities of daily living and independent living than elderly adults with good vision. In a related study on spirituality and religious scale, their relationship to locus of control conducted by Cheshire (2004), observe that gender was the only variable (of the three: age, education and gender) that was significantly predictive of spirituality, indicating that women who had an internal locus of control are reported to be more spiritual than men. Also, in that study, gender was the only significant variable indicating that women tended to be more religious than men. Schultz and Schultz (2005) in a study of locus of control among adolescents in United States of America population found that men had greater internal locus of control for questions related to academic achievement than women.

Type of Visual Impairment and Psychological Well-being

Considering the impact of type of visual impairment and the time of acquisition, that is the on-set of visual impairment leading to either total blindness or partial sight, several studies have reported that visual impairment acquired later in life were often accompanied by difficulties in various aspects of one's life; it is associated with difficulties in performing basic activities of daily living (Williams, Brody, Thomas, Kaplan & Brown, 1998; Cherry, Keller & Dudley, 1991).

Still on type of visual impairment, Gillman, Simmel and Simon's (1986) observe that total blindness occurring later in life (adventitious) is associated with health problems and the perceptions of poorer health status. Further total blindness in later life, according to Gillman, Simmel and Simon (1986), Williams, Brody, Thomas,

24

Kaplan & Brown (1998) present that blindness imposes problems of psychological and emotional well-being on the individual. In the same vein, Gillman, Simmel and Simon (1986), Davis, Lovie, Kitchin and Thompson (1995) state that other limitations that visual impairment in later life have on the individual include limited range of experiences and social interaction. Also, several other studies (longitudinal) as regards visual impairment illustrate the impact of vision loss as a cause to subsequent decline in physical, social interaction effective functioning and effect on their personality (Branch, Horowitz & Carr, 1989).

Additionally, Crews (1991) studies the efficacy of rehabilitation services for vision impaired elderly adults (adventitious) and finds gains in both the ability to perform a variety of tasks and increased independence in performing tasks previously done by other persons for them. Also, Elliott and Kuyk (1994) in their study on pre and post rehabilitation training and well-being, find a high level of improvements in functional abilities and self-esteem between pre and post rehabilitation training.

Finally, in another study on improving the Psychological well-being of vision impaired older persons through orientation and mobility by Engel, Welsh and Levis (2000) using 88 participants and measuring some areas of well being, it was revealed that there was increased confidence and increased ease of use of public transportation, thus enhancing movement. However, there was no observed decline in participants' well-being.

This work is anchored on two theories: social learning and attribution theory

Attribution Theory

Attribution theory is concerned with how individuals interpret events and how this relates to their thinking and behaviour. This theory was first proposed by Heider in 1958 as a psychological theory of attribution. However, Weiner (1986, 1992) and Jones, Kannouse, Kelley Nisbett, Valins (1972) also developed a theoretical framework that has become a major research paradigm of social psychology. Attribution theory assumes that people try to determine why they do what they do, i.e. attribute causes to behaviour. It is important to note that a person seeking to understand why another person did something may attribute one or more causes to that behaviour. The process that underlies are in three stages as follows:

- The person must perceive or observe the behaviour

- The person must believe that the behaviour was intentionally performed and

25

- Then the person must determine if they believe the other person was forced to exhibit the behaviour (in which case the cause is attributed to the situation) or not in that case, the cause is attributed to the other person.

Weiner (1974) focuses his attribution theory on achievement. He identified ability, effort, task difficulty and luck as the most important factors affecting attributions achievement. Further, attributions can be classified along three causal dimensions such as locus of control, stability and controllability. This theory is closely associated with the concept of motivation.

In scope and application, Weiner's theory has been widely applied in education, law and clinical psychology. Interestingly, Weiner opines that there is a strong relationship between self-concept and achievement, causal attributions determine affective reactions to success and failure. Also, when one succeeds in what one desires or work towards, one attributes successes internally, (my own skill) when a rival succeeds, one tends to credit external forces (e.g luck) when one fails or makes mistakes, one will more likely use external attribution, attributing causes to situational factors rather than blaming oneself. In addition, one's attributions are also significantly driven by emotional and motivational drives.

Social Learning Theory

Social learning theory originated from Albert Bandura (Bandura 1977, 1997). Social learning theory is defined in terms of individual goals' expectancies and social reinforcement that is, the reward or praises given by others in response to behaviour. This theory places a heavy focus on cognitive concepts. Also, it focuses on how children and adults operate cognitively on their social experiences and how these concepts influence behaviour and development. The theory states that an individual learns on the basis of his or her history of reinforcement, it explains human behaviour in terms of continuous reciprocal interaction between cognitive, behavioural and environmental influences. Bandura's social learning theory was the first to incorporate the notion of modeling or vicarious learning as a form of social learning. He emphasises the behaviours, attitudes and emotional reactions of others. The theory has been applied extensively to the understanding of aggression and in the context of behaviour modification. Also, this theory is seen as the theoretical foundation for techniques of behaviour modeling which has widely been adopted in training programmes (Bandura, 1997).

The theory thrives on social context as well as on the fact that important learning takes place vicariously. The critical role which Bandura assigns to imitation in personality development can be best seen in his analysis and contribution to the acquisition of novel responses. In series of experiments performed with children, Bandura and his colleagues demonstrated that subjects are allowed to observe an unusual set of responses performed by another individual (this is referred to as the model). Consequently, they could exhibit these same responses when placed in a similar setting. From social learning theory, Rotter developed the locus of control construct. In her view, it was believed that behaviour was largely guided by reinforcement (Rotter, 1971 in Howard, 1996) that is, with rewards and punishment, individuals would come to terms about what causes their actions, thus, these tend to shape or guide people towards the kinds of attitudes and behaviours they adopt. This also could go a long way to raise people's moral and emotions, keep them happy, satisfied and contented when success has been achieved or a behaviour has been modified.

Further, social learning theory is based on three principles; these include:

(a) The highest level of observational learning is achieved by first organising and rehearsing the modeled behaviour symbolically and then enacting it overtly, decoding modeled behaviour into words, labels or images results in better retention than simply observing.

(b) Individuals are more likely to adopt a modeled behaviour if the model is similar to the one observed, has admired status and the behaviour has functional value.

(c) Individuals are likely to adopt a modeled behaviour if it results in outcomes they value.

In addition, Akinboye (1992) and Ikujuni (1995) state that human behaviour is powerfully influenced by that which he observes, hears, feels, perceives, conceives, creates or participates in social learning theory can be a useful framework for enhancing psychological well-being of adolescents. This can be achieved through the use of model or imitation of the behaviour. The coded modeled behaviour is converted into tactual words and actions that can serve lasting retention and resulting in better retention than simply observing.

Social learning theorists have proposed that there is a simple linear cause and effect relation in understanding people's interactions. The theorist believes that personality is moulded from positive and negative interactions that exist among people.

27

This theory could be very useful as interaction with people requires adequate understanding, encouragement and reinforcement. Most social learning occur through modeling such actions, language, family, and behaviour. However, once vicariously learned, these behaviours are still subject to reinforcement and punishment by the social environment and interpersonal competence (Bandura 2000, Medsker and Fry 1997).

2.2   Review of Empirical Studies

Emotional Intelligence Versus Psychological Well-being

Researchers hold diverse views on Emotional Intelligence, some are of the opinion that El is cognitive ability just as is IQ (Mayer and Salovey, 2000.) Others are of the view that it is a combination of perceived abilities and traits (Schulte, Malouff, Hall, Haggerty, Copper, Golden, Dornheim, 1998 and Bar-On, 1997.) These opposing views have led to two separate domains of inventories as follows:

o   The ability - based measures which focus on maximal performance and

o   Mixed mode measures which focus on typical performances. (Mayer, Salovey, and Caruso 2000, Petrides and Furnham, 2000). Considering these two models, the maximal performance focuses on the best cognitive performance a test-taker can achieve on a test. On the other hand, typical performance is indicated in a test-takers' performance under ordinary test conditions (Dennis, Steinberg & Beatty, 2000.)

Two distinct conceptualisations of emotional intelligence currently mark the frameworks for empirical and psychometric research. Mathews, Zeidner and Roberts (2002) describe them as El -as-ability and "El-as-personality. Mayer, Salovey and Caruso argue that emotional intelligence as a type of mental ability arid indicated that their ability models focuses on the "interplay of emotion and intelligence", whereas the El-as-personality conceptualisation is considered a mixed model, "which describe(s) a compound conception of intelligence that includes mental abilities and other dispositions and traits.

Pasi (1997) reportes that at La Salle Academy School in Rhode Island, students are given lessons in emotional intelligence across the curriculum. This is part of an exhaustive social and emotional education programme which enhanced success and is referred to as "success in life". Interestingly, this programme got the approval/support of the schools academic council to continue with lessons in emotional intelligence

across the curriculum. The benefit of such future outcome would lead to greater achievement socially and academically.

Further, Pool (1997) reports that emotional well-being is a predictor of success in academic achievement and job success among others. In another similar study in the field of emotional intelligence, competence is the longitudinal studies conducted at Weather Head school management at Case Western Reserve University. The study exposed students to a required course on competence building with the aim of finding out whether emotional intelligence competencies can be significantly improved and sustained over time (Boyatzis, Cowan & Kolb, 1995.) The outcome of the study indicated a significantly high improvement of students' psychological well-being based on emotional intelligence competencies.

In another study, Richardson and Evans (1997) explore some methods, social and emotional competences within a culturally diverse society. Their aim was to assist students connect with each other so as to develop interpersonal, intrapersonal and emotional intelligence, arguing that intelligence is essential for personal accomplishment and improved psychological well-being. The study revealed great positive outcome.

Ediger's (1997) study, it was stressed that emotions, feelings and values are vital for a person's well-being and achievement in life. Using science students for the study, he observed that science teachers must stress and focus on the affective domains as this cannot be separated from the cognitive domain. In his conclusion, it was revealed that quality emotions and feelings assist students in putting in their best during learning and that students who are aversive and think negatively cannot concentrate for a long period as they would experience difficulty reaching their potentials.

Additionally, in a 1997 survey of benchmark practices among major co-operations, Goleman, reports that four out of every five companies tried to promote emotional intelligence in their employees through training and development as well as when evaluating performance and hiring. In line with this, Goleman in 1998 in another survey of American children of ages seven to sixteen, evaluated their emotional intelligence which was done within a period of 10 years, found out that there was a steady worsening of children's emotional intelligence especially within the poorer children of lower level than average although the rate of decline cut across all economic groups.

Goleman (1998) reportes Achenbach's study of 1980, on assessment of children's basic emotional competence, observed a worldwide decline in basic emotional competencies. Goleman attributed this to various causes which has led to various signs, to include the increased rate of adolescents' problems in drug abuse, despair, alienation; crime, violence, depression, teenage pregnancies, bullying, dropping out of school etc. Achenbach further noted that what this portends for the workplace is quite troubling and disturbing because of the growing deficiencies of emotional intelligence among workers. He further expressed his anxiety for the future because the adolescents of the present time make up future workforce.

In another study, Finnegan (1998) contends that schools should endeavour to assist students to learn the abilities underlying emotional intelligence because possessing these abilities can lead to great achievement, improved psychological well-being, being effective in the workplace and the society at large.

Also, Cover and Murphy (2000) conducted a study that examined the relationship between self-identity and academic persistence and achievement in a counter stereotypical domain. It was revealed that the higher the self-concept/self-schema, and the more positive the self-descriptions, the better the academic achievement of students at the age of 18 years. It was also revealed that self-identity improves through social interaction and communication with others and these would enhance achievement and satisfaction. Satisfaction will lead to better psychological well-being.

Similarly, Robert, Zeidner and Mathews (2001), McCann, Roberts, Mathew and Zeidner (2004), comment on Mayer, Salovey and Caruso's emotional intelligence test (MSCEIT), measures and consensually agreed that it is a series of emotion-based problem solving items with relatively low face-validity, and measures EI across the experimental area. (Perceiving emotional branch and facilitating thinking branch) and the strategic area (understanding emotional meaning branch/managing emotions branch).

Davidson and Kabat-Zinn (2003) in their recent research on mindfulness training - an emotional self-regulation strategy focused on helping individuals stay focused on the present (especially the good behaviour), such that being distressed and having distracting thoughts would be prevented. The study revealed that training can actually alter the brain centre which regulates negative and positive emotions. Also, that training assists people to pause before acting on emotional impulse.

In another development, Bradberry and Greaves (2005c) administered an appraisal of self-report measures of EI as a self or 360 degree assessment on the emotional intelligence skills of 11 graders (in Alabama in the U.S.A.). This appraisal measured personal and social competence and academic achievement. It was also revealed that these ability areas support achievement. Additionally, Tett, Fox and Wang (2005) provided a psychometric review of 6 self-report measures of emotional intelligence based on 33 peer reviewed reports; it further introduced a psychometrically rigorous measure of trait based on emotional intelligence. It concluded that it could be used for test and training of emotional intelligence.

Locus of Control versus Psychological Well-being

Locus of control has extensively been used in researches, Goldberg (1976) in a study on prisoners report that locus of control (internal & external) are predictive of inmates' involvement in prison activities. They reported that, inmates that are not involved in prison activities are found to be significantly more external than those who are involved. In their findings, it was revealed that there were evidences to believe that inmates may also be differentiated on locus of control in relation to court attendance.

Bode (1995) investigates the relationship between locus of control and academic success in selected medical office assisting students. The findings revealed that there was a relationship between the locus of control and academic success as measured by GPA in two of the four subjects of the study population, the students in the study population who received the highest GPA had the most internal locus of control. Others with least academic success with GPA below 2.0 had an external locus of control; in addition, the subset with a GPA range of 2.00 to 2.99 demonstrated a more internal locus of control. It was however indicated that the subset with a GPA range of 3.00 to 3.99 scored the most external direction of all groups.

Also, Bode's finding further revealed that there is relationship between the internal locus of control and the highest academic success (4.00 GPA) as measured by grade achievement; that a more locus of control was demonstrated in those individuals with the lowest academic success. It concluded with the implication, based on the findings that locus of control is not a reliable predictor of academic success.

In his own study, Abe (1995) investigates the causal linkage between academic achievement and some socio-psychological variables. The study found out that there is no direct effect of locus of control on students' achievement in social studies. In his

study of the causal linkage between academic achievement and some socio psychological variables using a sample of 624 Junior Secondary School class three students in 30 secondary schools in Oyo State. In addition, the study revealed there is no direct effect of locus of control on achievement and gender on career aspiration.

Funderburg and Levy (1997) investigate the relationship between organisational citizenship behaviour and locus of control, they reported correlations between self-reported organisational citizenship behaviours, peer reported organisational citizenship behaviour and locus of control, it was also reported that in their sample, self-reported organisational citizenship behaviour and peer reported organizational citizenship behaviour correlated at a nonsignificant 18; this revealed that lack of a relationship across different sources of reporting is not uncommon.

Further still, in another study by Hoffi-Hofstetter & Mannheim (1999) on organizational citizenship behaviours and locus of control, it was revealed that organisational citizenship behaviours were related to an internal locus of control. In another investigation on social work professionals, emotional intelligence, locus of control Ft role efficacy; Sanjay's (2006) objective was to study social work professionals psychologically, the study conducted on a sample of 178 participants. The findings depict role efficacy to be associated positively with emotional intelligence and internal locus of control but negatively with external locus of control. Similarly, emotional intelligence was found to be associated positively with internality but negatively related to externality.

Umoinyain (1999) in his study constructed and tested a 12 variable model for achievement in senior secondary mathematics as a basis for providing a causal explanation for achievement in the subject. The findings revealed among others that four sociopsychological factors (parental level of education, self-concept, locus of control and attitude towards mathematics) made-up the two lower levels of achievement in mathematics. This study also has a link with academic achievement.

Although, Kulshrestha and Sen (2006) investigate the effect of subjective well-being which is different from psychological well-being, the variables are in relation to emotional intelligence and locus of control, the participants were 150 executives of a motor limited. The findings of the study revealed that emotional intelligence and locus of control have significant correlation with subjective well-being; it was presented that subjects with high emotional intelligence and internal locus of control scored significantly high on positive effect and scored significantly low on negative effect

while subjects who scored high on emotional intelligence had internal locus of control scored significantly high on all the three dimensions of life satisfaction scale.

Aremu (2008) in his study investigated the effect of locus of control and self-efficacy on the reduction of police corruption and facilitating attitudes in the Nigerian police. Using 300 police personnel as participants from three state police commands. The findings revealed that participants treated with locus of control showed significant reduction in a post-test corruption measure. It also revealed that emotional intelligence of participants were found to moderate significantly their perceived attitudes towards corruption.

A critical survey of related literature revealed the unique effects or contribution of emotional intelligence and locus of control as intervention in different areas; such as academic achievement, self-control, motivational constructs among professionals, as antecedents to voluntary workplace behaviour and as strategies for changing police attitude towards corruption. However, this current study focused on the effectiveness of the independent variables (emotional intelligence and locus of control on the enhancement of the psychological well-being of adolescents with visual impairment).

In the light of the findings from various related literature reviewed, there is evidence that there are few type of empirical studies in the context of adolescents with visual impairment. Therefore, this study attempted to examine in-depth the effect of the independent variables on the dependent variable in the present study.

Empirical Studies on Psychological Well-being

The field of well-being comprises the scientific analysis of how people evaluate their lives both at the moment and for longer period within several years. Such evaluation of one's life include their emotional reaction to events, the interpretation of their mood, fulfillment and satisfaction with themselves and other domain such as their ability to relate freely with other people in the work place, school marriage, business and so on.

As mentioned earlier, it was discovered during the cause of review that there are dearth of studies in the area of adolescents with visual impairment and psychological well-being. In line with this observation, Adeyemo and Adeleye (2008) comment that there has been few studies on psychological well-being of persons with physical impairments especially on adolescents in developing countries.

In a model hypothesized by Rodin, Timko & Harris (1985), Rodin (1990), Tompson and Spacapan (1991) and Bandura (1997) investigated on the global beliefs of primary control and the effects on psychological well-being, it was repeatedly revealed that greater personal control is associated with better emotional health regardless of how it was operationalised. In line with this also is the result of control-enhancing experimental studies which revealed that the chain of causality was from increased personal control to higher levels of psychological well-being.

Still on social support, personal control and psychological well-being; Rowe and Kahn (1987), and Bandura (1997) identify that, social support and personal control are widely recognised by researchers as the two most important research predictors of psychological well-being morbidity and mortality in adulthood. However, it was noted that the interrelationship between these two constructs remain largely unexplored inspite of assertions that they are clearly related.

In their research on measures of the family environment, perceived paternal and maternal parenting style, Clarke-steward and Hayward (1996) found that children had stronger relationships with both parents and a greater sense of psychological well-being when the custodial parent had made a successful emotional stability to the divorce, especially children in their mother's custody.

In another study Kef (1997), it examined the personal network and social support of 316 blind and visually impaired adolescents of ages 14 to 23 in the Netherlands. The findings revealed that an average participant had a personal network of 15 people. (compared to 15 to 20 for sighted adolescents) The oldest adolescents had the highest networks and blind adolescents had the smallest for all adolescents, also, revealed in the study is that parents were the most important source of support to totally blind adolescents.

Coupled with the above, Huure and Aro (1998) investigated on the psychosocial development among adolescents with visual impairment in a group of 54 adolescents (40 boys and 14 girls) attending regular schools. Their mean age was 14.0 (SD 0.87). The control group consisted of normally sighted adolescents of same age level. The result indicated that the adolescent group with visual impairment did not differ from the control group in the frequency of depression, distress symptoms or in their relations with parents and siblings. It was further reported that adolescents with visual impairment less often had many friends and dates with other young people than those without visual impairment. They also, more often experience feelings of loneliness

and difficulties in making friends. Notably, self-esteem, school achievement and social skills were lower in girls in the control group. Summarily, their result indicated that the psychological development outcomes of many adolescents with visual impairment were similar to their peers without visual impairment especially girls who need more support in their psychological development.

In a similar study, Smith, Kohn, Savage - Stevens, Finch, Ingat and Lim (2000) examine the effects of interpersonal and personal agency on perceived control and psychological well-being in adulthood, using a theoretical model which linked social support and primary control. Also provided was a developmental perspective on how normative age-related changes can alter control beliefs. The study utilised data from 482 adults aged 18 to 93 and generalised belief in primary control was hypothesised to have direct positive effect of psychological well-being and to arise from two distinct sources, they include interpersonal agency (obtaining positive ends through interactions with others) and secondary, personal agency (achieving desired outcomes on one's own behalf). It was shown that age was believed to affect both types of agency indirectly. This resulted from age - related changes in health and emotional support. Also, physical positive effect on psychological well-being, but the effect of emotional support on psychological well-being was mediated by interpersonal agency and perceived primary control.

Further findings presented a structural equation modeling analyses with the EQs 5.4 (i.e. goodness - of - fit midex 98).

In the study of Huurre, Taina, Aro and Hilleri (2000) on the psychological well-being of Finnish adolescents with visual impairment versus those with chronic conditions and those without disabilities, the data collected were 115 adolescents with visual impairment compared with 44 chronic conditions and 607 typical adolescents with no impairment. The findings revealed that adolescents with visual impairments especially those with blindness had more difficulties in their relationships with friends, but had fewer problems with psychological well-being than those with chronic conditions.

In examining the role of parental and peer support in adolescents psychological well-being, a comparison of adolescents with and without visual impairment was made. Kef and Dekovi (2004) in their study utilised 178 adolescents who are blind or visually impaired and 388 adolescents without visual impairment. The findings revealed that peer and parental support proved to be important for well-being of both adolescents with visual impairment and sighted ones. Whereas in the group of adolescents without

impairment, well-being appears not to be affected by peer support. It was also indicated that parental support is more strongly related to psychological well-being of adolescents without impairment than those of adolescents with visual impairment.

Further, in a research by Adeyemo and Adeleye (2008) on emotional intelligence, religiosity and self-efficacy as predictors of psychological well-being among secondary school adolescents in Ogbomoso, Nigeria. The study utilised 292 adolescents from ten secondary schools, between the age range of 13 to 20 years. The result indicated that the three independent variables block were effective in predicting psychological well-being of adolescents.

Finally in Arantzazu (2009) investigation, boys have greater psychological well-being than girls due to better physical self concept. The findings indicated that physical self concept is related in a positive manner with psychological well-being of the individual and in a negative manner to psychological unwellness in such a way that the more one is happy with one's physique, the more psychological well-being one has, with less level of anxiety and depression and less risk of suffering. In addition it was found that it is a function of age, gender and physical activity. Also it was indicated that physical self identity of male adolescents present higher scoring for psychological well-being than their female peers. The finding also revealed that the same relationship was established between 12 and 14 years old adolescents on one hand and adolescents above 15 years on the other and between those who do physical activity and those who do not.

2.4   Appraisal of Literature

In this chapter, literatures were reviewed both theoretical and empirical. While reviewing literature on the various variables in this study, the researcher observed that although studies have been conducted in this area, most of them focused generally on different organisations. Other studies were also in the area of general intelligence, achievement and intelligent quotient.

However, a lot of gaps exist in the literature concerning adolescents with visual impairment especially in the area of emotional intelligence and locus of control. There is a dearth of research work on the use of both strategies in enhancing the psychological well-being of adolescents with visual impairment in Nigeria.

Interestingly, among the very few empirical literature available in Nigeria are studies by Adeyemo (2004) on patterns of emotional intelligence among counseling psychology students in a Nigeria University. Also, Eniola (2001) studied identity, roles

and body image perception as correlates of personality development of visually impaired adolescents. Eniola's (2007) study anchored on the influence of emotional intelligence and self-regulation strategies on the aggressive behaviours of adolescents with visual impairment. Another of Eniola and Busari's (2007) study focused on the use of emotional intelligence in promoting self-efficacy of the visually impaired students of Federal College of Education (Special), Oyo. Aremu (2008) also investigated the effectiveness of locus of control and self-efficacy in enhancing police emotional intelligence in Nigeria.

In addition, Adeyemo and Adeleye (2008), in their study focus on emotional intelligence, religiosity and self-efficacy as predictors of psychological well-being among secondary school adolescents in Ogbomoso, Nigeria. Additionally, Adeoye's (2008) study was on emotional intelligence and self efficacy as determinants of academic achievement in English language among students in Oyo State Senior secondary schools. Further, in a recent study by Adeyemo (2010) the focus was on educational transition and emotional intelligence.

These pools of literature reviewed found that the various studies used different variables and scope not similar to those used in the present study although they show relevance of the concept to varied areas of knowledge. It is on this premise, among others that it would be of theoretical interest and empirical relevance to examine the potential experimental effects of emotional intelligence and locus of control training on the enhancement of psychological well-being of adolescents with visual impairment.

Further, from the literature reviewed, it is also observed that emotional intelligence could be a useful tool for enhancing the psychological well-being of adolescents with visual impairment. This is so because adolescents with visual impairment feel free and happy when they relate with people who understand, accept and are aware of their problems. Moreover, locus of control is a very good programme in enhancing the psychological well-being of adolescents with visual impairment. In this study, locus of control has to do with belief in self and control of events. Adolescents were able to understand and be conscious of themselves and other people as well as using such knowledge in relationship.

Type of visual impairment is also a moderating variable in this study, and there exists disagreement among scholars on the relationship on type of visual impairment and psychological well-being, some emphasised direct link with the totally blind while

others jettisoned the relationship. Also, from the literature reviewed, it was discovered that attainment of a quality psychological well-being requires being satisfied, contented and happy with oneself. In addition, knowing one's feelings and those of others and utilising such in relationships would help in the improvement of ones psychological well-being. Consequently, any adolescent who is lacking in these areas require improvement on his/her psychological well-being. It therefore becomes imperative to look for ways of improving on the psychological well-being of such adolescents using training programmes like emotional intelligence and locus of control training that had been used in this study. It is hoped that the present study will to a great extent contribute to the existing body of knowledge in these areas.

2.5   Conceptual model for the study

The conceptual model explains the process in which the study was carried out which is the theoretical framework in which any study is based. It is derived from the treatment packages (intervention on behaviour) which is based on stimulus - organismic - response equation (S - 0 - R) to be used in the study. The model is presented in fig 2 on page 39 and it shows the independent variables, the intervening variables (divided into intervening variables and the dependent variables).

The independent variable which is the therapeutic mode which were expressed at three levels comprising of Emotional Intelligence, Locus of control and control group which were manipulated in the study to find out their outcome on the dependent variable (psychological well-being). The two moderating variables are types of visual impairment and gender, they are conceptually represented in a model. These are factors which may affect the outcome of training. In this model, the interaction of the two independent variables and the moderating effects of the participants are expected to lead to an enhanced psychological well-being.

The dependent variable (psychological well-being) on the other hand is the expected change in behaviour or the ultimate goal of the research which is brought about as a result of effective manipulation of the independent variables.

38

Fig 2.1: Conceptual Model of the Study

Independent Variables	Intervening variables	Dependent Variable

Emotional Intelligence (EI)

Locus of Control (LOC)

Control

1. **Gender**
   - Male
   - Female

2. **Types of Visual Impairment**
   - Totally Blind
   - Partially Sighted

Enhanced Psychological Well-being

S ————————————— O ————————————— R

Key: S = Stimulus   O = Organismic   R = Response
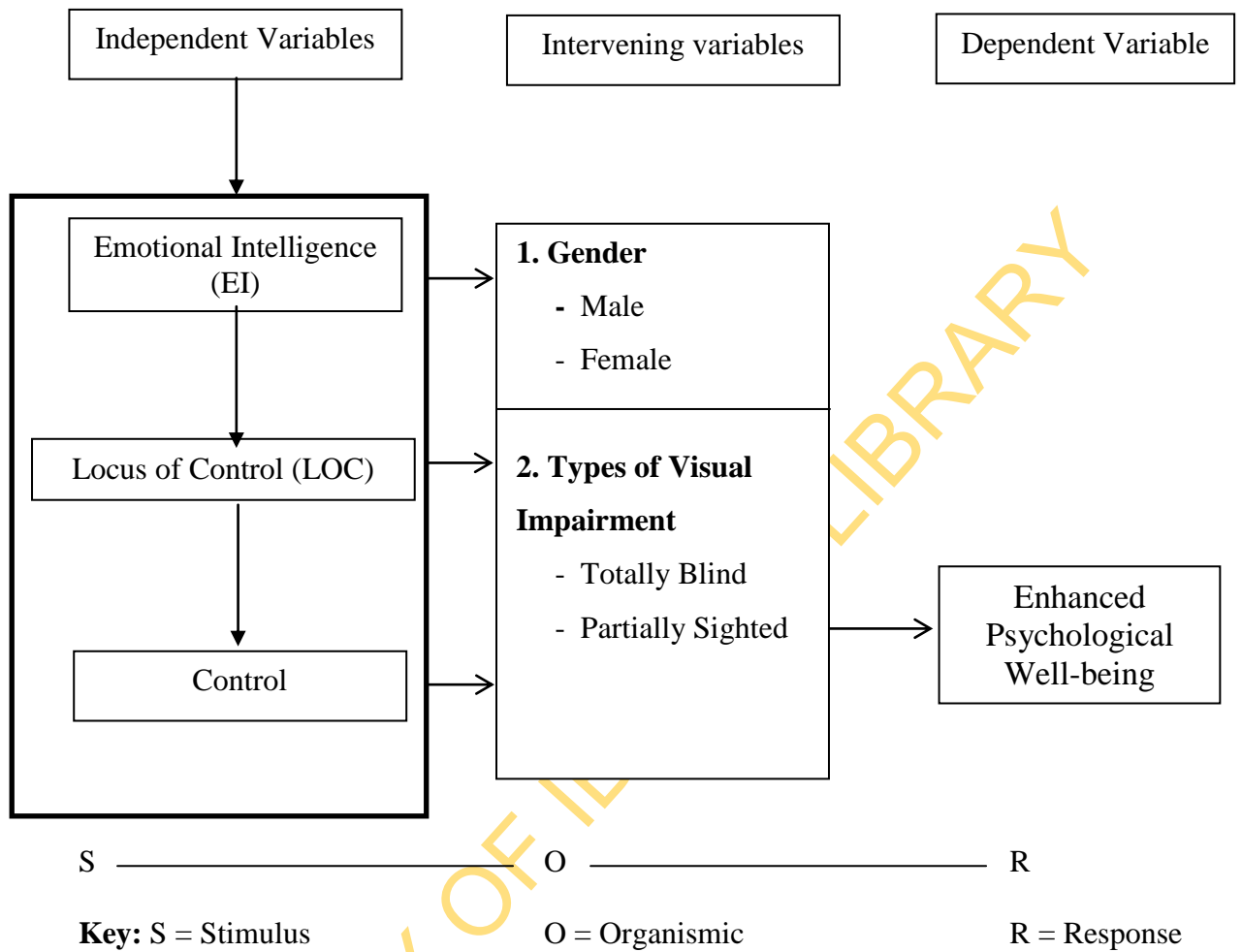
CHAPTER THREE

METHODOLOGY

This chapter dwells on the research design adopted and the procedure followed in executing it. It comprises the research design, variable, population, sampling procedure, the participants, the instrument used in collecting the data, a detailed outline of the treatment procedure, scoring of instrument and the method of data analysis.

3.1   Research Design

The study adopted a pre-test, post-test control group true-experimental design. It was used to examine the effect of emotional Intelligence and Locus of control training in enhancing the psychological well-being of adolescents with visual impairment in Oyo and Ondo States.

A 3 x 2 x 2 factorial matrix was adopted with the treatment at three levels and crossed with gender and type of visual impairment at two levels respectively (male and female; totally blind and partially sighted). The factorial designed in the study was used to trace the possible interaction and independent effects on the variables involved in the study. The design enabled the researcher test more than one hypothesis about the main effect efficiently as well as study the factors that interact thereby allowing for greater generation that may be possible.

The design is represented below:

Experimental group 1 (E1): 0_1 X_1 0_4

Experimental group 2 (E2): 0_2 X_2 0_5

Control   (C): 0_3 0_6

Where: 0_1, 0_2, and 0_3 represent the pre-test observations for experimental groups 1, 2 and control group respectively. Further, 0_4, 0_5 and 0_6 represent post-test observations for experimental groups 1, 2 and control group respectively.

X_1 -   Represents the treatment programme 1 (Emotional

Intelligence Training – ELT)

X_2 -   Represents the treatment programme 2 (Locus of Control

Training LOCT)

C   -   Represents the control group (The conventional method)

3.2   Variables in the Study

Independent Variables

   I.   Emotional Intelligence

II. Locus of Control

III. Control group

Moderating Variables

There are two moderating variables

- Gender (Male and Female); and

- Type of Visual Impairment (totally blind and partially sighted)

The Dependent Variable

- Psychological well-being

Table 1: A 3 x 2 x 2 factorial matrix table

Experimental Conditions	Gender	Types of Visual Impairment		Total
		T/B	P/S	
1. Emotional Intelligence Adeniran Memorial Grammar School, Ogbomoso	Male	25	7	40
	Female	6	2	
2. Locus of Control Aperin Oniyere Commercial High School, Ibadan.	Male	20	5	40
	Female	6	9	
3. Control Owo High School, Owo.	Male	31	4	40
	Female	3	2	

Key: T/B = Totally Blind

P/S = Partially Sighted

Table 1 consists of two treatment groups, emotional intelligence and locus of control as well as the control group. The columns present the two moderating variables at two levels, gender (male/female). Type of visual impairment; partially sighted and totally blind.

3.3   The Study Population

The target population for the study consisted of all adolescents with visual impairment in secondary schools (integrated settings) in Ogbomoso and Ibadan in Oyo State and Owo in Ondo State.

3.4   Participants for the study

Only students from Junior Secondary School I to II and Senior Secondary School I to II participated in the study. The experiment was conducted in the classroom setting as group training. All the students with visual impairment in the selected schools received treatment except those in the control group. The age of participants for the study is between 12 and 21 years (the age range used is due to delay experienced by

students with visual impairment in starting school). Forty students were purposively selected from each of the schools. In these schools, Junior and Senior schools were used because the participants being visually impaired were very few.

3.4.1   Schools: Three integrated school settings were selected for the study.

(i)   Adeniran Memorial Grammar School, Ogbomoso.

(ii)   Aperin Oniyere Commercial High School, Ibadan.

(iii)   Owo High School, Owo.

3.5   Criteria for Inclusion

▪ Participants were classified as adolescents with visual impairment, screened by the Snellen test.

▪ Participants were adolescents in the selected secondary schools.

▪ Participants had no additional special needs

▪ Evidence of willingness to participate in the treatment programme when first introduced by the head of school.

▪ Must be from the schools used for the study.

The schools were assigned to treatment groups through the use of ballot system.

3.6   Sample and Sampling Technique

The sampling technique adopted in selecting the participants for the study was purposive. This was used in order to make up the targeted group that satisfied the criteria for participation in the study. There are students/adolescents with visual impairment. Students from JSS I, II – SSS I, II were used because they were very few in each of the classes but were old enough to be exposed to such training which will enable them improve on their psychological well-being, feelings and interaction at school, home and in their communities. In the first school, Adeniran Memorial Grammar School, Ogbomoso, there were 38 adolescents from JS I to II and SS I to II, only students in JS III and SS III were not included as participants because they were preparing for the JS III and WASC/NECO examinations. Two rehabilitees from the school made up the number to 40. i.e. thirty-one (31) totally blind nine (9) partially sighted.

In the second school, Aperin Oniyere Commercial High School, Ibadan, participants were also drawn from JS I to II and SS I to II. Altogether, there were forty (40) participants i.e. twenty-six (26) totally blind and fourteen (14) partially sighted There is also the need to prepare them for challenges imposed by the adolescent periods

and the visual loss such that when faced with these problems they would be confident enough to overcome them.

The third school used was Owo High School, participants were also drawn from JS I, II and SS I and II. Only six partially sighted students and thirty four totally blind adolescents participated in the study. On the whole, there were also forty (40) participants.

The students were screened to ascertain that they were those with only visual impairment and without any other form of special needs. The instrument used for this purpose was the Snellen scale. Also, to determine those who were totally blind and those with partial sight (though this group could not read the scale but could perceive light).

Table 2: Analysis of Sample Selection

	NAMES OF SCHOOL	No of Participants		
1.	Adeniran Memorial Grammar School, Ogbomoso, Oyo State	**T/B**	**P/S**	**N**
		31	9	40
2.	Aperin Oniyere Commercial High School	26	14	40
3.	Owo High School, Owo	34	6	40
	Total	91	29	120

Table 3:   Presentation of Participants according to Classes in all Schools

Type of Visual Impairment	JS I	JS II	SS I	SS II	Total
Totally Blind	20	26	18	27	91
Partially Sighted	6	7	11	5	29
Total	**26**	**33**	**29**	**32**	**120**

3.7   Instruments

The following instruments were used in the study for the purpose of data collection:

1. The Snellen Scale; and

2. Adapted Version of Ryff Scale (1989) of Psychological well-being (AVRPWB)

Treatment Packages:

a. Emotional Intelligence Training Package; and

b. Locus of Control Training Package

3.7.1   The Snellen Scale

The Snellen scale is a vision screening instrument used to measure visual acuity. It is a standardised eye screening instrument approved by the World Health Organisation (WHO) to identify the degree of visual loss (Wikipedia free encyclopedia, 2006). This instrument was used to screen the participants for the study in order to ascertain their level of visual impairment, whether totally blind or partially sighted.

Fig. 3.1: Snellen Chart

3.7.2   Adapted Version of Ryff Scale of Psychological Well-being (AVRPWB)

The instrument that were used for this study is the Adapted Version of Ryff scale of psychological well-being. It measures six areas of psychological well-being in an individual. The Ryff scale (1989) of psychological well-being consists of 84 questions (long-term) or 54 (medium-form). There is also the short-term, consisting of less questions. However, for the present study, the researcher adapted the medium form from which only 25 items was drawn since it consists of a series of statements reflecting six dimensions of psychological well-being such as: Autonomy, environmental mastery, personal growth, positive relations with others, purpose of life, and self acceptance.

Ryff (1989) finds a coefficient alpha for each of the sub-scales ranging from 0.83, to 0.99. Ryff scale of psychological well-being is a foreign test, but has been adapted to suite African children and has been used by Adeyemo (2008), Kolo, (2007). The instrument for the present study is made up of two sections. This was brailled for easy reading by the students because they are blind. Section A was designed to collect personal and biographical data of the respondents and the items forming the content of the scale. This section consists of a 25-item scales of psychological well-being constructed to measure the six areas or dimensions outlined. Modifications were made on the items to suit the characteristics of the participants and the environment. The scale has both negative and positive statements. The items from the separate scale are mixed. Responses to negatively scored items would be reversed in the final scoring procedures so that high scores indicate high self-ratings on the dimension assessed. The instrument was subjected to assessment and validation to determine its suitability for the study. The Cronbanch alpha was used to establish the internal consistency of the scale: the overall test reliability of Cronbach's alpha was 0.77 after three weeks interval of administration.

Scoring Procedure of the Instruments

The scoring of the items are reversed in the final scoring procedures so that high scores indicate high self-rating on the dimension assessed.

High Scorer (50 and above): Those who show positive measures in feelings, behaviours, mastery, and competences, tend to have quality of better Psychological well-being with scores from 50 and above.

Low Scorer (below 40): Those who have the sense of stagnation in Psychological Well-being scoring below 40. The instrument was brailled for easy reading.

3.7.3   Emotional Intelligence Training Package (EITP). This package was also used as a treatment package by Adeoye (2008), the researcher adapted the package in the present study. Modifications were made to suit the participants who were adolescents with visual impairment. This training package is used for the experimental group I.

It explains the session-by-session account of all that took place in the treatment session. The instrument is made up of the following areas – orientation activities or tasks and assignments at the various stages of the training programme. EIT has eight sessions, each session was devoted to peculiar aspects/components of emotional intelligence. The sessions are presented as follows. Emotional intelligence and importance of enhancing psychological well-being, self-awareness/management, social awareness/channelling emotions, relationship management, motivation and summary.

3.7.4. Locus of Control Training Package

This is the training package used in the experimental group 2 (Locus of group) like the EIT package, this instrument has eight sessions with each session addressing a peculiar aspect of locus of control. The sessions are presented as: general orientation to the treatment programme and test administration, meaning of locus of control, orientation on external locus of control, orientation on external locus of control, behavioural expectations: understanding oneself in relation to locus of control, self determination and awareness, behavioural attitude: self control and management, general revision, administration of post-test and termination of treatment programme.

3.7.5   Validation of Instruments
Test – Retest

To establish the reliability and validity of the instruments, a trail test was conducted using 20 participants with visual impairment (16 male, 4 female) at Yewa College, Ilaro, Ogun State. The study was conducted two times with three weeks interval with a co-efficient value of $r = 0.99$.

Psychometric properties

Validity

To validate the instrument, it was given to experts in the field of counselling psychology, special education, as well as measurement and evaluation for the purpose of establishing the content validity. Suggestions from these experts on some items helped the researcher in deleting the ambiguous questions which brought the total items to 20 instead of 25 initially conceived. There was a common agreement among these experts on the suitability of the items chosen and modified for the study from the Ryff's scale. The 20 items were used for the Cronbach alpha correlation after administration of the trail-test.

Reliability

To establish the psychometric properties of the instruments, a test-retest was carried out on the scales by administering it to 20 adolescents (students) with visual impairment (16 male, 4 female) who were not part of the original sample. Cronbach alpha was used to establish the internal consistency of the scales: Ryff's scale has overall test reliability of Cronbach's alpha of 0.77 after three weeks interval of administration.

3.8 Procedure for Test Administration

3.8.1 Visit to Schools

The study was conducted in three schools, namely; Adeniran Memorial Grammar School, Ogbomoso. Aperin Oniyere Commercial Grammar School, Ibadan, Oyo State; and Owo High School, Owo in Ondo State. Prior to the commencement of the treatment session, the researcher visited the schools to ascertain and establish their conformity to the outlined criteria for selection of participants. The researcher collected a letter of introduction from the Department of Special Education, University of Ibadan to the head teachers of the schools. The researcher was introduced to the class teachers in these schools in order to get support, cooperation and assistance when carrying out the research in the schools. The language of instruction used during the sessions is English language; however, the class-teacher assisted by brailling out the take home assignments, while those with tape recorders recorded their assignments as the researcher read out the exercises.

3.8.2 Selection of the Resource Teachers for the Experiment.

The researcher sought the permission of the head teacher to use some class teachers as research assistants in the eight sessions/weeks treatment exercise. The researcher found it more appropriate and worthwhile to engage the services of these teachers since they were more experienced and are special educators. They had better knowledge in the psychology and education of persons with visual impairment and could assist in organising the time to suit all participants from different classes. Also, because these teachers are used to the students, it would help reduce the bias in the treatment that might be created with the introduction of entirely new teachers.

3.8.3 Training of Resource Teachers

Research assistants who were class teachers and braillists were trained for two weeks prior to the commencement of the treatment session by the researcher. They were exposed to training three days in a week to enable them understand what they are required to do during the treatment session. They were exposed to class organisation, lesson plan, and how to evaluate what will be taught. The researcher tutored the assistants by providing feedback on implementation, mastery, participation and answering questions about emotional intelligence and locus of control training. During the weeks of interaction and implementation, the research assistants were observed by the researcher once a week in order to monitor implementation.

3.9 Treatment Strategy

The treatment programme consisted of three phases, namely; Pre-treatment, treatment and post-treatment.

Table 4: Procedure for the Treatment

Weeks	Activities
1	Training of the research assistants and assigning the students to treatment groups.
2 to 3	Pre-test administration of Ryff Scale of Psychological Well-being (AVRPWB) in all the groups.
6 – 13	Exposing the students to emotional intelligence training (EIT) and locus of control training (LOCT)
14	Post – test of Ryff Scale

(i) Experimental Group I (EI) – Mondays – 2 hours

(ii) Experimental Group II (LOC) – Fridays – 2 hours

The researcher met the control group on the first Tuesday at the commencement of the study for pre-test assessment and at the end for the post-test assessment.

3.10 Pre-treatment Assessment

Pre-treatment assessment was conducted to screen participants for total blindness and partial sightedness. This served as the first point of the pre-treatment assessment. The students were exposed to pre-treatment instruments, namely; adapted version of Ryff's scale of psychological well-being. All the pre-treatment assessment was completed before the commencement of the treatment proper during the first two weeks of the study earmarked for that purpose in order to ascertain the entry behaviour of the students before treatment.

3.10.1 Emotional Intelligence Treatment Package

Session I: General Introduction, Administration of pre-test and establishment of rapport: the concept of EI and its importance in enhancing psychological well-being.

Session II: Introducing the Concept and Importance of Emotional Intelligence. This involves being able to recognise, identify feelings and put a name on them. It also includes the awareness of the relationship among thoughts, feelings and actions.

Session III: Self Awareness/Identification of Emotions. This involves perceiving one's feelings, recognising emotions and thoughts.

Session IV: Self-management/managing emotions. This involves self-control, trustworthiness, conscientiousness, adaptability, achievement drive and initiative.

Session V: Social Awareness/Channelling Emotions. This involves empathy, service orientation, and organizational awareness.

Session VI: Relationship management involves developing others, influence, communication and conflict management.

Session VII: Handling relationship continues: Leadership, change catalyst, building bonds, teamwork and collaboration. Motivation/summary. This involves behaving responsibly; focusing on task at hand, paying attention, handling praises and rewards. Summary of the package and application of EI.

Session VIII: Brief Revision, Termination and Post-test Administration

Brief Description of Training Programme
Experimental Group 1
Emotional Intelligence Treatment Programme
Session One

General Introduction, Administration of Pre-test and Establishment of Rapport.

The researcher will welcome participants to the programme, commend their effort and make a self-introduction. The participants will be informed of the objective of the study and confidentiality of information provided. Also, they will be informed that they will have eight sessions of one hour each, spanning over a period of 14 weeks.

Administration of adapted version of Ryff's scale of psychological well-being (AVRPWB) as a pre-test. Scores obtained from the test would enable the researcher know the entry behaviour of the participants with regards to their problem of psychological well-being. The researcher acquaints the participants with the benefits to be derived from the programme if they participate effectively. This includes: having confidence in self and fulfillment in school because of improved psychological well-being, improved problem-solving capacity, being able to interact with peers in acceptable ways that would lead to better relationships.

The researcher emphasise the need for participants to cooperate and participate effectively in all the sessions as this will enable them to follow the programme sequentially and logically. The researcher also emphasises the need for participants to adhere to the instructions given and the need to do their assignments punctually. The researcher inform the participants that assignments provide them a greater opportunity to practice and acquaint themselves with the skills that are being cultivated. The researcher equally emphasises the need for participants to ask questions, for clarification and to contribute meaningfully to the programme.

The researcher acquaints the participants with the procedure the programme will follow, schedule of meetings and venue. The researcher administers the pre-test items and concludes the session.

Session Two

Introducing the concept and Importance of Emotional Intelligence.

Objective: This session is designed to inculcate in the participants the need to be emotional literate and to be aware of EI as it will enable them utilise it in relationship with other people.

The researcher would welcome participants and commend their efforts. The participants will be asked by the researcher to define and explain emotional intelligence. Emotional intelligence is the ability to perceive emotions, generate emotions so as to assist thought positively, to understand emotions and emotional knowledge appropriate and to reflectively regulate emotions in order to promote emotional and intellectual power. It is the capacity to get optimal results from one's relationship with self and others. Emotional intelligence also involves some skills which are self awareness, social awareness, self-management and relationship management skills.

The researcher leads the participants to identify the importance of EI in enhancing psychological well-being such as recognising one's emotions, behaving responsibly, following through with plans, focusing on task at hand and paying attention, taking the perspective as well as listening skillfully to others and having positive feelings about self, school and family and also managing stress.

Participants listen attentively, ask questions as well as make contributions to the discussion. This suggests that the participants are really involved and are following the discussion. This also ensures clarification when and where necessary. The researcher concludes the session with a take home assignment for the participants. The participants were asked to write down five of their feelings.

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Session Three

Self Awareness/Identification of Emotions

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Objective: At the end of this session, participants should be able to identify their areas of interest, those activities/action/behaviours or situations they find themselves which will put them off a relationship or that will create friendliness with others or otherwise. The researcher will explain to the participants what the topic is all about; different personality traits, feelings and emotional management. Participants will be asked to identify some actions/behaviour as well as situations which when they are involved in will bring about satisfaction with self and others.

The researcher will further explain how the recognition of ones self-awareness affects one's feelings, other people and performance at other tasks. The researcher will teach the participants how to label people's feelings. For example,

- I feel scared vs. This is ridiculous
- I feel bad and sick vs. you are an insensitive being
- I feel angry vs. you are ill mannered.

<center>52</center>

The researcher will teach the participants how to distinguish between thoughts and feelings. For example:

Thought:	I feel like	I think like
	I feel as if	I think as if
Feelings:	I feel (feeling words)	I think (thought)

The researcher makes the participants to take more responsibility for their feelings/emotions. For example;

I feel hopeless	I feel sad
Vs	Vs
You make me hopeless	You are making me sad

The researcher concludes the session by briefly summarising the topic, discussing and giving the following homework. **Record five feelings/emotions and label them. Distinguish between thoughts and feelings.**

Session Four
Self-management/Managing Emotions

Objective: This session is to familiarise and expose the participants to different self-management.

Having exchanged greetings, the researcher will ask the participants to submit their assignments and make a brief comment on ways of managing emotions. Through this, their knowledge about self-regulation will be broader and/or enlarged.

The researcher explains that emotions are better handled so that they are appropriate for a particular situation, it is important to realise what is behind a feeling; it will be stressed that participants must find ways to handle fears, anxieties, anger and sadness.

The researcher will explain further that people do have bad moods and emotional impulses but must find ways to control and channel them in useful ways. Participants would be asked to mention certain situations that could lead to either bad feelings/modes.

The researcher will further give instruction on self-management: this includes discussion on self-management as what is needed to realise what is behind feelings. Beliefs have a fundamental effect on the ability to act and on one's disposition to perform his/her tasks. Many people continually give themselves negative orientations.

53

Hope can be a useful asset. Finding solutions to anger, fear, anxiety and sadness is essential. An individual must learn to encourage him/herself when upset. For example, understanding what happens when emotions are high and how to gain time to weigh one's actions/utterances is made in the heat of the moment is really the best thing to do.

The researcher concludes the session with a summary and the following homework. **Illustrate the six clusters of self-management ability with your personal feelings and experience. State some emotions you observe in yourself and in others at different times. Also, how you were able to re-channel such into appropriate or better outcomes.**

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Session Five

Social Awareness/Channelling Emotions

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Objective: During this session, the participants will be adequately informed about different avenues through which they can channel their emotions.

The researcher welcomes the participants and reviews the take-home assignment given to them in the last meeting. The researcher explains that through self motivation, their emotions can be channelled in the service of a goal. Also, through emotional self-control, delaying gratification they can direct their emotions to appropriate area.

The researcher further gives instruction on social awareness. This includes discussion on awareness that involves reading people and groups accurately. This ability incorporates three clusters such as: empathy, service, and organisational awareness.

Empathy: This gives an individual an astute awareness of others' emotions, concerns and needs. The empatic individual can read emotional currents, picking up on non-verbal cues such as tone of voice or facial expression. However, sensitivity to others is critical for improved psychological well-being whenever the focus is on interactions with people.

The researcher concludes the session with a summary and the following homework. **Write down five specific feelings and actions on social awareness, identify three ways of channelling emotions and mention the need for each.**

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Session Six

Relationship Management

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Objective: During this session, the participants will be adequately informed about different strategies of handling co-ordial relationships. Such as having effective

communication in relationships, being friendly and open in relationships, showing leadership by example being democratic and accepting faults or mistake. The researcher stresses the issue of assisting others and requesting for help where necessary.

The researcher welcomes the participants and holds a brief discussion on the homework. She also puts the participants in active position for the session by discussing the assignment given and also motivates them by putting them in a good psychological state. This is done by asking them to breath in and out several times, stretch their body and hold a friend to say hello.

The researcher discusses relationship management as understanding others and resolving conflicts skillfully, negotiating disagreements, communicating skillfully, being popular, outgoing, friendly, being concerned about and considerate of others, helpful and democratic.

Relationship management also incorporates the following areas:

- Influence
- Communication
- Conflict Management
- Visionary Leadership
- Forgiveness
- Tolerance
- Respect
- Considerate

Communication: This competence is effective in the give and take of emotional information, deals with difficult issues appropriately and welcomes sharing information fully, fosters open communication and stays receptive to bad news as well as good ones.

Conflict Management: This involves spotting trouble as it brews and taking steps to calm those involved. Here, the act of listening and emphasising are crucial to the skill of handling difficult people and situation with diplomacy, encouraging debate and open discussion as well as orchestrating win – win situations.

The researcher concludes the session with a summary and the following homework. **How would being a visionary leader assist someone to improve in psychological well-being?**

Session Seven

Handling Relationship Continues

Objective: To assist the participants to develop social competence and social skills that will promote cordial relationship.

The researcher welcomes the participants to the session. The researcher explains that handling relationship involves two or more people. Often, it necessitates the need for managing emotions in other people; it starts with observation, identification, understanding and then managing it in others, this increases the individual's social competence and skills. Participants will be encouraged to ask questions and more explanations will be provided.

The researcher will also emphasised the issue of relationship management by discussing the various areas such as: tolerance, satisfaction, building bonds, collaboration and team work.

The researcher concludes the session with a summary and the following assignment. **Identify at least three ways of establishing cordial relationship with others. Why it is important to identify emotions in others and control emotion in self while handling relationships.**

Session Eight

Brief Revision, Termination of Treatment and Post- test Administration

This is the last session and the purpose of this meeting are as follows. These are to:

(i) Spend time to review and ask questions on all that have been taught for the past seven sessions.

(ii) Allow the participants share their ideas on all that have been taught, learned and gained from one another.

(iii) Emphasise and encourage participants to put into practice acquired knowledge from the programme as well as use it to help their friends.

(iv) Administer the adapted version of Ryff's scale of psychological well-being as the post-test.

(v) And in conclusion, terminate the treatment programme.

3.11   Locus of Control Training Package

Session One: General orientation to the treatment programme and test administration.

Session Two: Meaning of Locus of Control

Session Three: Orientation on internal locus of control.

Session Four: Orientation on external locus of control.

Session Five: Behavioural Expectations: understanding oneself in relation to locus of control.

Session Six: Self determination and awareness

Session Seven: Behavioural Attitude: Self control and management

Session Eight: General revision, administration of post-test and termination of treatment programme.

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Experimental Group II

Locus of Control Treatment Programme

Session One

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General Orientation to the Treatment Programme and Test Administration

Objective: This is a period to introduce every participant and the researcher and also to establish a good interaction with the participants as well as to administer the pre-test.

The participants will be received warmly, rapport shall be established and participants would be informed that they will have eight sessions of one hour each spanning over a period of fourteen weeks. Administration of adapted version of Ryff's scale of psychological well-being as a pre-test. Scores obtained from the test would enable the researcher know the entry characteristics of the participants with regards to psychological well-being.

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Session Two

Meaning of Locus of Control

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Objective: This session is to introduce the concept of locus of control to the participants such that, at the end of the session, they should be able to explain the meaning of locus of control and the sources of control.

Explanation: Locus of control can be seen as one's belief that the source of his/her success or failure is either within or beyond his/her control.

This session will further explain the meaning of locus of control fully, that it describes the degree to which individuals perceive their ability of influencing the outcomes of their behaviours or hold forces external to them as responsible for their actions. This produces a continuum with external control at one end and internal control at the other. Also, the participants will be told that this is a treatment that has a bearing with their long-term success and will help to enhance their psychological well-being. Participants would also be informed that there are two separate sources of control,

internal and external. Some people develop internal locus while others have external locus of control.

Take Home Assignment: Participants would be requested to explain what they understand by locus of control and give three examples of such in an individual.

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Session Three

Orientation on Internal Locus of Control

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Objective: The participants should be able to identify how their behaviour and attitude affect the outcomes of their lives. Also, this session will describe the characteristics of people who have both internal and external locus of control.

The researcher will formally welcome the participants to another session and review the previous session with them by asking them introductory questions, such as the following:

a) What do you understand by locus of control?

b) Mention two aspects of locus of control?

Emphasising internal locus of control, the researcher will explain in detail, that people with internal type of control believe that hard work, personal abilities and their decisions will lead to positive outcomes or results. They view events as resulting from their actions/efforts, thus the way such individuals interpret events has a profound effect on their psychological well-being. Also, people with this locus of control believe strongly that they are responsible for their success, that they have a control of their destiny.

The researcher further explains that there are tips for developing an internal locus of control. These skills include:

✓ The ability to recognise that you always have a choice.

✓ Even not making a choice; is actually a choice.

✓ Also, one has made a choice when he/she allows other people or events to decide for him/her;

✓ Setting goals for oneself and working hard to achieve them.

✓ Develop a decision-making skill; and

✓ Problem-solving skills. These skills can lead to self-talk or reminder that one has a degree of control over one's choice.

✓ Accepting limitations imposed by disability.

✓ Others include: building up self confidence; being consistent in hard work (illustrating with a rhym, good, better, best, may I never rest, until my good is better, and me better, best… see appendix)

Take Home Assignment: Participants would be asked to list the various skills necessary for developing positive concept and internal locus of control.

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Session Four

Orientation on External Locus of Control

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Objective: To teach the participants the meaning and characteristics of external locus of control.

The researcher will review the previous session with the participants by asking them a few questions. In addition, the last assignment will be collected and reviewed.

The researcher would explain that those with external locus of control attribute outcomes of events to external circumstances that is, they view events as being under the control of external factors or forces such as fate, luck and chance. They also believe their actions do not influence future outcomes. The researcher will also stress that those with external locus of control tend to be less willing to take risks, work on self-improvement; they tend to lack persistence and not have high level of expectation.

More explanation on lesson (see Appendix)

Summary of the lesson will be done and assignment will be given.

Take Home Assignment: Participants would be asked to state what external locus of control means. They will be asked to write out the characteristics of people with external locus of control, lastly, they would be requested to write out skills that are required for enhancing external locus of control.

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Session Five

Behavioural Expectations

Understanding oneself in relation to locus of control

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Objective: This session is to familiarise and expose the participants to different skills or activities that will make them happy and satisfied with self and with others.

The researcher identifies the areas and skills they need to explore to be able to assess their performance in order to develop good quality psychological well-being. Such skills as ability to make a choice; ability to control oneself; confidence to take decision; ability to strive towards achieving set goals; being able to interpret their

attained success/achievement, whether through hard work, good teaching strategies or influence of friends or peers, whether their happiness was determined most often by the influence of other people or through personal effort. Summary of the lesson will be done and assignment will be given. More explanations (see Appendix).

Take Home Assignment: Participants will be asked to write out five reasons for being happy or unsatisfied with self

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Session Six

Self-determination and Awareness

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Objective: At the end of the session, participants will be made to realise the need for developing positive self-concept, relationship with others and its impact on psychological well-being.

The researcher welcomes the participants and reviews the take home assignment.

The researcher identifies some actions, behaviours or situations where participants' input and involvement can produce either positive results/outcomes or otherwise. Also, the researcher will ask the participants to identify how such success or achievement will be attained. Where positive outcomes are not achieved, the researcher will ask the participants to also outline why.

After the interactive session on the above, the researcher now gives a take home assignment.

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Session Six (continuation)

Self-determination and Awareness

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Objective: To further expose the participants to various behavioural attitudes that would enhance happiness or satisfaction, the researcher encourages the participants to engage in activities that will improve their situation. That is, activities such as:

- ✓ interacting with classmates with open minds,
- ✓ trying to pay attention to other people's feelings especially those around them.
- ✓ Also, trying to take note of information they can use to create pleasant situations both at present and in future. Having respect and feelings for other people's views and decisions.

The researcher will ask the participants to mention behaviours or attitudes that can lead to contentment or satisfaction which often makes them happy. Also, those they could take adequate control of, those that they achieve by stroke of luck, fate or by chance.

The correct answers will be provided by the researcher to the participants. Some of the behaviours would be mentioned as follows: persistence, openness, inquisitiveness, being participative, management style, positive concept of self, hard work, accepting failure and striving to make headway or achievement at other times.

The researcher will encourage the participants to ask questions, while such questions are addressed adequately, the researcher reinforces accordingly.

Take Home Assignment: Mention some behaviours both from you or other people that make you unhappy and could lead to isolation.

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Session Seven

Self-control and management

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Objective: At the end of this session, participants should be able to identify and utilise the skills or behaviours that would make them happy with themselves and with others. Also, they will be able to have control of their feelings, events, situations or actions that could negatively influence their psychological well-being. In addition, they will be able to have an understanding of their locus of control (i.e. ability to interpret what/how the results of their outcomes are achieved)

The researcher welcomes the participants to the session and collected the assignment given in the previous session. The researcher informs the participants of the need to engage in self-assessment, self-control, building of confidence. Also, the benefit of such actions will help to reduce behaviours that could lead to anxiety, feelings of inadequacy, lack of self-control, lack of commitment, carefree life styles, dependence on other significant other for success etc.

Participants would be asked to state activities they could engage in when they realise they are becoming anxious. In addition, participants will be requested to state behaviours that could lead to establishing friendly or cordial relationship with others. Also, they would be asked to identify their achievements or successes, linking it with contributory forces. All participants who made attempt to answer the questions will be duly reinforced. While some of the answers will be provided by the researchers to include:

- ✓ Willingly accepting one's efforts/limitations;
- ✓ Being open to friends and close associates;
- ✓ Ability to get along with others without chaos;

✓ Accepting success and failure as a reward of hard work or as a result of other contributory factors.

The researcher will spend sometime to review the contents of the lesson and entertain questions from the participants.

Skills of locus of control that has been treated: Self-assessment/determination, self-control/self-management, behavioural attitude, behavioural choice and building confidence.

Session Eight

General Revision, Administration of Post-test and Termination of Treatment Programme

This is the last session, the purposes of this meeting are as follows. To:

i. Spend sometime to review the previous sessions and to ask questions on the different sessions;

ii. Encourage interaction among the participants and also ask them to share with one another what they have gained or derived from the programme;

iii. Advise participants to put into practice all knowledge acquired in the programme as well as use it to assist their friends and relatives;

iv. Administer the adapted version of Ryff's Scale psychological well-being as the post-test; and

v. Terminate the treatment programme.

3.12   Classroom Procedure for the Lesson

1. Topic and Content

This is where the subject for discussion and what is contained will be stated.

2. Performance Objective

Here, the aims of the lesson will be stated.

3. Teaching Aids and Materials

Brailled materials, typewriters and the students slate and stylus will be used.

4. Presentation: This skills taught will be described step-by-step clearly and logically.

5. Evaluation: Pupils will be asked questions at the end of each lesson as a means of assessing their levels of understanding.

6. Reinforcement: Praises and applauds will be used as motivation strategies.

7. Conclusion: This contains a review of the main points in each lesson, for both programmes; emotional intelligence training and locus of control treatment, 28 lessons will be taught apart from pre-test and post-test session.

3.12.2   Procedure for group III.   The control method. The students in the experimental group received instruction on psychological well-being through conventional method. The third group will not be exposed to any treatment but they will take part in the pre-test and post-test.

3.12.3   Post – test

At the end of the eight weeks, the post – test was administered. This session focused on the administration of the adapted version of Ryff scale of psychological well-being scale.

3.13   Method of Data Analysis

The data collected from the administration of the instruments were analysed using the following techniques. Descriptive statistics which involves the computation of the unadjusted and adjusted mean scores and standard deviations based on the various variables in the study. The Analysis of Co-Variance (ANCOVA) was used to test the seven null hypotheses formulated for the study at 0.05 level of significance. The multiple classification analysis (MCA) was used to determine the magnitude of performance of the various groups. Further, the Duncan post hoc test was used to trace the source(s) of significant main effect where required.

RESULTS AND DISCUSSION

This chapter presents the results of data analysis in the order of the null hypothesis generated for the study.

4.1   Presentation of Results

Hypothesis One - There is no significant main effect of treatment (emotional intelligence, locus of control and control group) on the psychological well - being of adolescents with visual impairment. The result is presented in Table 5.

Table 5: Post - test Adolescents Psychological Well-being by Treatment, Visual Impairment and Gender.

Source of Variation	Sum of squares	Df	Mean square	F	P	Remarks
Covariate	671.402	1	671.402	4.102	0.045	Sig
Treatment	6880.748	2	3440.374	21.020	0.000	Sig
Type of Impairment	18.313	1	18.313	0.112	0.739	NS
Gender	306.785	1	306.785	1.874	0.174	NS
Treatment * Type of Impairment	145.121	2	72.560	0.443	0.643	NS
Treatment * Gender	305.646	2	152.823	0.934	0.396	NS
Gender * Type of Impairment	160.330	1	160.330	0.980	0.325	NS
Treatment * Type of Impair. * Gender	59.976	2	29.988	0.813	0.833	NS
Explained	8642.836	12	720.236			
Residual	17513.031	107	163.673			
Total	26155.867	119	219,797			

Table 5 shows a significant effect of treatment on adolescents with visual impairment. ($F_{2/107}$ = 21.020; P< 0.05) this means there is significant difference in the main psychological well-being of adolescents with visual impairment score of

participants in the experimental groups I and II and the control group. Hence, hypothesis one is rejected.

Table 5 presents the result on the degree of significance between the treatment groups, emotional intelligence and locus of control. Also, shown is the moderating effects of gender and level (type) of visual special needs.

Table 6: Multiple classification analysis of post -test psychological well - being by treatment, gender and level of visual impairment

GRAND MEAN = 71.53					
Variable + Category	**N**	**Unadjusted**		**Adjusted for independent + covariate**	
		Dev'n	ETA	Dev'n	BETA
Emotional Intelligence Experimental Group 1	40	7.94		8.48	
Locus of Control Experimental Group 11	40	2.34		3.54	
Control	40	-10.94		-10.06	
			0.52		0.51
Male	92	0.42		0.93	
Female	28	-1.39		-3.04	
			0.05		0,11
Total Blind	91	-1.08		0.24	
Partially sighted	29	3.40		0.76	
			0.13		0.03
Multiple R^2					0.301
Multiple R					0.549

Experimental Group I = Emotional Intelligence. Experimental Group II = Locus of Control

Table 6 reveals that the experimental group 1 records the highest adjusted post -test mean score in psychological well-being ($\bar{x}$ = 80.01). This is followed by the experimental group II ($\bar{x}$ = 75.07) while the lowest score is recorded by the control

group ($\bar{x}$ = 61.47). To this end, the Emotional Intelligence training group was more effective in enhancing psychological well-being of adolescents with visual impairment when compare to the locus of control and control groups.

To further test the source of the significant effect of treatment on adolescents with visual impairment psychological well-being, the Duncan post hoc test was carried out. The summary of the results is presented in Table 7.

TABLE 7: Duncan post - hoc test on adolescents' with visual impairment psychological well being

Treatment Group	N	$\bar{x}$	Group 1 Group II
Emotional Intelligence	40	80.01	
Locus of Control	40	74.07	
Control	40	61.47	

* Pairs of groups with mean significantly different at P<0.05

From table 7, all the three possible pairs are significantly different at P < 0.05. Specifically, there is a significant difference between pairs of:

1. Emotional intelligence and locus of control
2. Emotional intelligence and control group
3. Locus of control and control group

Therefore, all the 3 pairs contributed to the significant effect - observed for treatment on adolescents with visual impairment psychological well being.

Hypothesis Two: There is no significant main effect of type of visual impairment on the psychological well-being of adolescents with visual impairment.

Table 5 shows the type of visual impairment on the psychological well being of adolescents with visual impairment (F = 0.112, P>0.05). This means there is no significant difference in the psychological well-being of participants with totally and partially blindness. Hypothesis two is therefore not rejected.

Table 5 also shows that on psychological well-being, participants with partial blindness record higher mean score ($\bar{x}$ = 74.93) than their counterparts with totally blindness ($\bar{x}$ = 70.45), but the difference is not significant.

Hypothesis Three: There is no significant main effect of gender on the psychological well-being of adolescents' with visual impairment.

Table 5 shows that gender level has no significant effect on their psychological well-being ($F_{(1,107)} = 1.874$, $P>0.05$). This means there is no significant main effect of gender on the psychological well-being of adolescents with visual impairment. Hypothesis three is therefore accepted. Table 6 also shown that on psychological well-being, male participants record higher mean score ($\bar{x} = 71.95$) when compared to their female counterparts ($\bar{x} = 70.14$), But the difference is not significant.

Hypothesis four - There is no significant interaction effect of treatment and type of visual impairment on the psychological well being of adolescents with visual impairment.

Table 5 shows that the two - way interaction effect of treatment and level of visual impairment is not significant ($F_{2,107} = 0.443$, $P>0.05$). On basis of this, hypothesis four is not rejected. Therefore, the researcher concludes that there is no significant interaction effect of treatment and type of visual impairment on the psychological well-being of adolescents with visual impairment.

Hypothesis Five - There is no significant interaction effect of treatment and gender on the psychological well-being of adolescents with visual impairment.

Table 5 shows that the two - way interaction effect of treatment and gender is not significant ($F_{2,107} = 0.934$, $P > 0.05$). On this basis, hypothesis four is accepted. Therefore, the researcher concludes that there is no significant interaction effect of treatment and gender on the psychological well - being of adolescents with visual impairment.

Hypothesis Six - There is no significant interaction effect of type of visual impairment and gender on the psychological well - being of adolescents with visual impairment.

Table 5 shows that the two - way interaction effect of type of visual impairment and gender is not significant ($F_{1,107}$ 980, $P > 0.05$). Hence, the null hypothesis six is accepted and the researcher concludes there is no significant interaction effect of type of visual impairment and gender on the psychological well - being of adolescents with visual impairment.

Hypothesis Seven - There is no significant interaction effect of treatment, type of visual impairment and gender on the psychological well being of adolescents with visual impairment.

Table 5 shows there is no significant three - way interaction effect of treatment, type of visual impairment and gender on psychological well being ($F_{2,107} = 0.183$, P>0.05). Hypothesis seven is therefore not rejected. Hence, the researcher concludes there is no significant interaction effect of treatment, type of visual impairment and gender on the psychological well being of adolescents with visual impairment.

4.2   Summary of Findings

1.   Treatment had significant effect on the psychological well - being of participants, with emotional Intelligence being more potten than the Locus of control and control. To this end, emotional intelligence has been found to be more effective at improving the psychological well-being of adolescents with visual impairment.

2.   Type   of visual   impairment   had   no significant   effect   on   the psychological well-being of participants. Though partial sighted participants obtained a higher mean score than totally blind participants in psychological well-being, the differences are not significant.

3.   There is no significant effect of gender on the psychological wellbeing   of participants.   Though   male   participants   had   higher psychological well-being than female, the difference is however not significant.

4.   The interaction effect of treatment and type of visual impairment on psychological well-being of visual impairment of adolescents are not significant.

5.   The interaction effect of treatment and gender on psychological well-being by visually impaired adolescents are not significant.

6.   The interaction effect of gender and type of visual impairment on psychological well-being of visually impaired adolescents are not significant.

7.   The 3 - way interaction effect of treatment, gender and type of visual impairment on psychological well - being of adolescents with visual impairment is not significant.

CHAPTER FIVE

SUMMARY OF FINDINGS, IMPLICATIONS AND RECOMMENDATION

In this chapter, the discussion of findings based on each hypothesis, educational implications and recommendations are presented. Suggestions for further research and conclusion are also highlighted.

5.1   Discussion of Findings

Hypothesis One - The result of hypothesis one reveals a significant effect in the psychological well - being of adolescents with visual impairment in the experimental and control groups. The findings indicated that both treatment groups were effective and had impact on the participants but not on the control because they were not exposed to treatment. It reveals that those exposed to emotional intelligence benefited more than those exposed to locus of control. This finding supports the results of Cooper and Sawaf (1997) that those exposed to emotional intelligence training have greater success, foster greater personnel relationship, have effective leadership skills and are healthier than those exposed to locus of control. The finding also corroborates of Mathew, Leidner and Roberts (2002) which affirm the reduction in the anxiety of 50 telephone interviews who had stressor strained relationship. With the skills in emotional intelligence, they reported strengthened relationship. Also, on locus of control which reveals significant difference with respect to the control group, the study corroborates the finding of Pareek (1997) that children with internal locus of control appears to have high level of self-esteem. Also that locus of control relates positively to mental health such as less anxiety, less loneliness, less alcohol and drug abuse but not as effective as emotional intelligence. It confirms that the null hypothesis was rejected

Hypothesis Two - Type of visual impairment had no significant effect on the psychological well - being of participants, from the results there is no significant effect of type of visual impairment on adolescents' psychological well – being, hence, the null hypothesis is not rejected. This result contradicts the findings of Kef and Dakovi (2004) who worked on parents and peer support in adolescents with and without visual impairment. They observe that participants with visual impairment who are supported by peer and parents had better psychological well-being than those not supported by parents. Also, this finding is line with Adeyemo and Adeleye (2008) who reveal that psychological well - being among secondary school adolescents can only be boosted by

the combination of emotional intelligence, religiousity and self-efficacy. One of the contributing factor to this may result in the on-set of visual impairment. Majority of the adolescents had total blindness from birth. They had long adjusted to the disability. Learning to live with it, only aspiring to acquire new skills that will enhance good quality psychological well-being. In addition, self management of emotions could also have enabled the adolescents to be aware of their emotions and be able to cope with strong feelings and challenges.

Hypothesis Three: There is no significant main effect of gender on the psychological well-being of adolescents with visual impairment. The hypothesis affirmed, suggestions that there is no significant difference. This finding contradicts the finding of Bracket, Mayer and Werner (2004), Kafetsions (2004); Perry, Ball and Stancy (2004); Van Rooy, Alonso and Viswesvaran posit that intelligence is gender related with women scoring higher in measures of emotional intelligence. This finding also reveals that there is no significant difference. The findings of Leainsolin and Beivinsoln, Gotlib, Seeky and Allen (1998) whose assertion was that anxiety status are more frequently met in women than men. This study also reveals there is no significant difference between anxiety and gender. The reason for this may be attributed to the groups expose to the self awareness skills and the emphasis of self determination. Participants were charged to belief in their potentials not letting gender or special needs stand as a barrier to their quality of life.

Hypothesis Four - There is no significant interaction effect of treatment and type of visual impairment on the psychological well-being of adolescent with visual impairment. The ANCOVA on psychological well-being contained in table 5 shows that there is no significant interaction effect of treatment and type of visual impairment on participants' psychological well-being. The probable explanation for this relationship is that type of visual impairment may have been congenital (from birth). This could be attributed to the fact that most adolescents with such visual impairment had adjusted to their condition through the years; from childhood to adolescent. Also, this is in line with Ozoji's (2003) report on a high level of improvement in functional abilities, self-esteem and psychological well-being from a pre and post rehabilitation training of totally blind learners. However, this is contrary to Ajobiewe's (2004) and Ayoku's (2006) report that there was increased confidence, environmental mastery and

high level of interaction among adolescents with total blindness and others after training in orientation and mobility skills.

Hypothesis Five - There is no significant interaction effect of treatment and gender on the psychological well-being of adolescents with visual impairment. The result of this hypothesis shows no significant interaction effect in participants' post - test mean score as a result of the interaction of treatment and gender. By implication, it means the post-test scores of male and female participants does not significantly differ when treatment and gender is considered. Whenever treatment package administered, what is essential may not be the gender but the readiness and attitudes of the participants to cooperate under the training provided. As observed by Haley (2004) gender does not matter in achievement in mathematics, what may really account as explained are intelligence of the participants, emotional stability, attitude, attendance at the training sessions, religiousity and self-efficacy.

Elegbeleye (1991) also finds no significant interaction effect of treatment and gender on students' achievement in reading comprehension and students' attitude to reading. This runs contrary to the findings of Onosode (2004) who observes an interaction effect of gender and treatment in his study; the likely reason may be the non - influential effect of gender when it comes to psychological well-being; which is purely a cognitive matter. What may be essential as mentioned in subsequent hypotheses on gender is the readiness of the adolescents to cooperate under a treatment programme, their emotional state, attitude and intelligence level.

Hypothesis Six: There is no significant interaction effect of type of visual impairment and gender on the psychological well-being of adolescents with visual impairment.

The result of the analysed data shows that there was indeed no significant interaction effect of gender and type of visual impairment on participants' psychological well-being. It shows therefore that when combined (type of visual impairment and gender) they will have insignificant effect on psychological well-being of the participants. The findings of researchers who found no relevance of gender to achievement can be aroused here. So also is the fact that aroused is crucial to be motivated to perform. It means therefore that it is still complementing the previous findings that gender cannot determine achievements. In addition, level of visual impairment is not a determining factor that can really affect psychological well-being.

The possible reason for the result of hypothesis six of the present study could be that the body is capable of regulating the stress level to suit situations in order not to be too low or too high (Poshen, 2007) Arantzazu (2009). Also, according to Crow (1964) majority of adolescents have ineffective psychological well-being by chance. This may be as a result of other environmental factors and societal confusion in teaching the real values of life as observed by Obilade (1987). In addition, many of the visually impaired adolescents though set targets but not in the conventional and acceptable pattern. In essence, the result indicates a clumsy trout of what is being treated in this study in all individuals tested.

Hypothesis Seven - There is no significant interaction effect of treatment, type of visual impairment and gender on adolescents' psychological well-being of adolescents with visual impairment. The results show no significant three - way interaction effect of treatment, level of visual impairment and gender on adolescents' psychological well-being. It is therefore inferred that, the results having being analysed singly and giving their interaction effect may no longer be of great effect when combined. This shows that the three when put together may not really affect adolescents' psychological well-being considerably. This is because separate effect is better measured and necessary treatment applied for efficiency of their combined effects. This relates to Adeoye's (2008) study on academic achievement. The study indicated that trends in the main effect is more affective and valid for a group of participants.

5.2   Educational Implications

The study established that emotional intelligence and locus of control training are found to be effective in enhancing the psychological well-being of adolescents with visual impairment. Also, the two packages can assist to equip adolescents with visual impairment to improve on their psychological well-being based on the utilisation of self awareness and management skills. The weakness of the control group method on improvement of psychological well-being of adolescents with visual loss has also been discovered. As a result special educators in care of adolescents with visual impairment have realised that they could look beyond conventional programmes when handling adolescents and work towards leading them to achieve quality psychological well-being that would enable them function effectively in the society.

The implication of this study for special educators in Nigerian schools is that adolescents with visual impairment like their counterparts in developed countries can improve greatly on their psychological well-being through exposure to emotional intelligence and locus of control training.

The result of this study shows that adolescents with visual impairment must be taught emotional intelligence skills which will make them useful to themselves and the entire society during their school years and thereafter. Like it is done in some developed countries, emotional intelligence should be taught as a subject in secondary schools. The findings of this study equally reveal that when students are exposed to locus of control training, it helps in the utilisation of skills acquired thereby improving their psychological well-being. This study also has given an insight into the need and or benefit of reaching out to other related disciplines to special education (counseling psychology) while managing adolescents with visual impairment.

Further, the study reveals the need for continuous update of emotional intelligence skills and locus of control of adolescents with visual impairment through conferences, seminars and workshops.

5.3   Limitation of the Study

The study is limited because the dependent variable was based only on psychological well-being. Other areas such as activities of daily living, job skills or employment are not to be covered. This study is also limited by the number of schools and participants used due to the nature of the participants.

5.4   Suggestions for further Research

The study notes that treatment had significant effect on the psychological well-being of adolescents with visual impairment. It is therefore suggested that a replication be carried out in other locations and other levels of educational settings. Future replication may adopt survey method to accommodate more participants.

5.5   Conclusion

This study established effectiveness of the two intervention programmes in enhancing the psychological well-being of adolescents with visual impairments. The findings of the study revealed that adolescents exposed to emotional intelligence and locus of control training performed better than those in the control group. The use of such intervention programme has proven to boost and enhance the psychological well-

being of adolescents. It is pertinent to state that intervention programmes could be used in the school setting both for students with and without disability.

5.6   Recommendations

Following the findings of this study, the researcher recommends as follows:

It is important that emotional intelligence and locus of control training be incorporated in the curriculum for students with or without special needs. The use of emotional intelligence and locus of control training should not be limited to enhancement of psychological well-being but should permeate all areas of deficit in self-care, social skills, listening skills, travel skills and academic subjects. It is only when adolescents acquire adequate skills that they can function effectively and be able to face challenges imposed on them either by the special needs or some other defects. In addition, it is recommended that adolescents with total blindness should be exposed to more therapeutic treatment in order to attain a possible psychological well-being.

Further, in-service training, conferences, workshops, symposia and seminars should be organised regularly for both students and special educators. This would afford them the opportunities of training in emotional intelligence and locus of control skills. It would expose and equip them with the knowledge and skills in handling adolescents with visual impairment and the discharge of their related duties.

Finally, it is recommended that adolescents with visual impairment be encouraged to join students' club and associations, this will promote healthy interaction and modeling or imitation of positive behaviours. This would help to enhance their psychological well-being.

References

Abang, T. B. 2005. *The Exceptional child; Handbook of special Education.* Fab Anileh Nig. Ltd. Jos

Abang, T.B. 1992. *Handbook of special education for educators in developing countries*. Jos: Andex Press.

Abe, V. C. 1995. *A casual model of some socio – psychological variables as determinants of achievement in Sec. Sch. Social studies*. Unpublished Ph.D, thesis, University of Ibadan.

Abosi, C.O. and Ozoji, E.D. 1985. *Educating the Blind. A descriptive approach.* Ibadan: Spectrum Books Limited.

Abraham, R. 1999. *Emotional intelligence in organizations:* a conceptualization. Generic, Social & General psychology monographs, 125(2), 209 – 224

Abrami, P.C. and Barrett, H. 2005. *Directions for research and development on electronic portfolios*. Canadian Journal of Learning & Technology. Vol. 31(3) Automac.

Adebiyi, B.A. 2004. *Rational Emotive Behavioural and Reality Therapies in Enhancing Socialization among Visually Impaired Students of Federal College of Education (special) Oyo.* Unpublished Ph.D. Thesis. University of Ibadan, Ibadan.

Adebowale, T.A. 2006. *Effects of resiliency and self-control strategies in the management of adolescents risk taking (smoking) behaviour in Oyo state, Nigeria. A proposal submitted to the department of G & C for the fulfillment of the requirement of Doctor of philosophy (Ph. D), University of Ibadan.*

Adediran, D.A. 2000. *Psychology of Handicaps.* Ibadan: Herdey Communications.

Adejumobi, A.A. 2007. Assessment of Emotional Intelligence of some selected hearing impaired students of Federal College of Education (Special) Oyo. *Paper presented at the School of Special Education, Federal College of Education (Special), Oyo, August.*

Adeoye, M.A. 2008. Emotional Intelligence and Self-Efficacy as Determinants of Academic Achievement in English Language Among Students in Oyo State Senior Secondary Schools. *An unpublished Ph.D thesis submitted to the Institute of Education, University of Ibadan*, Ibadan, Nigeria.

Adewuyi, T. O. 2005. Effects of Rational Emotive and Reality/ Therapies on the Attitude of Federal Civil Servants in Lagos State Towards Retirement. *Unpublished Doctoral Degree, University of Ilorin.*

Adeyemo, D.A. and Adeleye, A.T. 2008. Emotional Intelligence, Religiosity and Self-Efficacy As Predictors of Psychological well-being among secondary school adolescents in Ogbomoso, Nigeria. Europe's Journal of Psychology.

Adeyemo, D.A. and Ogunyemi, B. 2006. *Emotional Intelligence and Self-efficacy as Predictors of Occupational Stress Among Academic Staff in a Nigerian University*. In *http://www.unh.edu/emotionalintelligence/ei%20contovercies.* Retrieved 7/10/2007.

Adeyemo, D.A. 2004. Patterns of Emotional Intelligence among counseling psychology students in a Nigerian Univesity. *Sokoto Journal Review. 7, 194 – 203.*

Adeyemo, D.A. 2008. Measured Influence of Emotional Intelligence and Some Demographic Characteristics on Academic Self-Efficacy of Distance Learners. *Perspectives in Education* 24, 2, 104 – 112

Adeyemo, D.A. 2010. Educational Transition and Emotional Intelligence. In D. Jindal –Snape (ed.). *Education transition moving stories around the world.* Routledge: Taylor and Francis (pp. 33 – 47).

Ajobiewe, T.A. 2004. *Management of disability in the community*. Ibadan. Teton Education Service.

Akinboye, J.O. 1992. Behaviour therapy and other treatments strategies. Ibadan: Paperback Publishing Limited.

Akinboye, J.O. 2002. *Creativity innovation and success*. Ibadan: Stirling Horden Publisher.

Akinboye, J.O. 2006. *EQ Tests. Ibadan. Emotional Intelligence Service Series.*

Alan, C. 2006. *Based on Daniel Goleman's EQ concept. Retrieved from* www.businessballs.com

Aldwin, C.M. and Gilman, D.F. 2004. *Health, illness and optimal ageing*. London; Sage.

Allen, B.A. and Anmour-Thomas, E. 1993. Construct of metacognition. Journal of Psychology 127(2), 203 – 207.

Allen, T.D. 2000. Learning and development factors related to perception of job content and hierarchical plateaving. *Journal of Organizational Behaviour*, 20 (7), 1113-1137.

Andrisani, P. I. and Nestel, C. 1976. *Internal Contribution to and outcome of work. Applied Psychology.* 61-156-165

Arantzazu, R. F. 2009 *Boys have Greater psychological well-being than Girls. Due to a better physical self-concept.* An Unpublished Ph.D Thesis. University of Basque Country.

Aremu, O. 2008. *Effectiveness of two counseling strategies in changing police attitude to corruption in Nigeria*. Faculty of Education Seminar, University of Ibadan Press.

Ashforth, B.E. and Humphrey, R.H. 1995. Emotional labour in service roles; The influence of identity. Academy of management review. 18, 18-115

Aspinwall, L.G. 1998. Rethinking the role of positive effect in self regulation. *Motivation & Emotion, 22, 1 – 32.*

Ayena, O.O 2007 Socio – cultural beliefs, attitudes towards and perceived solutions to female genital mutilation among professionals in Nigeria. Unpublished doctoral dissertation. University of Ilorin, Ilorin Kwara state Nigeria

Ayoade, C.A. 2006. *Relationship among free time use, peer pressure, social self-image and risk behaviours of adolescents in Nigeria.* Being a Ph. D Thesis in the Department of Guidance and Counselling, University of Ilorin.

Ayoku, F.A. 2006. The Visually Impaired in the Regular classroom in T.C. Obani (ed) *Teaching Pupils with Special Educational Needs.* Ibadan: Book Builders

Bandura, A. & Wood, R. 1989. *Impact of conception of Ability on Self – Regulatory mechanisms and complex Decion making.* Journal of Personality and social psychology 56(3), 407 -415.

Bandura, A. 1977. Self-Efficacy: Toward a unifying theory of behavioural change. *Psychological Review 84, 191 – 215.*

Bandura, A. 1997. *Self-efficiency: The exercise of control*. New York. Freeman.

Bandura, A. 1997. *Social Learning Theory. New York.* General Learning Press.

Bandura, A. 2000. Exercise of human agency through collective efficacy. *American Psychological Society 9(3) 75 – 78.*

Bar-On, R. 1988. *The development of an operational concept of psychological well-being. Unpublished doctoral dissertation,* Rhodes University South Africa.

Bar-On, R. 1997. *The Bar-On Emotional Quotient Invetory (EQ-I).* A test of emotional intelligence. Toronto, Canada Multi-Health System.

Bar-on, R. 1997b. *The Emotional Quotient Inventory (EQ-I).* Technical manual. Toronto Multi-Health Systems.

Bar-On, R. 2000. Emotional and Social Intelligence. Insights from the emotional Quotient Inventory (EQ-I). In R. Bar-On & J.D.A. Parker (Eds). *Handbook of Emotional Intelligence (pp. 363 – 388).* San Franciso: Jossey-Bass.

Bar-On, R. 2003. How important is it to educate people to be emotionally and socially intelligent and can it be done? *Perspective in Education*, 21 (4), 3-17

Bar-On, R. 2004. The Bar-On emotional Quotient Inventory (EQ – 1): Rationale, description and summary of Psychometric properties. In G. Geber (Ed). Measuring emotional intelligence: Common ground and Controversy (pp. 115 – 145). New York: Nova Science

Bar-On, R. 2006. *Emotional and social intelligence*. Insight from the Emotional Quotient Inventory (EQ-i).

Bar-On, R., and Parker, J.D.A. (Eds.). 2000. *The handbook of   Emotional Intelligence:* Theory, development, assessment, and application at home, school and in the workplace. San Francisco: Jossey-Bass.

Barrier, M., and Bates, S. 1999. Your emotional skills can make or break you. *Nation's Business, 87(4), 17.*

Beck, A.T. and Ellis, A. 2000. *New concepts in practice*: On therapy www.fenichel.com/beck-ellis.html

Behunck, L. 2006. *Self-regulation*: A brief review: Athletic insight. "The On-line Journal of Sport Psychology. Retrieved 7/5/2006.

Ben-Artzi, E. and Mikulinear, 1996. Lay theories of emotion IV. Reactions to negative and positive emotional episodes. *Imagination, Cognition and Personality* 16, 89 – 113

Berk, L.E. 1998. *Development through the life span*. London, Alyn and Bos, Bacon. K. and Mechling, H. 1989. Influence of structural task information and self-regulation on the acquisition of a complex skill in relation to practice conditions and age. Scandinavian. *Journal of Sports Sciences*, 4(2), 57 – 61.

Bhaskaran, K. 1991 Meditation from Mental Health Prospective Indian Journal of Psychiatry, 33, 87 – 94

Bode, E.A. 1995. A descriptive study of locus of control in selected medical office assisting students & its relationship to certain characteristics & academic success as measured by grade achievement. *Dissertation Abstract International, 56 (6) 2169 - A*

Bookwala, J. and Boyar, J. 2008. Psychological Well-Being, Gender, and Weight linked. *Lafayette Psychology Vol. II*

Boyatzis, R. 1982. *The component manger*. A model of effective performance. New York. Wiley.

Boyatzis, R.E and Sala, F. 2004. the Emotional competence Inventory (ECI). In G.Gober (Ed). *Measuring emotional intelligence: common ground and controversy (pp. 147 – 180).* New York: Nova Science.

Boyatzis, R.E., Cowan, S.S., and Kolb, D.A. 1995. *Innovations in professional education*: Steps on a journey to learning. San Francisco. Jossey-Bass.

Bracket, M, Mayer, J.D. and Warner, R.M. 2004. Emotional Intelligence and the Prediction of Behaviour. *Journal of Personality and Individual differences. 36, 1387 – 1402*

Bracket, M.A. Mayer, J.D. and Warner, R.M. 2004. *Emotional intelligence and the prediction of behaviour. Personality and individual differences, 36, 1387 – 1402.*

Bradberry, T., Greaves, J. 2003. *Emotional Intelligence.* Appraisal Technical Manual, Talentsmart Inc. san Diego, CA.

Branch, L.G., Horowitz, A. and Carr, C. 1989. The Implications for everyday life of incident self-reported visual decline among people over age 65 living in the community. *The Gerontologist*, 29, 359-365.

Briner, R. 1999. *Feelings and smiling.* In the psychologist (pg. 16 –*19).*

Campbell, A. Converse, S.E. and Rodgers N.L 1976 The quality of   American Life. New York: Russel Sage Foundation

Campbell, J. 1995. *Raising your child to be gifted.* Cambridge, Ma: Brookline Books.

Cannon – Bard Theory. Retrieved on 11/2/2007 from http://en.wikipedia.Org./wiki/james-langetheory.

Carrington, P., and Ephron, H.S 1975 Meditation as an adjunct to psychotherapy in S. Ariety & G. Chrazanowsky (Eds) New   dimensions in psychiatry (pp. 261 – 292). New York wiley.

Caruso, D. 2004. The Emotional Intelligence debate: Emotioanlly challenged. *People Management 7 (8) 40.*

Chan, D.W. 2005. Emotional Intelligence, Social Coping and Psychological distress among Chinese gifted students in Hong Kong. High ability studies, 16. 1:163 – 178.

Cherniss, C. 2001. *Emotional intelligence and effectiveness.* In C. Cherniss &D. Goleman (Eds.). The Emotionally Intelligent Workplace (pg. 3 – 26). San Francisco: Jossey –Bass.

Cherry, K.E., Keller, M.J. and Dudley, W.W. 1991. A needs assessment of persons with visual impairments: Implication for older adults and service providers. *Journal of Gerontological Social Work.* 17, 99-123.

Cheshire, C.A. 2004. *Spirituality and religious scales: the relationship to locus of control.* Being a Ph.D Dissertation submitted to Tennessee State University, United States.

Chiu, C.Y., Dweck, C.S., Tong, J.Y.Y., and Fu., J.H.Y. 1997. Implicit theories and conception of morality. Journal of Personality and Social Psychology. 73, 19 – 30.

Ciarrochi, J.V., Chan, A.Y.C. and Caputi, P. 2001. A critical evaluation of the emotional intelligent construct. Personality and Individual Differences, 28. 539 – 561

Cognitive Appraisal Theory of Emotion, 1998. Retrieved on 11/2/2007 from http://www.personalityreserach.org. basicemotions/htm

Coleman, J.C. and Hendry, L. 1990. *The nature of Adolescence* (2nd Edition)London: Routledge.

Compass, B.E., Hinde. B.R, and Gerhard, C.A, 1995. Adolescent   development: Pathways and Processes of risk and resilence.   Annual   Review   of psychology 46,

Cooper, R.K. and Sawaf, A. 1997. *Executive Emotional Sources* SSDFMSFP

Cover, G.E. and Murphy, S.T., 2000. The communicated self human communication research. 26(11), 125 – 148.

Crews, J.E. 1991. Measuring rehabilitation outcomes and the public policies on aging blindness. Journal of Gerontological Social Work 17, 137-151.

Dada, C.O. 2004. Explicit teaching and peer tutoring as strategies in enhancing self-help skills among trainable mentally retarded children in Ibadan, Nigeria. *An unpublished Ph.D. thesis*.

Davidson, K.J., and Kabat-Zinn, J. 2003. *Alterations in brain and immune Function produced by mindfulness meditation.* Psychosomatic Medicine, 65, 564 – 570.

Davidson, R. 2003. Emotion, Plasticity, context and regulation. Perspectives from affective neuroscience. *Psychological Bulletin 126(6) 890 – 909.*

Davis, C.L, Lovie-kitchin, J., and Thompson, B. 1995. *Psychological adjustment to age-related macular degeneration.* Journal of Visual Impairment & Blindness, 89, 16-27

Delisa, J.A. and Gans B.M. 1993. *Rehabilitation medicine. Principle and Practice*. Philadelphia; Lippincott Company.

Diener E. Sandvik E., and Pavot, W. 1989. Happiness in the frequency, not intensity of positive versus negative affect. In F. Shrack, M. Argyle, & N. Schwarz (Eds). The social psychology of subject well-being.

Diener, E., and Diener M. 1995. Cross Cultural care lates of life satisfaction & self esteem. Journal of personality & social psychology. 68, 653 – 663.

Dodds, A. 1993. *Rehabilitating blind and visually impaired people: A psychological approach*. London: Chapman and Hall.

Doherty, W.J. 1993. Impact of divorce on locus of control orientation in adult women: A longitudinal study. Journal of Personality and Social Psychology, 44, 834-840.

Donahue, E.M., Robin, R.W., Rorts, B.W. and John, O.P. 1993. *The Decided self*: concurrent and relation between extravers pleasant effect. J. Personal Soc. 1, 1039-56.

Dweck, C.S. 1986. Motivational processes affecting learning. American Psychologist. 41, 1040 – 1048.

Dweck, C.S. 1996. *Self theories: Their roles in motivation, personality development*. New York. Psychology Press.

Dweck, C.S. 1999. *Self theories: Their role in motivation, personality and development*. Philadelphia, Taylor & Francis.

Easterlin, R.A. 2003. *Building a better theory of well-being*. Being a paper presented at the conference of "Paradoxes of Happiness in Economics, University of Milano-Bicocca, March 21-23

Ediger, M. 1997. *Affective objectives in the science curriculum*. (Clearing house No.SE060514). Montgomery, AL.: Auburn University and Montgomery School of Education (Eric Document Reproduction Service No. ED412070).

Elegbeleye, O.S. 1991. Fostering Social competence in adolescents through cognitive self modeling and participant modeling strategies. Unpublished Ph.D thesis, University of Ibadan.

Elliot, J.L. and Kuyk, T.K. 1994. Self-reported functional and psycho-social outcomes of blind rehabilitation. *Journal of Visual Impairment & Blindness, 88 207-212*

Emeke, E.A. 1997. Identity Crises: The Search for a Meaning; "SKEPTICOS". *Journal of the Dominican Community, Ibadan. Nigeria. 1,7,8 – 13.*

Emmerling, R.J. and Goleman, D. 2003. Emotional intelligence: Issues & Common misunderstandings. *http://www.diss.fu.berlin.de2003/225/emotionalint.pdf.*

Engel, R.J., Welsh, R.L. and Lewis, L.J. 2000. Improving the well- being of vision-impaired older adults through orientation and mobility training and rehabilitation: An evaluation. Review Vol. 32 (2) pg. 67-76.

Eniola, M. S. 1996. *Effects of Social training and contributive restructuring on the Enhancement of self-esteem of visually impaired adolescent* unpublished Ph.D. thesis, University of Ibadan

Eniola, M.S. 2001. Identity, roles and body image perception as correlates of personality development of visually impaired adolescents. *Journal of Department of Special Education 9(1).*

Eniola, M.S. 2007. The influence of emotional intelligence and self-regulation strategies on aggressive behaviours of adolescents with visual impairment. From http://www.unh.edu/emotional intelligence/htm. Retrieved 6/07/2007.

Eniola, M.S. and Busari, A.O. 2007. Emotional intelligence in promoting self-efficacy of the visually impaired students of Federal College of Education (Special), Oyo. *Journal of Social Sciences 2 (2).*

Epstein, R.M. 1999. Mindful practice. Journal of the American Medical Association, 282, 833 – 839.

Fayombo, G.A. 2001. Improving the Academic Achievement of some Nigeria Adolescents through self-concept grooming. *African Journal of Educational Research 7(1) 168 – 177.*

Feldman, D.A. 1999. *The handbook of Emotional Intelligent Leadership: Inspiring others to achieve results*. Fall Churd. V.A Leadership Performance Solution Press.

Fernandez-Araoz C. 2001. The challenge of hiring senior executives. In C. Cherniss & D. Goleman (Eds.). *The Emotionally Intelligent Workplace* (pg. 182 – 206). San Francisco: Jossey – Bass.

Finegan, J.E. 1998. *Measuring emotional intelligence:* where we are today. (Clearing house No. TM029315). Montgomery, AL: Auburn University and Montgomery School of Education (Eric Document Reproduction Service No. ED412070).

Funderburg, S.A. and Levy, P.E. 1997. *The influence of individual and contextual variables on 360 degree feedback system attitudes*. Group and Organization Management, 22, 210-235.

Gardener, H. 1983. *Frames of mind*. New York: Basic Books.

Garoch, J. Chan, A. and Caputi, P. 2001 (2). A Critical evaluation of emotional intelligence constructs. Personality and individual differences. 28. 539 – 561.

Gilbert, C. 1992. *Personality Glenview*. Illinois; Scott Foreman Press.

Ginzberg, E. 1992. Towards a theory of occupational choice personal and guidance. Journal 30, 491 – 494.

Glasser, W. 1981. *Stations of the mind*. New York: Harper & Row.

Glasser, W. 1985. Reality therapy. In R. Consini (ED.). *Current Psychotherapies* (3rd ed.) (120 – 353). Alaka E.E. Peacock.

Glasser, W. 1999. *Choice theory:* A new psychology of personal freedom. New York. Harper Perennial

Goldman, L. 1976. Moral stages and moralization. The cognitive developmental approach. In T. Lickoma (ed). Moral development and behaviour. New York. Holts Rinehart & Winston.

Goleman, D. 1995. *Emotional intelligence:* why it can matter more than IQ. New York. Bantam Books, (ISBN 0553375067)

Goleman, D. 1998. *Working with emotional intelligence*. New York. Bantam Books.

Goleman, D. 2007. Emotional Intelligence Issues in Paradigm building. Retrieved on the 21st March, 2008 from www.e.cosortium.org.

Goleman, D., and Emmerling, R.J. 2003. *Emotional intelligence: Issues and common misunderstandings.* Consortium for Research on Emotional Intelligence in Organizations. New York. Bantam Books.

Goleman, D., Boyatzi, R.E., and Rhee, K.S. 2000. *Clustering competence in emotional intelligence:* Insights from the emotional inventory. In R. Bar-On and J.D.A. Parker (Eds.). Handbook of Emotional Intelligence pp 343 – 362. San Francisco. Jossey Bass.

Haggerty, L., Copper, C., Golden, J., and Domheim, O. 1998. Emotions at workplace. The Psychologist: Issues, Disability and Equal Opportunity. Vol. 8(9).

Hamid, H. 2005. *Emotional Intelligence Vital.* Retrieved on August 25th 2006. from http//www.emotionalintelligence.20vital.htm

Hartsfield, M.K. 2003. Internal Dynamics of Transformational Leadership: Effects of spiritual, emotional intelligence and self-efficacy. Journal of Personality and Social Psychology. Vol. 14, Pp. 283-316.

Harwid, H. 2001. Emotional intelligence vital. Retrieved on August 25th, 2007 from http://www.emotionalintelligence.20vital.html

Hassan, T. 1995. *Understanding research in education.* Lagos: Merrifield Company.

Hatfield, E., Cacioppo, J.T. and Rapson, R.L. 1992. Primitive emotional contagion. In M.S. Clark (ed.). *Review of Personality and Social Psychology.* Vol. 14, 16 – 65.

Hattie, J.A., Marsh, H.W., Neil, J.T. and Richards, G.E. 1997. Adventure education and outward bound: Out-of-class experiences that have a lasting effect. Review of Educational Research, 67, 43-87.

Hein, S. 2005. *Introduction to Emotional Intelligence.* From http://eqi.org/ei/ed htm. Retrieved 11/12/2004

Heward, W.L. 2000. Exceptional children. *An Introduction to Special Education. 6th Edition.* New Jersey: Upper Seddle River.

Higgins, E.T., and Trope, Y. 1990. Activity engagement theory. Implications of Multiple identifiable input for intrinsic motivation. In E.T. Higgins& R.M. Sorrentino. (Eds), Handbook of motivation and cognition: foundations of social behaviour (Vol. 2, pp. 229 – 264). New York, NY: The Guilford Press.

Hodgetts, R.M., and Rosenkrantz, S.A. 1998. *Real Managers.* Cambridge, MA:Ballinger Press.

Hong, Y.Y., Chiu, C.Y., Dweck, C.S., Lin, D.M.S., and Wan, W. 1999. Implicit Theories. Implicit theories of emotion 41 attributions and coping. A meaning system approach. Journal of Personality and Social Psychology 77, 588 – 599.

Howard, D.E. 1996. The relationship of Internal Locus of Control and Female role models in female college students. *Unpublished doctoral dissertation, University of Texas, Austin.*

Howell, J.M. and Avolio, B.J. 1993. Transformational leadership, Transactional leadership: Locus of control and support for innovation: key predictors of consolidated-business-unit performance. Journal of Applied Psychology, 78, 891-902

http://en.wikipedia.org/wiki/jameslangetheory.

http://personalityresearch.org.basicemotions/html1998

http://www.la.ac.uk/education/resource/socisci/emotions

Hunter, J.B. and Hunter, R.F. 1984. Validity and utility of alternative predictors of job performance. Psychological Bulletin, 96, 72-98.

Huure T, and Aro, H. 2000. Psychological well-being of finnish adolescents with visual impaiement vs those with no disabilities. Journal of Visual Impairment and Blindness . 94 (10) 625 – 637.

Huure, T.M. and Aro, H.M. 1998. Psycho-Social development among adolescents with visual impairment. *Journal of Visual Impairment and Blindness 93(6) 26 – 38.*

Huure, T.M., Aro, H.M. and Hilleri. 2000. Social support and self-esteem among adolescents with visual impairment. *Journal of Visual Impairment and Blindness 93. 26 – 38.*

Ikujuni, J.A. 1995. Using modeling as an instructional management strategy in the enhancement of reading performance of learning disabled children. *Nigeria journal of Clinical and Counselling Psychology.*

Jack M. 2004, *Social Learning theory of Julian Rotter.* (online http://Psych.fullerton.edu/jimearns/rotter.htm.February 22, 2009

Jernigan, K. 2002. *Blindness: Concepts and misconceptions.* Retrieved July 10 2006 from *http://el/blindness 20 concept and 20 misconceptions.*

Johari, L. 2004. Emotional Quotient Retrieved 11/3/2007 from *http://www.refernce.com/browse/wiki/emotionalintelligence.*

Jonassen, D.H. and Grabarski, B.L. 1993. Handbook of individual differences in learning and instruction. Hillsdale: N.J. Lawrence Erlbaum Association.

Kafetscons, K. 2004. Attachment and emotional intelligence abilities across the life course personality and individual difference, 37, 129 – 145.

Kef, S. and Dakovi, M. 2004. The Role of Parental and Peer Support in Adolescents well-being: A comparison of adolescents with and without a visual impairment. Elsevier Ltd.

Kef, S. 1997. *The personal networks and social supports for the blind and the visually impaired.* Journal of visual impairment and Blindness

Kolo, E.N. 2007 Emotional Intelligence Status of In-School Adolescents as perceived by Secondary School Students in Niger State, Nigeria. Unpublished *M.Ed dissertation University of Ilorin.*

Kulshrestha, U. and Sen, C. 2006. Subjective well-being in relation to emotional intelligence and locus of control among executives. Journal of the Indian Academy of Applied Psychology 32 (2), pg. 93-98.

Labs, J. 1999. *Emotional Intelligence at work. Workforce*, 78(7), 68-71

Lefcourt, H.M., Martin, R.A. and Saleh, W.E. 1984. Locus of control and social support: Interactive moderators of stress. Journal of personality and social psychology, 47, 378-389.

Lerner, R. M. and Galambos, N.L, 1989 Adolescent development: challenges and opportunities for research, programmes and policies annual review of psychology 49.

Lynch, S., Hurford, D.P. and Cole, A. 2002. Parental enabling attitudes and locus of control of at-risk and honors students. *Adolescence,* 37 (147) 527-549.

Macaulay, O.A. 1993. An experimental reduction of problems in mathematics via use of instructional materials among pupils with specific learning difficulties in mathematics. Dissertation submitted in part fulfillment of requirement for the degree of Master (M. Ed) pg.2

Mamlin, N., Harris, K.R., and Case, L.P. 2001. *A methodological analysis of research on locus of control and learning disabilities:* Rethinking a common assumption. Journal of Special Education, Winter.

Mathew, G., Leidner, M., and Roberts, R.D. 2004. *Emotional intelligence science & myths*. MT Press Boston.

Mayer and Cobb 2000. History & Definition of Emotional Intelligence in *http://www.20intelligencehtm*. Retrieved 11/12/2004.

Mayer, J.D. and Cobb, C. 2000. *History & Definition of Emotional Intelligence* from http://www.20intelligencehtm. Retrieved 11/12/2004.

Mayer, J.D. and Salovey, P. 2000. *What is Emotional Intelligence*? In P. Salovey and D.J Sluyter (Eds.) 1997. *Emotional Development and Emotional Intelligence: Educational Implications*. New York: Basic Books.

Mayer, J.D. Salovey, P. Caruso, D.R. and Sitarenios, G. 2001. *Emotional Intelligence as a standard Intelligence.* Emotion 1. 232

Mayer, J.D., and Salovey, P. 1993. *The intelligence. Intelligence,* 17 (4), 433 – 442

Mayer, J.D., and Salovey, P. 1995. *Emotional intelligence and the construction and regulation of feelings*. Applied & preventive psychology

Mayer, J.D., and Salovey, P. 1997. *What is emotional intelligence?* In P. Sluyter (Eds). Emotional Development and Emotional Intelligence: Implication for Educators (pp 3 -34). New York, NY. Basic Books

Mayer, J.D., Caruso, D. and Salovey, P. 1999. *Emotional Intelligence meets International standards for an intelligence*. intelligence, 27, 267 – 298.

Mayer, J.D., Salovey, P., and Caruso, D.R. 2000. Emotional intelligence as zeitgeist as personality, and as a mental ability. In R. Bar-On And J.D.A. Parker (Eds).*Handbook of Emotional Intelligence* (pp 92 – 117). San Francisco: Jossey-Bass.

Mba, P.O. 1995. Fundamentals of Special Education and Vocational Rehabilitation. Ibadan: Codat Publications.

McCann, C., Roberts, R.D., Mathew, G., and Zeidner, M. 2004. Consensus scoring and empirical option weighting of performance-base-devotional intelligence tests. *Personality & Individual Difference*, 36, 645 – 662.

McCulloch, B. J. 1991. *Longitudinal investigation of the factor structure of Objective wellbeing.* The case of philadephia Geritric Centre Morale Scale. Journal of Gerontology, 46, 151-158

Medsker, K.L. and Fry, J.P. 1997. Towards a performance technology curriculum. Performance and Instruction 31(2) 53 – 56.

Moronkola, O.A. & Okanlawon, F.A. 2003. *Fundamentals of public and community health education*. Ibadan. Royal People Nig. Ltd.

Muraven, M., Tice, D.M., and Baumeister, R.F. 1998. *Self-control as limited Resource regulatory.*

Nathawat, S.S. Psychological Well-being and Meditation Indian Journal of Clinical Psychologist 1996 Vol. 23: No. 2

Norton A. 1997 Child and adolescent psychology. Banltimore – Clevera Pub.

O'Brien, K.E. 2004. *Self-determination theory and locus of control as antecedents of voluntary work place behaviours*. A Master Degree Thesis Submitted to the Department of Psychology, University of South Florida.

Olaleye, O.O. 2004. Some Psycho-Social determinants of Secondary School female Students achievement in Mathematics in Osun and Oyo State, Nigeria. *An Unpublished Ph.D. Thesis, University of Ibadan, Ibadan, Nigeria.*

Olson, J.M., Roese, N.J., and Zanna, M.P. 1996. Expectancies. In E.T. Higgins & A.W. Kruglanski (eds). *Social Psychology Handbook of Basic Principles* (pp 211 – 238). The Guliford Press.

Ortony, A., and Turner, T.J. 1990. What basic about emotions? *Psychological Review*, 97, 315 – 331.

Ostell, A. 1996. Managing dysfunctional emotions in organizations. *Journal of Management Studies*. 33, 525 – 557.

Oyewo, N.A. 2007. *Sexual dysfunctions and pattern of communication as correlates of marital dissatisfaction among civil servants in Nigeria*. Doctoral thesis, University of Ilorin. Ilorin.

Ozoji, E.D. 2003. *Special education for non-professionals.* Jos, Deka Publications. Pasi, R.J. 1997. Success in high school and beyond. *Educational Leadership*, 54(8), 12-14

Pareek, U. 1997. *Training instruments for development*. New Delhi THM

Parkison, B. 1995. *Ideas and realities of emotion*. London, Routledge.

Payne, W.L. 1985. *A study of emotion: developing emotional intelligence*; Self-integration; relating to fear, pain and desire (theory, structure of reality, problem-solving, contraction/expansion, tuning in/coming out/letting go). A Doctoral Dissertation. Cincinnati, OH: *The Issues and Educational Applications* (pp. 75-100) Hillsdale, New Jersey: Lawrence Erlbaum Associates.

Petrides, K.V. and Furnham, A. 2001. Trait emotional intelligence: Psychometric investigation with reference to establishment trait taxonomies. *European Journal of Personality 15, 425 – 448.*

Petrides, K.V., Sangareau, Y. and Furnham, A. 2000. Trait emotional intelligence and children's peer relations at school. *http//www.ioe.ac.uk/schools*.

Pool, C.R. 1997. Up with emotional health. *Education Leadership*, 54 (8), 40 – 42.

Psychology of Childhood 2005. *Emotion at Work*. Vol. 12(1) 18-20.

Rathi, N and Raslogi, R. (2007). Meaning in Life and Psychological Well Being in Pre-Adolescents and Adolescents. *Journal of the Indian Academy of Applied Psychology 33(1) 31 – 36.*

Richardson, R.C. and Evans, E.T. 1997. *Social and emotional competence: Motivating cultural responsive education*. (Clearing house No. PS025638) - Montgomery, AL: Auburn University at Montgomery, school of education. (Eric Document Reproduction service No. Ed411944)

Rick, P.L. and Hogan, M.S. 2001. *Interpersonal communication skills. Sheridan place*. Corporate Perspective Inc.

Roberts, R.D., Zeidner, M. and Mathews, G. 2001. "Does emotional intelligence meet traditional standards for an intelligence"? Some new data conclusion. *Emotion*, Vol. 1, no 3, pages 196 – 231.

Rodin J., 1990. Control by any other name: Definitions, concepts and processes.

Rodin J., Schooler C., Schaie K.W., ed. Self-directedness: cause and affects throughout the life course. 1 – 17. Erlbaum, Hillsdale, N.J.

Rodin J., Timko C., Harris, S., 1985. The construct of control: Biological and psychosocial correlates. Lawton M.P., Maddox G.L. ed. Annual review of gerontology and geriatrics (Vol 5) 3 – 35. Springer, New York.

Rodin, J., 1987. Personal control through the life course. Abeles R.P., ed. Life span perspectives and social psychology 103 – 119. Erlbaum, Hillsdale, NJ.

Rosenblum L. P. 2000. Perception of impact of visual impairment on the lives of adolescents. Journal of visual impairment 94 (7)

Rotter, J.B. 1966. *Generalized expectancies for internal versus external control of reinforcement, psychological monographs* 80 (1) whole No 609.

Rotter, J.B. 1975. Social learning and clinical psychology, New York: Prentice Hall.

Rowe J.W., Kahn R.L., 1998. Successful aging Pantheon, New York

Rowe, J.W. and Kahn, R.L. 1998. Successful aging. New York: Pantheon.

Ryan R.M., Solky J.A. 1996. What is supportive about social support? On the psychological needs for autonomy and relatedness. Pierce G.R., Sarason B.R., Sarason, I.G. ed. Handbook of social support and the family. 249 – 267. Plenum Press, New York.

Ryan, R.M. and Deci, E.I. 2001. Self-defense theory and the facilitation of intrinsication social development welcan. *Psychologist Sci.* 2, 26

Ryff, C. 1989. Happiness is everything, or is it? Explorations on the meaning of psychological well-being. Journal of Personality and Social Psychology, 57 (6), 1069-1081.

Ryff, C.D. and Keyes, C.I.M. 1995. The structure of psychological well-being revisited. *Journal of Personality and Social Psycholog*y, 69, 719 – 727.

Sally, D. 2000. A General Theory of Sympathy, Mind-reading and Social Interaction with an application to the prisoners dilemma. *Social Science Information 39, 47, 567 – 634.*

Salovey, P. and Sluyter, D. ed. 1997. *Emotional development and emotional Intelligence*. New York. Basic Books.

Sanjay, K.S. 2006. Social work professionals' emotional intelligence, locus of control and role-efficacy. An exploratory study. *SA Journal of Human Resource Management 4 (2), 39-45.*

Sastre, M. and Fernere, G. 2000. Family decline and the subjective well-being of Adolescents. *Social Indicators Research 49, 69 – 82.*

Schachter and Singer's *Two factor theory*. Retrieved on 11/2/2007 http://www.la.ac.uk/education/resource/socsci/emotion

Scheier, M.F. and Nestel, C. 1993. On the positive thinking. The benefit of biotic. Cura Dir. Psycho-science. 2, 26.

Scheir, M.F. and Carver, C.S. 1993. On the positive thinking: the benefit of be. *Cura Dir Psychology* 2, 26 – 29.

Schmidt, F.L. and Hunter, J.B. 1981. *Employment testing*: Old theories and new research findings. *American Psychologist*, 36, 1128 – 1137.

Schultz, D.P. and Schultz, S.E. 2005. *Theories of personality* (Eighth Edition.) Wadsworth: Thomson I.S.B.N.)-534-62403-2

Schultz, R, Heckhausen, J., Locher, J. L. 1991. Adult development, control and adaptive functioning. Journal of social issues. 47: 177 – 196.

Schultz, R., Heckhausen J. 1996. A life span model of successful aging. American Psychologist 51: 702 – 714.

Schumacker R. E., Lomax R.G., 1996. A beginners guide to structural equation modeling. Erlbaum, Mahwah, NJ.

Schutte, N.S., Malouff, J.M., Hall, L.E., Haggerty, D.J., Cooper, J.T., Golden, C.J., and Dornheim, L. 1998. *Development and validation of a measure of emotional intelligence, personality and individual differences*, 25, 167 – 177.

Sears, D.O., Peplau, L.A. and Taylor, S.E. 1991. *Locus of control*, New Jersey. Pentice Hall.

Seifert, T. 2005. *Assessment of the Ryff Scales of Psychological Well-being.* Lowa Center of Inquiry in the Liberal Arts.

Seligman I. 1986. Diagnosis and treatment planning in counseling. New York. Human Science Press.

Seligman, M.E. and Csikzentmihely, M. 2000. Positive psychology. An introduction. American Psychologist.

Shapiro D.H., 1994. Manual for the Shapiro control inventory. Behaviour dyne, Palo Alto, CA.

Shek, D. 1992. Meaning in life and Psychological Well-being: an empirical study using the Chinese version of the purpose in life questionnaire. *Journal of genetic Psychology,* 153, 185 – 190.

Shek, D. 1997. The relation of family functioning to adolescents psychological well-being, school adjustment, and problem behaviour. *The Journal of Genetic Psychology* 158, 467 – 479.

Sheldon, K.M., Ryan, R.M., and Raw-throne, B. 1997. *Trait self and true self*: variation in the big five personality relation with psychological authentic subjective well-being. *Personal Psycychol*, 73, 1380-93.

Simon, B.S. 2000. Predictors of high school and family partnerships and influence of partnerships on students success. *Unpublished doctoral dissertation, Johnshop University.*

Sinclaire, K.E. 1991. Students' effective characteristics and classroom behaviour. In IC Marjoribauts (ed). The foundation of Students learning. Potts Points Australia: Pergamon press.

Skinner E. A., 1995. Perceived control motivation and loping: Individual difference and development series. Sage, Thousand. Oaks, C.A.

Smith, C.H.M., Deeg D.J.H., Bosscher R.J. 1995. Well-being and control in older persons: The prediction of well-being from control measures. International Journal of Aging and Human Development. 40: 239 – 251.

Smith, G.C. Savage-stevens, S. Kohn, S.J., Ingate, R., Finch J., & Moon Y.L. 1999. Creation and validation of scales measuring agency beliefs in adulthood. Paper presented at the Annual Meeting of the American Psychological Association. Boston, M.A.

Smith, G.C., Kohn, S.J., Savage-Stevens, S.E., Finch, J.J., Ingat, R., Lim, Y.O. 2000. The effects of interpersonal and personal agency on perceived control and psychological well-being in adulthood. The gerontologist 40: 458 – 468.

Spector, P.E. 1982. *Behaviour in organization employee's locus of control psychology* (11) 497.

Spector, P.E., and Fox, S. 2003. Reducing subjectivity in the assessment of the job environment: Development of the Factual Autonomy Scale (FAS). Journal of Organizational Behaviour, 24, 417-432.

Spencer, L.M. Jr., Spencer, S.M. 1993. *Competence at work models for Superior performance.* New York. Wiley

Steinbeger, E.J. 2002. *Improving student achievement.* Virginia: American Association of School Administrators.

Sternberg, R., Lautrey, J., and Lubert, T.I. 2002. Where are we in the field of intelligence, how did we get here, and where are we going. In R.J. Sternberg, J. Lautrey, T.I, Lubart (Eds). Washington D.C. *Models of Intelligence: International Perspectives* (pp. 3 – 25); American Psychological Association).

Sternberg, R.J. 1997. *Successful intelligence.* New York: Plume.

Syme S.L., 1990. Control and health: An epidemiological perspective. Rodin J., Schooler, C., Schaie, K.W. ed. Self directedness: Cause and effects throughout the life course. 213 – 229. Erlbaum, Hillsdale, NJ.

Taylor, D. 1988. *Leisure activity participation of elderly individuals with low vision. The Gerontologist*, 28, 181-184.

Tett, R.P., Fox, K.E. and Wang, A. 2005. Development and Validation of a self-report measure of emotional intelligence as a multidimensional trait domain. Personality and Social Psychology Bulletin, 31, 859 – 888.

Thompson, S.G., and Spacapan, S. 1991. Perceptions of control in vulnerable populations. Journal of Social Issues 47: (4) 1 – 21.

Tobin, M.I. 1992. Is blindness a handicap? British Journal of Special Education, 25(3), 107 – 113.

Tomarken, A.J. and Kirschenbaum, D.S. 1982. Self-regulatory failure accentuate the positive. Journal of Personality and Social Psychology 43(3), 584 – 507.

Townsend, M., McCracken, H. and Wilton, K. 1998. Popularity and Intimacy as determinants of psychological well-being in adolescents friendships. *Journal of Early Adolescence, 8, 421 – 436.*

Umoinyain, E. 1999. *Student – Psychological factors As determinant achievement in Senior Sec. Sch. Maths.* Thesis in the international center for educational evaluation (ICEE).

Vahiya, N. S., Doongaji, D.R. and Jeste, D.V. 1975. Value of Patanjali   Concept   in the treatment of psychoneuroses in S. Arieti & G.   Chrzonowski (Ed).   New dimensions in psychiatry (pp 293 – 304).   New York Wiley

Van Rooy, D.L., Alonso, A. and Viswesvaran, C. (2005). *Emotional Intelligence*: A Meta-Analytic Investigation of Predictive validity and Nomological Net. *Journal of Vocational Behaviour.*

Vannel, F. Linssen, H. and Abma, R. 2000. The Parental bond and the well-being of adolescents and young adults. *Journal of Youth and Adolescence* 29, 307 – 318.

Vygotsky, L.C. 1993. *Revolutionary Scientist*. London. Rountledge.

Warren, D.H 1994. Blindness and children: An Individual Differences   Approaches. USA Cambridge Uni. Press

Web pre-publication version available at http://eqi.org/eiabs4.htm J accessed January 2, 2006.

Weiner, B. 1980. Human Motivation. New York: Holt, Reinhardt Winstron.

Weiner, B. 1986. Human Motivation. New York: Holt Rinehart & Winston.

Weiner, B. 1992. Using affective cues to infer causal thoughts. Developmental Psychology 18, 278 – 286.

Wikipedia. The free encyclopedia http://www.en.wikibooks.org/wiki

William, K.J., Donovan, J.J., and Dodge, T.L. 2000. *Self-regulation of performance:* goal establishment and goal revision processes in athletes. *Human Performance.* 13(2) 159 – 180.

Williams, J. 1998. Emotions at work. *The Psychologist Special Issue: Disability and Equal Opportunity.* 12(1) 1 - 56

Williams, R.A., Brody, B.K., Thomas, R.G., Kaplan, R.M. and Brown, S.I. 1998. *The psycho-social impact of macular degeneration. Archives of Ophthalmology.*

Wise, M. 1999. Locus of control in our concept of control impacts the social psybersite control index. btx

Zautra, A.J., Reich J.W., and Newsom J.T., 1995. Autonomy and sense of control among older adults: An examination of their effects on mental health. Bond L.A., Cutler S.J., Grams. A. ed. Promoting successful and productive aging 153 – 170. Sage Thousand Oaks, CA.

Zimbardo, P.G. 1988. *Psychology and life* (2nd Edition). Illinois, USA: Forestman & Company

APPENDIX I

Snellen Chart

Emotional Intelligence Treatment Package

The treatment procedure: the sessions were based on interactive, discussions and explanation, verbalisations, illustrations, peer demonstrations, dictations, reinforcement etc. Also, there was the use of Lowenfeld Principles of instruction, which were base on:

- Unified instruction, additional stimulation, concrete experience etc. The researcher considered the theories used in this study during the various sessions on the treatment programme.

In addition, some of the sessions on Emotional Intelligence training programme were tagged for easy recall, simplicity, interest and easy comprehension. The outline are as follows:

- Self awareness/Identification of Emotions (know thy self)
- Self management/managing emotions – (Accept faults do not shift blames).
- Social Awareness/motivating self – (Easy, yes I can. Am strong, trust self and others).
- Relationship management – (say am sorry, accept your fault).
- Handling Relationship (learn to say am sorry).

SESSIONS	ACTIVITIES
Session I	General introduction, administration of pre-test and establishment of rapport: the concept of emotional intelligence and its importance in enhancing academic achievement.
Session II	Introducing the concept and importance of emotional intelligence. This involves being able to recognise, identify feelings and put a name on them. It also includes the awareness of the relationship among thoughts, feelings and actions.
Session III	Self Awareness/Identification of Emotions. This involves perceiving ones feelings, recognising emotions, and thoughts (know thy self, in self and in others).
Session IV	Self-management/Managing Emotions. This involves self-control, trustworthiness, conscientiousness, adaptability, achievement drive and initiative (Do not shift blames accept faulty).
Session V	Social Awareness/Channelling Emotions. This involves empathy, service orientation, and organisational awareness. (Easy, yes I can am strong)
Section VI	Relationship Management. This involves developing others, influence, communication and conflict management. (Say am sorry accept faults).
Section VII	Handling Relationship continues: Leadership, change catalyst, building bonds, teamwork and collaboration. Motivation/Summary. This involves behaving responsibly; focusing on task at hand, paying attention, handling praises and rewards. Summary of the package and application of emotional intelligence (learn to say I'm sorry when you are wrong).
Section VIII	Brief Revision , Termination of treatment and Post-test Administration.

Brief Description of Training Programme

Experimental Group 1

Emotional Intelligence Treatment Programme

Session One

General Introduction, Administration of Pre-test and Establishment of Rapport.

The researcher welcomed participants to the programme, commended their effort and made a self introduction. The participants were informed of the objective of the study and confidentiality of any information provided. Also, they were informed that they will have eight sessions of 1 hour (60 minutes) each, spanning over a period of 14 weeks. Also, they were informed.

Administration of adapted version of Ryff's scale of psychological well-being (AVRPWB) as a pre-test. Scores obtained from the test would enable the researcher to know the entry behaviour of the participants with regards to their problem of psychological well-being. The researcher acquainted the participants with the benefits to be derived from the programmes if they participate effectively. This includes: having confidence in self and fulfillment in school because of improved psychological well-being, improved problem solving capacity, being able to interact with peers in acceptable ways that would lead to better relationships.

The researcher emphasised the need for participants to cooperatively participate effectively in all the sessions as this will enable them to follow the programme sequentially and logically. The researcher also emphasised the need for participants to adhere to the instructions given and the need to do their assignments punctually. The researcher made the participants to know that assignments give them a greater opportunity to practice and acquaint themselves with the skills that is being cultivated. The researcher equally emphasised the need for participants to ask questions, for clarification and to contribute meaningfully to the programme.

The researcher acquainted the participants with the procedure the programme follows and schedule of meeting and venue. The researcher administered the pre-test and concludes the session.

Session Two

Introducing the concept and Importance of Emotional Intelligence

Objective: This session was design to inculcate into the participants the need to be emotional literates and to be aware of the emotional intelligence it will enable them to utilise it for them and in relationship with other people.

The researcher welcomed participants and commended their efforts. The participants were asked by the researcher to define and explain emotion and intelligence. Emotional intelligence is the ability to perceive emotions, generate emotions so as to assist thought, to understand emotions and emotional knowledge and to reflectively regulate emotions so as to promote emotional and intellectual power. It is the capacity to get optimal results from one's relationship with self and others. Emotional intelligence also involves some skills which are self awareness, social awareness, self management and relationship management skills.

The researcher led the participants to identify the importance of emotional intelligence in enhancing academic achievement such as recognising own emotions, behaving responsibly, following through with plans, focusing on task at hand and paying attention, taking the perspective as well as listening skillfully to others and having positive feelings about self, school and family and also managing stress.

Participants listened attentively, asked questions as well as made contributions to the discussion. This ensures that the participants are really involved and are following the discussion. This also ensures clarification when and where necessary. The researcher concluded the session by giving the participants homework. Participants should write down five of their feelings.

<div align="center">Session Three</div>

<div align="center">Self-Awareness/Identification of Emotions</div>

Objective: At the end of this session, participants should be able to identify their areas of interest, those activities/action/behaviours or situations they find themselves in which will put them off a relationship or that will create friendliness with others or otherwise. The researcher explained to the participants what the topic is all about; different personality traits, feelings, emotional management. Participants were asked to identify some actions/behaviour situations that when they are involved in will bring about satisfaction with self and with others.

The researcher further explained how the recognition of ones self-awareness affects one's feelings, other people and performance at other tasks. The researcher taught the participants how to label their feeling and other people's feelings. For example.

- I feel scared vs. This is ridiculous
- I feel bad and sick vs. you are an insensitive being
- I feel angry vs. you are ill mannered.

<div align="center">97</div>

The researcher taught the participants how to distinguish between thoughts and feelings. For example:

Thought:	I feel like	I think like
	I feel as if	I think as if
Feelings:	I feel (feeling words)	I think (thought)

The researcher made the participants to take more responsibility for their feelings/emotions. For example;

I feel hopeless   I feel sad

Vs   Vs

You make me hopeless   You are making me sad

The researcher concluded the session by briefly summarizing the topic, discussing and giving the following homework. **Record five feelings/emotions and label them. Distinguish between thoughts and feelings.**

<div align="center">

Session Four

Self-management/Managing Emotions

</div>

Objective: This session is to familiarise and expose the participants to different self management.

Having exchanged greetings, the researcher asked the participants to submit their assignment and make a brief comment on ways of managing emotions. Through this their knowledge about self-regulation was broader and or enlarged.

The researcher explained that emotions are better handled so that they are appropriate for situation, it is important to realise what is behind a feeling; it was stressed that participants must find ways to handle fears, anxieties, anger and sadness.

The researcher explained further that people do not have bad feelings and emotional impulses, but must find ways to control them and even channel them in useful ways. Participants were asked to mention certain situations that could lead to either had feelings/modes.

The researcher further gave instruction on self management: this includes discussion on self management as what is needed to realize what is behind feelings. Beliefs have a fundamental effect on the ability to act and on one's dispositions to perform his/her tasks. Many people continually give themselves negative orientations. Hope can be a useful asset. Finding solutions to deal with anger, fear, anxiety and sadness is essential. An individual must learn how to encourage oneself when upset. For example, understanding what happens when emotions get the upper hand and how

to gain time to judge if one's actions/utterances is made in the heat of the moment is really the best thing to do.

The researcher concluded the session by giving the summary and the following homework. **Illustrate the six clusters of self management ability with your personal feelings and experience. State some emotions you observed in yourself and in others at different times. Also, how you were able to re-channel such into appropriate or better outcomes.**

Session Five

Social Awareness/Motivating Self

Objective: during this session, the participants were adequately informed about different avenues through which they can channel their emotions.

The researcher welcomed the participants and reviewed the take-home assignment given to them in the last meeting. Researcher explained that through self motivation, their emotions can be channeled in the service of a goal. Also, through emotional self-control, delaying gratification they can direct their emotion to an appropriate area.

The researcher further gave instruction on social awareness. This includes discussion on social awareness as awareness that involves reading people and groups accurately. This ability incorporates three clusters such as: Empathy, Service, and Organisational Awareness.

Empathy: This gives an individual an astute awareness of others' emotions, concerns and needs. The empatic individual can read emotional currents, picking up on non-verbal cues such as tone of voice or facial expression. However, sensitivity to others in critical for improved psychological well-being whenever the focus is on interactions with people.

The researcher concluded the session by giving the summary and the following homework. **Write down five specific feelings and actions on social awareness and identify three ways of channeling emotions and mention the need for each.**

Session Six

Relationship Management

Objective: During this session, the participants were adequately informed about different strategies of handling co-ordial relationship. Such as having effective communication in relationships. Being friendly and open in relationships, showing

leadership by examples and being democratic. The researcher stressed the issue of assisting others and requesting for help where necessary.

The researcher welcomed the participants and discussions on the homework were extensively made. He also put the participants in active position for the session by discussing the assignment given and also motivated them by putting them in good psychological state. This was done by asking them to breath in and out several time, stretch their body and hold a friend to say hello.

The researcher discussed relationship management as understanding others and relationships, resolving conflicts skillfully, negotiating disagreements, communicating skillfully, being popular, outgoing, friendly, being concerned and considerate of others, helpful, and democratic.

Relationship management also incorporates the following areas:

- Influence
- Communication
- Conflict Management
- Visionary Leadership

Communication: This competence is effective in the give and take of emotional information, deals with difficult issues straight forwardly, and welcomes sharing information fully, foster open communication and stay receptive to bad news as well as good ones.

Conflict Management: This involves spotting trouble as it is brewing and taking steps to calm those involved. Here the act of listening and emphasizing are crucial to the skill of handling difficult people and situation and diplomacy, encouraging debate and open discussion as well as orchestrating win – win situations.

The researcher concluded the session by giving summary and the following homework. **How would being a visionary leader assist someone to improve in psychological well-being.**

Session Seven

Handling Relationship continues

Objective: To assist the participants to develop social competence and social skills that will promote cordial relationship.

The researcher welcomed the participants to the session. The researcher explained that in handling relationship it involves two or more people; this also

necessitates the need for managing emotions in other people; it starts with observation, identification, understanding and then manage it in others, this increases the individual's social competence and social skills. Participants were encouraged to ask questions. More explanations were then provided.

The researcher also emphasised the issue of relationship management by discussing the various areas such as: tolerance, satisfaction, building bonds, and collaboration and team work..

The researcher concluded the session by giving the summary and the following assignments. **Identify at least three ways of establishing cordial relationship with others. Why it is important to identify emotions in others and control emotion in self while handling relationship.**

Session Eight

Brief Revision, Termination of Treatment and Post- Test Administration.

This was the last session and the purposes of this meeting were as follows;

(i)   To spend sometime to review and ask questions on all that have been taught for the past seven sessions.

(ii)   To allow the participants to share their ideas an all that have been taught, learned and gained with one another.

(iii)   To emphasise and encourage participants to put into practice acquired knowledge from the programme as well as use it to help their friends.

(iv)   To administer the adapted version of Ryff's scale of psychological well-being as the post test.

(v)   In conclusion, to terminate the treatment programme.

APPENDIX III

Experimental Group II

Locus of Control Treatment Programme

Session One

General Orientation to the Treatment Programme and Test Administration

Objective: This is a period to introduce every participant and the researcher, also to establish a good interaction between all. To administer the pre-test.

The participants were received warmly. Rapport was established and participants were informed that they will have eight seasons of 1 hour (60 minutes) each spanning over a period of fourteen weeks. Administration of adapted version of Ryff's scale of psychological well-being as a pre-test. Scores obtained from the test enabled the researcher to know the entry characteristics of the participants with regards to psychological well-being.

Session Two

Meaning of Locus of Control

Objective: This session is to introduce the concept of locus of control to the participants such that, at the end of the session participants were able to explain the meaning of locus of control and the sources of control.

This session further explained the meaning of locus of control fully; that locus of control describes the degree to which individuals perceive that outcomes result from their own behaviours or from forces that are external to themselves. This produces a continuum with external control at one end and internal control at the other. Also, the participants were told that this is a treatment that has a bearing to their long-term success and would help to enhance their psychological well-being. Participants were informed that there are two separate sources of control, internal and external locus of control. Some people develop internal locus while others have external locus of control.

Take Home Assignment: Participants were requested to explain what they understand by locus of control and give three examples of locus of control in an individual.

<center>**Session Three**</center>

<center>**Orientation on Internal Locus of Control**</center>

Objective: The participants should be able to identify how their behaviour and attitude affect the outcomes of their lives. Also, this session will describe the characteristics of people who have both internal and external locus of control.

The researcher formally welcomed the participants to another session and reviewed the previous session with them by asking them introductory questions, such as the following:

a) What do you understand by locus of control?

b) Mention two aspects of locus of control?

Emphasising internal locus of control, the researcher explained in detail, that people with an internal locus of control believe that hard work, personal abilities and their decisions will lead to positive outcomes. They should view events as resulting from their own actions/efforts, thus the way such individuals interpret events has a profound effect on their psychological well-being. Also, people with this locus of control believe strongly that they are responsible for their own success, that they have a control of their destiny.

The researcher further explained that there are tips for developing an internal locus of control. These skills include:

✓ The ability to recognise that you always have a choice.

✓ Even not making a choice; is actually a choice.

✓ Also, one has made a choice, when he/she allows other people or events to decide for him/her.

✓ Setting goals for oneself and working hard to achieve set goals.

✓ Develop a decision making skill and

✓ Problem solving skills. These skills can lead to self-talk or reminder that one has a degree of control over ones choice.

Take Home Assignment: Participants were asked to list the various skills necessary for developing internal locus of control.

Session Four

Orientation on External Locus of Control

Objective: To teach the participants the meaning of external locus of control and the characteristics of external.

The researcher renewed the previous session with the participants by asking them few questions. In addition, the last assignment given was collected and reviewed.

The researcher explained that those with externals locus of control attribute outcomes of events to external circumstances that is they view events as being under the control of external factors or forces such as fate, luck and chance. They also believed that their own actions do not influence future outcomes. The researcher stressed that those with external locus tend to be less willing to take risks, to work on self-improvement; they tend to lack persistence and not have high level of expectation. Summary of the lesson was done and assignment was given. More explanations (see Appendix)

Take Home Assignment: Participants were asked to state what external locus of control means. Also, they were asked to write out the characteristics of externals.

Session Five

Understanding oneself in relation to locus of control

Objective: This session is to familiarise and expose the participants to different skills or activities that will make them to be happy and satisfied with self and with others.

The researcher identified the areas and skills they need to explore to be able to assess their performance in order to develop quality psychological well-being. Such skills as ability to make a choice; ability to have controls of self; confidence to take decision; ability to strive towards achieving set goals; being able to interpret their attained success/achievement. Whether it was through their hard work or through good teaching strategies or modern technological advancement. Whether their happiness was determined most often by the influence of other people or through their own personal efforts.   Summary of the lesson was done and assignment will be given.

Take Home Assignment: Participants were asked to write out five reasons for being happy or unsatisfied with self

<center>**Session Six**</center>

<center>**Self-determination and Awareness**</center>

Objective: At the end of the session participants should be made to realise the need for developing positive self-concept and positive relationship with others and its impact on psychological well-being.

The researcher welcomed the participants and reviewed the take home assignment given to the participants in the meeting.

The researcher identified some actions, behaviours or situations where participants input and involvement can produce either positive results/outcomes or otherwise. Also, the researcher asked the participants to identify how such success or achievement was attained. Where positive outcomes are not achieved, the researcher would ask the participants to also outline why the reason.

After the interactive session on the above, the researcher gave a take home assignment.

<center>**Session Six**</center>

<center>**Self-determination and Awareness (continuation)**</center>

Objective: To further expose the participants to various behavioural attitudes that would enhance happiness or satisfaction.

The researcher encouraged the participants to engage in activities that will improve their situation. Such as:

- ✓ interacting with classmates with open minds,
- ✓ trying to pay attention to other people's feelings especially those around them.
- ✓ Also, trying to take note of information that they can use to create pleasant situations both at present and in future. Having respect and feelings for other people's views and decisions.

The researcher asked the participants to mention such behaviours or attitudes that lead to contentment or satisfaction which often makes them happy. Also, those they could take adequate control of, those that they achieve by the stroke of luck, fate or by chance etc.

The correct answers were provided by the researcher to the participants. Some of the behaviours were mentioned as follows: persistence, Openness, inquisitiveness, participative, management style, positive concept of self, hard work, accepting failure and striving to make headway or achievement at other times.

<center>105</center>

The researcher encouraged the participants to ask questions while those questions are addressed adequately the researcher reinforced accordingly. More explanation were made on self assessment.

Take Home Assignment: Mention some behaviours both from you or other people that make you unhappy and could lead to isolation.

<div align="center">

Session Seven

Self-control and Management

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Objective: At the end of this session, participants should be able to identify and utilise the skills or behaviours that would make them happy with themselves and with others. Also, they will be able to have control of their feelings, events, situations or actions that could negatively influence their psychological well-being. In addition, they would be able to have an understanding of their locus of control (i.e. ability to interpret what/how the results of their outcomes were achieved)

The researcher welcomed the participants to the session and assignment given was collected. The researcher informed the participants of the need to engage in self-assessment, self-control, building of confidence. Also, the benefit of such actions would help to reduce behaviours that could lead to anxiety, feelings of inadequacy, lack of self-control, lack of commitment, carefree life styles, dependence on other significant order for success etc.

Participants were asked to state those activities they could engage in when they realise they are becoming anxious. In addition, participants were requested to mention some behaviours that could lead to establishing friendly or cordial relationship with others. Also, they were asked to identify their achievement or successes, linking it with contributory forces. All participants who made attempt to answer questions will be duly reinforced. While some of the answers will be provided by the researchers to include –

- ✓ Willingly accepting ones efforts/limitation
- ✓ Being open to friends and close associates,
- ✓ Ability to get along with others without chaos
- ✓ Accepting success and failure as a reward of hard work or as a result of other contributory factors etc.

The researcher spent sometime to review the contents of the lesson and entertained questions from the participants.

Session Eight

General Revision, Administration of Post-test and Termination of Treatment Programme

This is the last session and the purposes of this meeting are as follows:

(i) To spend some time to review the previous sessions and to ask question on the different sessions.

(ii) To encourage interaction among the participants also to ask them to share with one another what they have gained or derived from the programme.

(iii)To advise participants to put into practice all knowledge acquired in the programme as well as use it to assist their friends and relatives.

(iv)To administer the adapted version of Ryff's Scale of psychological well-being as the post-test and

(v) To terminate the treatment programme.

University of Ibadan
Faculty of Education
Department of Special Education

Instruction: The items are designed to find out the effectiveness of emotional intelligence and locus of control in enhancing the psychological well-being of adolescents with visual impairment. Kindly read the various sections carefully and respond to items honestly. The questionnaire is for research purpose only and any information given will be treated as confidential. You are not required to write your name on the questionnaire form.

Thank you for your anticipated cooperation.

…………………
Ajobiewe, A.I.
77767

<center>**Adapted Version of Ryffs Psychological Scale of Well-Being**</center>

The adapted version of Ryff Scale (1989) of Psychological Well-being (AVRPWB)

<center>**Section A: Personal Data**</center>

Please read the following items carefully and then thick (√) the space that applies to you.

1. Name of Institution:…………………………………………….
2. Gender: Male (   )   Female (   )
3. Age Range: 20 – 25 yrs (   )   26 – 30 (   ) 31 and above (   )
4. Type of Visual Impairment: Totally Blind (   ) Partially Sighted (   )
5. Educational Level: JSS I (   ) JSS II (   )   SS I (   )   SS II (   )

<center>**SECTION B**</center>

This section would reflect the six areas/scales of psychological well-being as mentioned below. Items from the separate scales are mixed. Participants would respond using a six point format as stated below. Kindly tick (√) the option that best describes your present agreement or disagreement with each statement. Please remember that there are no right or wrong answers.

Questionnaire: On the adapted version of Ryff Scale (1995) of Psychological Well-being (AVRPWB).

Key:

SD	-	Strongly Disagree	1
MD	-	Moderately Disagree	2
SLD	-	Slightly Disagree	3
SLA	-	Slightly Agree	4
MA	-	Moderately Agree	5
SA	-	Strongly Agree	6

<center>109</center>

S/N	Autonomy	SD	MD	SLD	SLA	MA	SA
1.	I am not afraid to voice my opinions, even when they are in opposition to the opinion of most people						
2.	I tend to worry about what other people think or say of me						
3.	Being happy with myself is more important to me than having others approve of me.						
4.	I am concerned about how other people Evaluate the choices 1 has made in life.						
	Environmental Mastery						
5.	The demands of everyday life pose on me by my						
6.	Disability often gets me down and leads to frustration.						
7.	If I were unhappy with my living situation, I would take effective steps to change it.						
8.	I get frustrated trying to get about my daily activities because I never accomplish the things I set out to do.						
9.	With the aid of other sense I have adequate mastery of my immediate environment.						
	Personal Growth						
10.	I don't want to try new ways of doing things, my life is complete the way it is.						
11.	I enjoy seeing how my views have changed and matured over the years.						
12.	1 gave up trying to made new/big improvements in my life along time ago						
13.	I like healthy competition with my sighted colleagues in the area of social life						
	Positive Relations with others						
14.	1 feel confident when asked to lead a group						
15.	I often feel lonely because I have few close friends						
	Purpose in Life						
16.	I can forge ahead in spite of any delay or failure						

	Self Acceptance						
17.	I am a visually impaired conscientious worker						
18.	When my visual impairment stands as an obstacle to creating new ideas 1 give up smartly.						
19.	1 like to take or listen to advise that would help me improve my life.						
20.	I like to use equipment and materials meant for the blind						

Internal Locus of Control

Building up Self Confidence

- Belief in hard-work
- Be consistent in working hard. Good, better, best.
- Work on your little areas of strengths/merit or advantage
- Accept faults and mistakes
- Be ambitious – not overambitious
- Accept limitations (imposed by loss of vision)
- Do not idolize normal standards
- Positive self concept

External Locus of Control

- Belief that success of achievement is due to external forces: fate, luck. These include help from people friends relations seeking for assistance.
- Accepting to work with others in a group, club, association.
- To develop skill, the following must be considered:
    - (a) There must be room for trusting other people especially in relationship.
    - (b) They must look-up to good role-models/role play.
    - (c) Don't believe, the negative influence or illegal means (as external forces) for achievement (use of machineries to pass or impersonation, exam malpractice, copying or cheating) rather they should focus on extra lessons, external choaching private teachers, group discussions, as external forces.
    - (d) Use of adequate equipment and materials.
    - (e) Involvement in reaction activities to build relationship.
    - (f) Listening to music, e.g can make them happy and can lead to developing good listening skills.

Locus of Control

1 – Behaviour Expectations

- Typical behaviours expectations (success or failure)
- A typical behaviours expectations (success or failure) using Abosi & Ozoji (1985) idolizing normal standards.
- Attribution of behavior – outcome (success) internal as a result of deserving self efforts.
- Attribution of behavior/action e.g (failure) external as a result of ill-luck or significant other.

2 – Behaviour Attitude

- Problem of understanding self (internality)
- Problem of Identification and Interpretation (internality)
- Relatinship problem (internality)
- Self improvement (through practice)

3 - Behavioural Attitude (External Locus)

- Negative attitude – Derogatory remarks (externality) and discrimination.
- Lack of Acceptance – (externality)
- Role models – These should be (externality) positive influence.

4 – Continuation – Understanding Oneself: Positive agents of change.

- Focusing on their area of strengths
- Trusting others
- Listening to music, involvement in recreation.