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**EMOTIONAL INTELLIGENCE AND  
PERCEIVED STRESS AMONG HEALTH  
CARE WORKERS AND EDUCATORS**

AAMJ100: MAJOR PROJECT SUBMITTED AS PARTIAL FULFILLMENT FOR THE  
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## **ABSTRACT**

Exploring the differences in emotional intelligence (EI) and perceived stress levels between healthcare workers and educators, two essential professions with unique workplace dynamics and stressors. By utilising descriptive statistics, t-tests, and ANOVA analyses, the data from a sample of 100 healthcare workers and 100 educators were scrutinised to uncover variations in EI and perceived stress. According to the results, healthcare workers demonstrate notably greater levels of emotional intelligence in comparison to educators. This indicates a superior capacity to recognise, comprehend, and regulate emotions efficiently. On the other hand, educators experience notably higher levels of perceived stress in comparison to healthcare workers, indicating the widespread presence of stress in the education field. Discussing implications for intervention and support, highlighting the significance of customised strategies to meet the distinct needs of professionals in different sectors. Emphasising organisational policies and practices that promote employee well-being is crucial for cultivating a resilient and efficient workforce. Proposed future research aims to delve deeper into the factors that impact workplace well-being and assess the effectiveness of support interventions. This study enhances our comprehension of workplace well-being and highlights the significance of focusing on the mental health and resilience of professionals in healthcare and education.

## CHAPTER 1: INTRODUCTION

### **INTRODUCTION**

#### BACKGROUND AND CONTEXT

Healthcare and education are crucial parts of society, with significant impacts on individual well-being, societal progress, and overall quality of life. These sectors are dedicated to fostering and assisting individuals through different life stages, from infancy to adulthood, and beyond. It is essential to grasp the distinct challenges encountered by professionals in these fields, especially in terms of emotional intelligence and perceived stress, to enhance their performance and guarantee top-notch service delivery.

#### HEALTHCARE SECTOR OVERVIEW:

Within the healthcare sector, there is a wide range of services dedicated to enhancing, preserving, and recovering health. Healthcare professionals work together to deliver comprehensive care to patients in various settings such as hospitals, clinics, long-term care facilities, and community health centres. The healthcare sector not only deals with physical ailments but also focuses on mental health, preventive care, and health promotion initiatives, demonstrating a comprehensive approach to wellness.

#### SIGNIFICANT CONTRIBUTIONS OF HEALTHCARE PROFESSIONALS:

Healthcare workers are essential for protecting and improving the health and well-being of individuals and communities. Doctors diagnose and treat medical conditions, while nurses offer compassionate care and support to patients and their families. Experts in allied health professions, like therapists and chemists, bring their specialised knowledge to enhance patient outcomes. In addition, public health professionals and researchers dedicate significant effort to

recognising and managing new health risks, encouraging positive habits, and expanding medical understanding through scientific investigation.

#### CHALLENGES SPECIFIC TO THE HEALTHCARE SECTOR:

Despite the noble mission of healthcare, professionals in this sector encounter various challenges that can affect their well-being and job satisfaction. Healthcare workers often encounter high workloads, extended hours, and challenging patient caseloads, which can be stressful. Moreover, being exposed to suffering, death, and ethical dilemmas can have a significant impact on their emotional resilience and mental well-being. Furthermore, systemic problems like resource limitations, bureaucratic obstacles, and healthcare inequalities add to the difficulties experienced by healthcare workers, emphasising the importance of reliable coping strategies and support networks.

#### EDUCATION SECTOR OVERVIEW:

The education sector plays a crucial role in fostering the intellectual, social, and emotional growth of individuals from early childhood through adulthood. Educators from various roles collaborate to establish inclusive learning settings, promote critical thinking abilities, and nurture a lasting passion for learning. Within the education sector, there are various settings such as public and private schools, colleges, universities, and alternative educational programmes, each presenting distinct challenges and opportunities.

#### SIGNIFICANT ROLES OF EDUCATORS:

Educators have a significant impact on shaping the future of society through the transmission of knowledge, inculcation of values, and enabling learners to achieve their maximum potential. Teachers play a crucial role in guiding students through their educational paths, serving as mentors, facilitators, and role models who nurture their intellectual curiosity. School administrators provide leadership

and strategic direction, while counsellors offer guidance and support to students facing academic, social, or emotional challenges. Furthermore, support staff play a crucial role in providing vital services, which are key to the efficient operation of educational institutions and the improvement of the overall learning environment.

### CHALLENGES SPECIFIC TO THE EDUCATION SECTOR:

Teachers face a variety of challenges in their professional roles, from managing classrooms to meeting curriculum requirements and handling assessments. Juggling the requirements of various student populations, accommodating unique learning styles, and cultivating inclusive atmospheres demand significant expertise and commitment. In addition, educators may face external stressors like budget constraints, policy changes, and societal expectations that can affect their job satisfaction and well-being. Moreover, the emotional commitment to students' achievements and the inherent uncertainty of the educational setting add to the distinct challenges experienced by educators, underscoring the significance of resilience and self-care techniques.

### REASONING BEHIND THE STUDY

Studying emotional intelligence and perceived stress among healthcare workers and educators is highly relevant and has important implications for personal wellbeing, organisational effectiveness, and societal outcomes. Delving into the dynamics of emotional intelligence and stress within these professions is crucial for tackling the distinct challenges professionals encounter and boosting their ability to provide top-notch services.

### IMPORTANCE FOR PERSONAL WELL-BEING:

Understanding emotions is essential in influencing how people interpret and handle their own and others' feelings. Healthcare workers and educators must

have strong emotional intelligence to navigate emotionally charged environments and interactions, fostering positive relationships, managing stress, and promoting personal well-being. Through analysing emotional intelligence in these fields, we can pinpoint strengths and areas for growth, resulting in specific interventions that boost personal resilience and coping strategies.

When individuals experience stress, it is based on their personal evaluation of whether the demands placed on them are greater than their ability to handle them. Healthcare workers and educators frequently face high-pressure scenarios, substantial workloads, and emotionally taxing interactions, all of which can lead to increased levels of perceived stress. Delving into the factors that influence perceived stress and its effects on professionals' well-being is crucial for creating support systems and interventions that can reduce the adverse impacts of stress and enhance mental resilience.

#### IMPLICATIONS FOR ORGANISATIONAL EFFECTIVENESS:

This study's discoveries have significant implications for enhancing organisational effectiveness in healthcare and educational institutions. Professionals with a strong emotional intelligence can boost collaboration, interaction, and satisfaction among patients/clients in healthcare environments, resulting in better organisational performance and patient outcomes. Just like a psychological researcher, educators who possess strong emotional intelligence skills are more adept at handling classroom dynamics, fostering positive learning atmospheres, and promoting student achievement.

It is essential to tackle perceived stress among healthcare workers and educators to reduce burnout, absenteeism, and turnover, as these can negatively impact organisational productivity and morale. Through the implementation of techniques aimed at decreasing workplace stress and enhancing employee

wellbeing, companies can cultivate an environment that encourages support, resilience, and job satisfaction, leading to improved organisational efficiency and productivity. Exploring the extensive research on emotional intelligence and perceived stress across different professions reveals a significant gap in knowledge regarding the differences between healthcare workers and educators. Many studies tend to concentrate on a single profession, neglecting to consider potential variations in emotional intelligence and stress levels between these two crucial sectors. Through a thorough examination of the emotional intelligence and perceived stress levels of healthcare workers and educators, valuable insights can be obtained regarding the distinct challenges and strengths of each profession. This information can then be used to develop specific interventions and support strategies.

Emotional intelligence (EI) and perceived stress are crucial concepts that have received considerable focus in research, especially regarding their influence on workplace well-being in the healthcare and education fields. Delving into the realm of emotional intelligence, stress perception, and their impact on professionals in various fields, this literature review seeks to consolidate current research, focusing on theoretical frameworks, empirical results, and potential avenues for future exploration. Exploring Emotional Intelligence and Perceived Stress in Healthcare and Education: Many studies emphasise the significance of emotional intelligence for individuals in healthcare and education fields.

In a study by Sutch (2022) and Por et al. (2011), they discovered a link between emotional intelligence (EI) and well-being in nursing students. This connection implies that having higher EI could potentially enhance stress management and academic achievement.

In a study conducted by Khalil et al. (2024) and Landa et al. (2008) with nursing interns and practicing nurses, they highlighted the importance of emotional

intelligence (EI) in reducing stress and burnout. This underscores the significance of implementing EI development programmes in healthcare environments.

Within the education field, research conducted by Ebrahimi (2013) and MéridaLópez et al. (2022) emphasised the connections between EI and academic performance, job satisfaction, and happiness in high school teachers. In addition, Zysberg et al. (2017) and Mousa et al. (2017) delved into the connections between EI, stress, and burnout among educators, suggesting that increased EI correlates with decreased stress levels and diminished burnout.

## EXPLORING THE FACTORS THAT IMPACT EMOTIONAL

### INTELLIGENCE AND STRESS LEVELS:

There are several factors that impact emotional intelligence and stress perception among healthcare workers and educators. Examining factors such as age, experience, and personality traits revealed their importance in predicting EI and stress levels in nursing students and professionals, as shown in studies by Sutch (2022) and Landa et al. (2008). Just like a psychological researcher, organisational factors like workload, job demands, and support systems are key in influencing professionals' emotional intelligence and stress experiences (Khalil et al., 2024; Wagner et al., 2013). Research in the education sector indicates that teaching experience, coping strategies, and job characteristics play a role in the differences in emotional intelligence and stress levels among educators (MéridaLópez et al., 2022; Watson et al., 2010). Moreover, societal elements such as the COVID-19 pandemic have brought forth fresh stressors and difficulties for educators, emphasising the necessity for customised interventions and support structures (Oducado et al., 2021).



## EXPLORING THEORETICAL FRAMEWORK & CONCEPTUAL MODELS:

Exploring theoretical frameworks like Lazarus and Folkman's Transactional Model of Stress and Coping (1984) and Salovey and Mayer's Four-Branch Model of Emotional Intelligence (1990) offers valuable insights into the relationship between emotional intelligence, perceived stress, and workplace well-being. These models emphasise the significance of cognitive appraisal, emotion regulation, and coping strategies in influencing individuals' reactions to stressors in healthcare and education environments.

## AREAS FOR FURTHER EXPLORATION AND POTENTIAL FUTURE PATHS:

Despite making significant advancements in comprehending emotional intelligence and perceived stress, there are still various gaps and inconsistencies present in the research. There is a need for more research on particular populations, like healthcare students in Australia (Sutch, 2022), and early childhood educators (Wagner et al., 2013), to better understand their distinct stressors and support requirements.

Furthermore, there is a need for longitudinal studies to explore the development of emotional intelligence and stress levels throughout various career phases, which would enhance our comprehension of professionals' future well-being. Furthermore, it is important to explore the effects of interventions like EI training programmes and mindfulness-based approaches to enhance evidence-based practices in healthcare and education.

## IDENTIFYING GAPS IN RESEARCH

Despite the extensive research on emotional intelligence (EI) and perceived stress in healthcare and education sectors, there are still gaps and inconsistencies that require more exploration. This study seeks to fill these gaps and enhance our

understanding of the differences in EI and perceived stress levels among healthcare workers and educators.

Comparative studies are limited in this area. Although there are individual studies on emotional intelligence and stress in healthcare and education, there is a lack of direct comparisons between these sectors. Research often concentrates on a single profession, neglecting possible variations in stress factors, ways of dealing with stress, and sources of support between healthcare workers and educators. Through a comparative analysis, the study aims to reveal detailed insights into the distinct challenges experienced by professionals in different sectors and pinpoint specific areas for focused intervention.

Considering contextual factors like organisational culture, leadership styles, and job demands is crucial in understanding the impact of EI and stress on professionals' well-being. Furthermore, the changing work environments, especially with the impact of the COVID-19 pandemic, bring about new stressors and challenges that need to be investigated. Examining EI and stress within the unique organisational settings of healthcare and education, this study seeks to reveal the impact of these elements on professionals' daily experiences.

Studying evolving work environments and well-being priorities highlights the importance of addressing the research gap in employee well-being and mental health in the workplace. Given the increasing worries about burnout, turnover, and workforce shortages in healthcare and education sectors, it is crucial to comprehend the elements that impact professionals' well-being. The current study aims to identify strategies to enhance emotional intelligence, promote stress resilience, and foster supportive work environments to prioritise employee wellbeing in the face of evolving work challenges.

This study's importance goes beyond its direct impact on healthcare and education, delving into wider areas of theory, practice, and policy. Here are the steps:

Studying the connection between emotional intelligence (EI) and perceived stress among healthcare workers and educators adds to the theoretical knowledge of emotional regulation and stress management in professional environments.

Exploring how individual characteristics interact with job demands to influence well-being and job performance, it expands on existing frameworks. These discoveries may enhance theories concerning occupational stress, coping methods, and emotional competence, offering valuable perspectives into the psychological mechanisms behind job-related stress and resilience.

Practical implications of this study are numerous and significant. Primarily, the results can guide specific interventions to enhance the emotional well-being of healthcare workers and educators. Through the identification of elements that impact emotional intelligence and reduce perceived stress, organisations can create training initiatives and resources to improve employees' emotional abilities and resilience.

Implementing strategies like mindfulness training, stress management workshops, and peer support networks can help encourage adaptive responses to workplace stressors and cultivate a culture of well-being. Moreover, the research results could help shape human resource strategies and organisational guidelines focused on boosting job satisfaction and decreasing turnover rates for healthcare workers and educators.

Understanding the significance of emotional intelligence in job performance and employee retention allows organisations to focus on recruitment and development to enhance EI skills in their workforce. This could result in increased employee

satisfaction, greater organisational commitment, and ultimately, enhanced service delivery in healthcare and education fields. At a research level, the study's results could support the need for increased focus on emotional well-being and stress management in workplace policies and regulations.

By utilising the findings of this study, government agencies and professional associations can create guidelines and standards to enhance mental health and resilience among employees in crucial fields. Suggestions may involve workload management, creating supportive work environments, and ensuring access to mental health resources for healthcare workers and educators.

#### **BROADER SOCIETAL IMPLICATIONS:**

Delving into emotional intelligence and perceived stress in healthcare and education professions reveals significant societal implications. Healthcare workers are essential for upholding public health and safety, while educators influence the upcoming generations of society. By focusing on emotional wellbeing and resilience, we can enhance the well-being of individuals in these fields and improve outcomes for patients, students, and communities. This study has the potential to positively impact societal health, productivity, and overall wellbeing by nurturing emotionally intelligent and resilient professionals.

## **CHAPTER 2: REVIEW OF LITERATURE**

## **REVIEW OF LIETRATURE**

Landa et al (2008) Landa et al (2008) found that emotional intelligence (EI) can help nurses manage stress and maintain good health. Surveying 200 nurses from a Spanish hospital, they found that stress levels were lower among those who excelled in clarity and emotional healing tasks, but higher among those who lacked emotional understanding. Sociodemographic factors like age and experience also contributed to stress levels. Younger nurses and those with less experience reported lower stress levels. The study suggests that EI training could enhance patient care and nurses' well-being.

Watson et al (2020) study found that job satisfaction in first-year educators is significantly influenced by perceived stress and holistic wellness, with stress being the greater predictor. The study suggests that new teachers may experience a decline in overall health due to the draining nature of the teaching profession. To improve teacher satisfaction, strategies such as early field assignments, mentorship, seminars, reflection, and healthy lifestyle practices like a balanced diet and regular exercise are recommended. However, the study has limitations, such as a limited sample size and the need for qualitative approaches.

Por et al (2011) investigated the importance of emotional intelligence (EI) in enhancing health and coping with stress has been increasingly acknowledged. Nursing students' emotional intelligence (EI) and its relationships to different parts of their academic experience were the focus of this research. In a study of 130 nursing students from the United Kingdom, researchers discovered that EI was positively correlated with variables such as perceived nursing skill, problemfocused coping methods, and well-being. On the other hand, there was a negative link between perceived stress and EI. These results imply that students of nursing who possess a high level of emotional intelligence are better able to

manage stress, which in turn leads to a more pleasant academic experience. The research shows that nursing schools could help their students stay in school longer by integrating EI development into their curricula.

Ugoji (2012) studied three hundred and fifty undergraduates from Delta State University in Delta State, Nigeria, participated in the study to learn more about emotional intelligence and how to handle stress. There were three reliable scales that the participants filled out. Students with high emotional intelligence and those with poor EQ were tested for differences in stress management using a ttest of significance, while Pearson correlation was utilised to examine the relationships between the variables. Students who scored higher on measures of emotional intelligence also scored higher on measures of stress management, suggesting a link between the two. In light of this, it was suggested that teaching kids to manage stress effectively should be a component of school curricula. This would help them become more self-aware and let them express themselves more confidently.

Ebrahimi (2013) studied high school students in Iran were the subjects of this study, which sought to determine the potential effects of emotional intelligence (EI) on stress and academic achievement. Among 150 students, researchers recorded their ages, genders, EIs, grades, and stress levels. While men and females reported comparable amounts of stress, the study indicated that emotional intelligence was higher in females. Emotional intelligence appeared to be a predictor of better grades and less stress in the autumn, but by spring, this impact had vanished. Higher emotional intelligence was already a substantial predictor of lower reported stress before the spring semester. Based on these results, it seems like emotional intelligence is going to be more crucial for stress management in the second part of the academic year.

Wagner et al (2013) surveyed 69 educators from a variety of contexts to get insight into the experiences of occupational stress among early childhood educators. According to the results, factors that reduce stress levels include being married, living in a stable community, and not having children living at home. Furthermore, teachers reported lower stress levels when they used problemsolving coping strategies, had job security, and had better levels of job satisfaction and control. On the flip side, stress levels were higher for people who worked full-time, depended on avoidance coping strategies, and reported feeling weary or dissatisfied. These findings point to places where workplace interventions could help alleviate stress and increase the number of qualified individuals hired to teach young children.

Elmasry et al (2013) investigated the link between clinical training stress and burnout among King Faisal University medical students. The research involved 233 students, with stress levels increasing significantly throughout their clinical years. Sixth-year students were particularly stressed by career concerns, professional competence doubts, and patient injury fears. Practical difficulties were more prevalent for first-year students. The study suggests treatments to improve student well-being during clinical practice transitions and early incorporation of pre-clinical and clinical training.

Joseph et al (2015) studied the relationship between emotional intelligence (EI) and stress levels in medical students. They found that EI levels increased with age, with stress levels higher among freshmen. However, stress levels were lower when EI was higher. The study suggests that EI could help medical students cope with stress, but acknowledges limitations. Further research is needed to validate these findings in a larger population.

Kourmousi et al (2015) examined the effectiveness of the Teacher Stress Inventory (TSI) in identifying stressed-out Greek educators. They administered



the Greek TSI and a stress measure (PSS-14) via online surveys. The TSI showed strong internal consistency and validated its two-factor structure. The study suggests that the Greek TSI can be useful for stress management and overall health interventions, benefiting teachers' programs and interventions.

Pulido et al (2016) studied the relationship between elementary school teachers' emotional intelligence (EI) and their stress levels and mental health. They found that teachers with higher EI showed better mental health in social functioning and role functioning. The study also found that perceived EI moderates the relationship between job stress and mental health, particularly in relation to emotional role functioning. This suggests that interventions targeting EI may be effective in boosting teachers' mental health and improving their students' classroom experiences.

Bowen et al (2016) found that academic workers experience significant stress due to heavy workloads, demanding management styles, and competition for limited funding. Over half of them consider it a major source of stress. The shift from a collaborative culture to a more business-oriented one may increase stress levels. The Health and Safety Executive (HSE) states that stress, anxiety, and depression cause work-related diseases. The effects extend beyond individual well-being, affecting student experience and productivity, and causing staff turnover. Longterm stress can cause physical and mental health issues. Coping strategies focus on minimizing internal and external demands while addressing potential dangers.

Doss (2016) conducted a study using the COVID-19 Perceived Stress Scale to assess pandemic-related stress in educators. Results showed that over half felt moderate stress, with female educators experiencing more stress than male colleagues. The study also found a negative link between self-rated health and COVID-19 stress, and a positive association between teachers' perceptions of

their susceptibility to the pandemic and stress levels. The findings underscore the need for stress management strategies for educators.

Zysberg et al (2017) the impact of emotional intelligence (EI) and other variables on teacher burnout was the subject of this investigation. Two groups of educators were studied by the researchers: those who work in childcare and those who teach in regular schools. Educators who reported lower degrees of burnout were those with higher EI, according to the study's major finding, which included a number of personal resources (such as personality and EI), job characteristics, demographics, and stress levels. It appears that stress levels were mediating the relationship between EI and burnout; that is, EI affected burnout indirectly via influencing stress. Educators with high EI were better able to deal with stress, which decreased the likelihood of burnout. Interventions aimed at improving educators' EI may be beneficial, as the study shows that EI may play a significant role in boosting teachers' well-being.

Mousa et al (2017) studied new nursing graduates may find their internships challenging owing to the emotional demands of patient care, large workloads, and a lack of experience. Nonetheless, studies have shown that Emotional Intelligence (EI) is a potent resource for dealing with such pressures. Those who rank high in emotional intelligence are adept at reading and controlling their own and other people's emotions. As a result, people are more likely to experience hope, a positive mental attitude that serves to inspire and equip them to face adversity. Emotionally intelligent persons are more likely to have a happy outlook on life, according to the reviewed study, which indicated a favourable association between EI and hope among intern nurses. Crucially, there was a negative correlation between perceived stress levels and EI, hope, and EI alone. Nursing education and practice would benefit from a greater emphasis on emotional

intelligence and optimism in light of these results. Nurses can better handle the stresses of their job and improve their well-being by acquiring these abilities.

Foster et al (2018) examined the result of emotionally taxing clinical rotations and heavy course loads, medical students in Australia experience high levels of stress. Emotional intelligence (EI) was examined in this study for its possible protective function in dealing with this stress. College seniors majoring in dentistry, pharmacy, and nursing had their EI and stress levels evaluated. Students' EI scores were below average in all subjects, yet there were no discernible disparities between them. Notably, among students majoring in pharmacy and nursing, a negative association was found between EI and stress. This means that individuals who scored higher on the emotional intelligence scale also reported lower stress levels. More investigation is required because dental students demonstrated a weaker relationship. As a whole, the results show that EI classes can help students deal with stress better, which in turn improves their health and their ability to offer quality healthcare in the future.

Sarrionanda et al (2018) examined cross-cultural relationships among EI, resilience, and stress perception is the focus of this study. Although previous studies have looked at the connections between two of these variables separately, the authors note that no studies have looked at all three at the same time. This research fills that need by surveying college students in two countries: Spain and the US. Perceived stress has a negative correlation with EI and resilience, according to the results, and resilience acts as a mediator between EI and perceived stress. In order to provide a whole picture of stress and possible treatments, the authors argue that all three factors must be included.

Sen et al (2020) investigated Stress and emotional intelligence (EI) in an Indian research of college freshmen majoring in arts and sciences. Academic

achievement, social-demographic characteristics, emotional intelligence, and stress levels were among the variables studied. The study's lack of a correlation between EI and stress is intriguing. A small positive link was found between EI and academic success, though. Interesting demographic tendencies were indeed uncovered by the investigation. Emotional intelligence was higher among females, seniors, youth group members, and children of moms working in knowledge-based occupations. This study identifies subsets of students who might gain from interventions designed to increase emotional intelligence and provides preliminary evidence that EQ may have a positive effect on academic performance. To validate the association between EI and stress management in this group, however, additional research is required.

Miller (2021) studied the Perceived Stress Scale (PSS-10), a widely used tool for measuring stress. However, the scale has not been adequately studied for its ability to differentiate between transient changes in stress and long-term stress-related personality traits. Researchers used generalizability theory (G theory) to address this issue. The study found that PSS-10 scores were reliable over time, with annoyance and self-confidence being the most dynamic stress indicators. The study suggests that more research is needed to measure perceived stress as a state for determining the efficacy of treatments for stress reduction.

Oducado et al (2021) found that over half of Filipino teachers experienced moderate COVID-19 stress, with male teachers reporting lower levels. The study also found a negative association between stress and self-rated health, while a positive association was found between teachers' perceptions of their susceptibility to COVID-19 and their stress levels. The findings underscore the need for stress management skills for educators to better cope with the pandemic.

Sutch (2022) examined the correlation between EI and reported stress levels among Australian dental, pharmacy, and nursing final-year students intending to

fill that informational void by The study's overarching goal is to help future healthcare providers better manage stress by gaining a better grasp of the ways in which emotional intelligence (EI) affects stress levels in specific student populations. Emotional intelligence (EI) is crucial for healthcare workers to deal with the stress that comes with their job, according to the available evidence. The emotional demands of patient care, complicated job situations, and academic pressure all contribute to this stress. Stress levels among healthcare students, especially those enrolled in pharmacy and nursing programmes, are high because of these issues, according to research. Unfortunately, studies investigating the possible protective function of EI in reducing this stress among healthcare students in Australia are scarce.

Harris (2022) examined the relationships between counsellor self-efficacy, emotional intelligence (EI), perceived stress, and other dimensions of these constructs in this particular demographic. In a study with 117 participants, they evaluated counsellor self-efficacy (CASES), emotional intelligence (SSEIT), and perceived stress (PSS) using validated instruments. Results showed that there were positive and statistically significant connections between the emotional intelligence and counsellor self-efficacy subscales. Additionally, a statistically significant correlation between EQ, perceived stress, and self-efficacy was found by multiple linear regression analysis. These results emphasise the significance of EQ and stress management in fostering self-efficacy in counsellors. According to the research, pre-license counsellors report higher levels of self-confidence and competence when they practise emotional intelligence and stress management. Based on this information, training programmes can be designed to emphasise the development of emotional intelligence in addition to counselling skills. This will benefit clients and counsellors alike.

Merida et al (2022) studied the aspects of emotional intelligence (EI) that teachers report as having the greatest impact on their happiness, taking into account both their actual and perceived levels of stress. A total of over 1300 Spanish instructors were asked to fill out a survey that assessed their emotional intelligence. The exam included four main areas: self-emotion appraisal, understanding others' emotions, skillfully employing emotions, and managing emotions. A different scale was used to measure happiness. In addition to teachers' reported stress levels, the study indicated a positive correlation between happiness and all four dimensions of emotional intelligence (EI), and a negative correlation between perceived stress and happy. It is worth noting that after taking into consideration factors such as age, gender, and teaching experience, there were still significant predictors of happiness that were unaffected by perceived stress. In other words, teachers who were skilled in self-awareness, effective emotion regulation, and constructive emotion use reported higher levels of happiness, even after taking stress levels into consideration. These results provide credence to the idea that treatments aimed at improving teachers' specific EI skill can have a positive impact on their well-being.

Correia (2023) studied workplaces impacted by the COVID-19 epidemic, which caused stress and necessitated adaption from employees. Emotional intelligence, and more specifically an individual's innate emotional awareness, may be useful in times of stress management, as this review demonstrates. Nonprofit workers who assist marginalised communities are the subject of this study because of the unique challenges they face on the job, including the high prevalence of compassion fatigue and PTSD. During the pandemic, stress and mental health problems increased among healthcare workers, mental health experts, and forprofit organisations, according to existing studies. However, studies examining the effects of COVID-19 on nonprofit workers that assist vulnerable communities are lacking. To fill this knowledge vacuum, this study will examine

the relationships between these vital employees' emotional intelligence, stress perception, ability to adjust to new situations in the workplace, and secondary traumatic stress. With these results in hand, we can begin to design interventions to help this vital workforce cope with the emotional and psychological toll that the pandemic has taken.

Chakradhar et al (2023) conducted a cross-sectional study on social work students' stress, resilience, and spirituality since the 1990s. The research involved 80 participants from two US public universities. Results showed that academic, economical, familial, and mental health-related stresses affected 51.2% of people. The study found a weak negative association between resilience and perceived stress and a weak positive correlation between spiritual well-being and perceived stress. The findings suggest further investigation and implications for educators.

Khalil et al (2024) explored the working world, nursing students may experience some anxiety during their internships. In this study, we looked at nursing interns to see if emotional intelligence—the capacity to control one's emotions—had any bearing on their levels of stress and happiness. Most of the 200 Egyptian interns surveyed had high emotional intelligence, according to the study's authors. Many of the interns also reported moderate levels of stress and life satisfaction. Interestingly, while emotional intelligence was not directly related to either reduced stress or increased life satisfaction, there was a direct correlation between the two. Emotional intelligence also failed to mitigate the negative effect of stress on happiness. To fully grasp the intricate relationship among stress, emotional intelligence, and wellness among nursing interns, additional studies with bigger samples are required.

## **CHAPTER 3: METHOD**



## **METHOD**

### **AIM:**

The aim of the study is to find the differences in the levels of emotional intelligence and perceived stress among healthcare workers and educators.

### **OBJECTIVES:**

- To Investigate the difference between emotional intelligence and perceived stress levels of healthcare workers and educators.

### **HYPOTHESES:**

There is significant difference in the level of emotional intelligence and perceived stress among healthcare workers and educators.

### **VARIABLES:**

DEPENDENT VARIABLE: Perceived Stress

INDEPENDENT VARIABLE: Emotional Intelligence

CONTROL VARIABLE: Age, Gender, Profession

### **SURVEY SAMPLE:**

50 Healthcare Workers

50 Educators

Age group: young adults

### **RESEARCH DESIGN:**

Between and within group design to see the difference between the groups.

### **RESEARCH ANALYSIS:**

Descriptive mean, Standard Deviation and t test and anova

## **DESCRIPTION OF THE TEST:**

### **EMOTIONAL INTELLIGENCE**

One way to gauge EQ in general is with the Schutte Self-Report Emotional Intelligence Test (SSEIT). Dr. Nicola Schutte and colleagues<sup>1</sup> developed it in 1998, and it has since seen extensive application. You may have heard of this tool called the Assessing Emotions Scale. A 33-item self-report ranging from 1 (strongly agree) to 5 (strongly disagree) is included in the SSEIT for responses. See the following pages for instructions on how to fill out the scale on your own. Being aware that the scale assesses EI may cause you to answer in a biased manner. After you've finished all 33 questions, add their scores to get your final score.

### **UNDERSTANDING THE FINDINGS**

With a standard deviation of around 13, the mean score across numerous big samples is approximately 124. Consequently, extremely low or high scores (below 111) or (above 137) stand out. Women fared much better than males on this test, with a mean score of 131 compared to 125 for men.

### **PERCEIVED STRESS**

One self-report tool for gauging how stressful people find certain life events is the Perceived Stress Scale (PSS). Cohen, Sheldon, Kamarck, and Mermelstein, Robin worked on its development in 1983. Regardless of the particular stresses that people may face, the PSS seeks to capture the subjective feeling of stress. The standard version of the scale has 10 components, however there are variants that include more. In this type of survey, people are asked to rate the frequency with which they have encountered particular emotions and thoughts within a given time range, usually the last 30 days. A person's perception of the frequency and severity of stressors is measured by these items. Higher PSS scores indicate

more severe cases of perceived stress, which can range from 0 to 40. Rather than concentrating on particular sources of stress, the scale assesses how people feel about stress in their lives generally.

### **PROCEDURE:**

1. Participant's informed consent was ensured before they participated in the survey which was administered offline. The questionnaires used to obtain data. Rapport formation also took place which ensured a positive and respectful atmosphere. The participants were also reassured about the confidentiality of their responses, maintaining their privacy and data security.
2. Both questionnaires were distributed along with the necessary materials. Participants were then given instructions on how to complete both the scales and the importance of thoughtful and honest answers was emphasized. Any concerns and doubts were also properly addressed. A quiet and focused environment was created to support accurate responses.
3. The accuracy and completeness of each response were verified to ensure that the data was reliable. Information in the consent form along with the details of the consent form was cross-checked for each participant to ensure further reliability of the responses.
4. Appropriate statistical analysis methods to interpret the responses were used.
5. The data was thoroughly analyzed to see if a relationship exists between the variables.
6. A comprehensive report summarizing the findings, methodologies, and key takeaways from the responses was prepared. Documentation of the procedures followed, including consent protocols, event rapport formation, and confidentiality measures was included in the report. It was also ensured

that the report adhered to ethical guidelines and standards of research conduct.

7. All the collected data remained confidential, ensuring that it was stored securely and accessible only to the authorized ones.

## **CHAPTER 4: RESULT**

## RESULT

Group Statistics

Groups	N	Mean	Std. Deviation	Std. Error Mean	
Perceivedstress	Educators	50	27.72	11.307	1.599
	Health Care workers	50	17.40	7.174	1.015
EI	Educators	50	92.46	32.227	4.558
	Health Care workers	50	120.12	27.401	3.875

## T-Test

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means	
		F	Sig.	t	df
Perceivedstress	Equal variances assumed	.618	.434	5.450	98
	Equal variances not assumed			5.450	82.952
EI	Equal variances assumed	4.520	.036	-4.624	98
	Equal variances not assumed			-4.624	95.529

Independent Samples Test

		t-test for Equality of Means		
		Sig. (2-tailed)	Mean Difference	Std. Error Difference
Perceivedstress	Equal variances assumed	.000	10.320	1.894
	Equal variances not assumed	.000	10.320	1.894
EI	Equal variances assumed	.000	-27.660	5.982

Equal variances not assumed	.000	-27.660	5.982
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**Independent Samples Test**

		t-test for Equality of Means	
		95% Confidence Interval of the Difference	
		Lower	Upper
Perceivedstress	Equal variances assumed	6.562	14.078
	Equal variances not assumed	6.553	14.087
EI	Equal variances assumed	-39.532	-15.788
	Equal variances not assumed	-39.535	-15.785

**Test of Homogeneity of Variances**

	Levene Statistic	df1	df2	Sig.
Perceivedstress	.618	1	98	.434
EI	4.520	1	98	.036

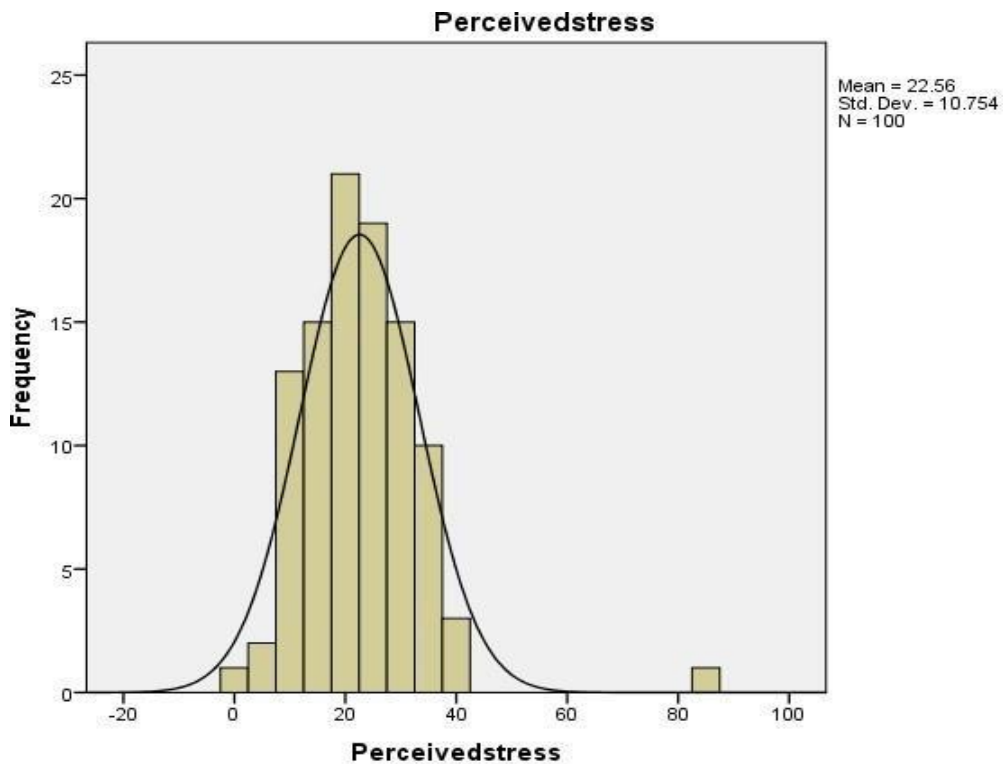
**ANOVA**

		Sum of Squares	df
Perceived stress	Between Groups (Combined)	2662.560	1
	Linear Term Contrast	2662.560	1
	Within Groups	8786.080	98
	Total	11448.640	99
EI	Between Groups (Combined)	19126.890	1
	Linear Term Contrast	19126.890	1
	Within Groups	87679.700	98
	Total	106806.590	99

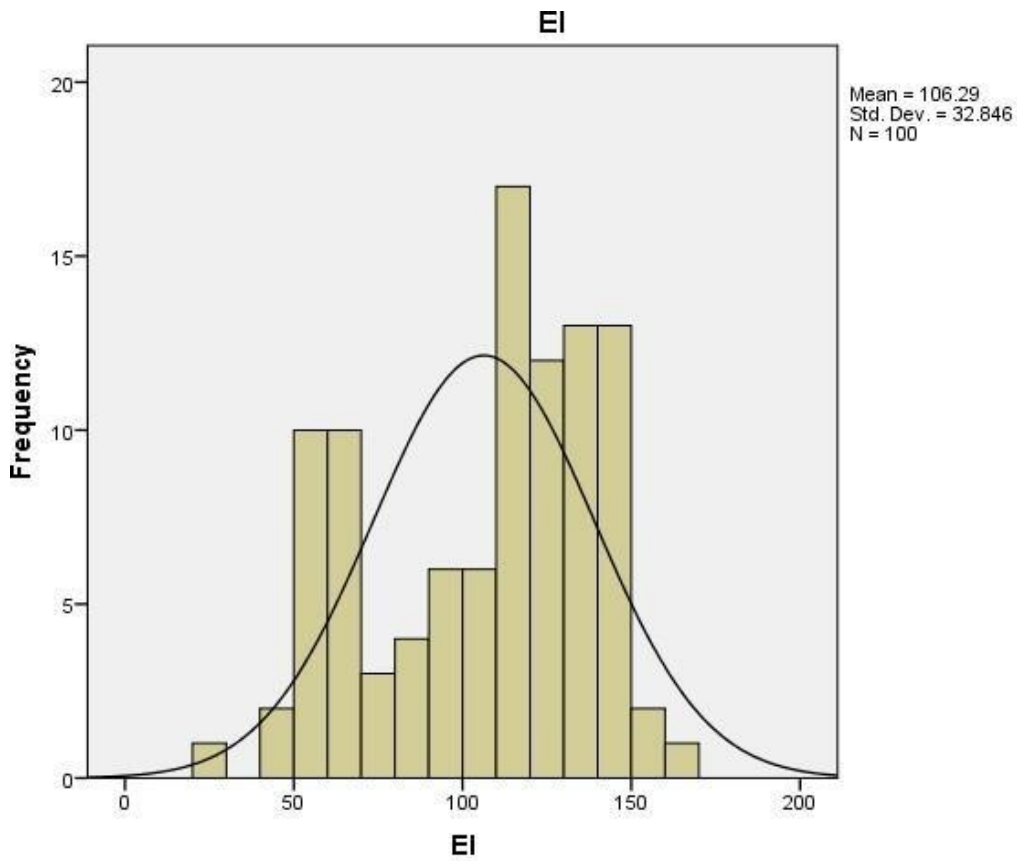
ANOVA

		Mean Square	F	Sig.
Perceivedstress	(Combined)	2662.560	29.698	.000
	Between Groups			
	Linear Term Contrast	2662.560	29.698	.000
	Within Groups			
	Total	89.654		
EI	(Combined)	19126.890	21.378	.000
	Between Groups			
	Linear Term Contrast	19126.890	21.378	.000
	Within Groups			
	Total	894.691		

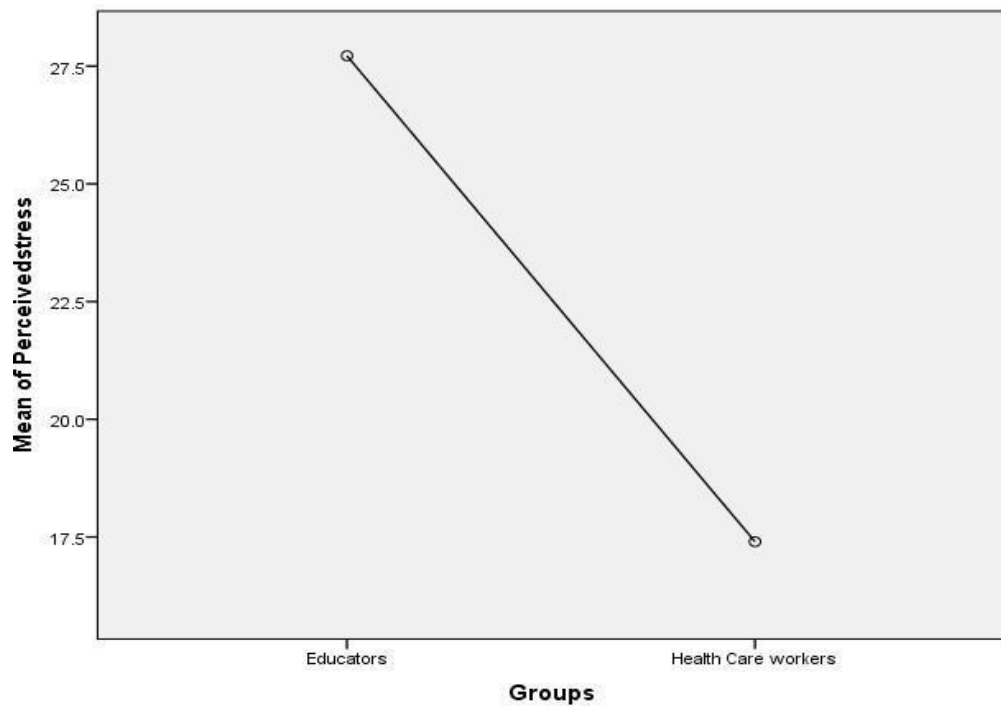
Histogram







### Means Plots



## CHAPTER 5: DISCUSSION

## **DISCUSSION**

This study uses 50 educators and 50 healthcare workers' perceived stress and EI scores. The 100-person sample size provides for more robust analysis than smaller datasets. The offered output includes descriptive statistics, histograms, t-tests, and ANOVA findings that compare emotional intelligence (EI) and perceived stress levels between healthcare workers and educators. Now, let's analyse the outcomes and examine their consequences:

### **STATISTICAL ANALYSIS**

Regarding felt stress, the mean for educators is 27.72 with a standard deviation. The deviation is equal to 11.307. The mean of healthcare professionals is 17.40 with a standard deviation. The deviation is 7.174.

Regarding emotional intelligence, the mean score for educators is 92.46 with a standard deviation. The deviation is equal to 32.227. The mean of healthcare workers is 120.12, with a standard deviation. The deviation is equal to 27.401. These figures offer a concise overview of the average and range of emotional intelligence (EI) and perceived stress levels in both groups. Healthcare professionals generally exhibit elevated emotional intelligence while experiencing lower levels of perceived stress in comparison to educators.

### **HISTOGRAMS:**

Histograms depict the dispersion of data. In this instance, they demonstrate the distribution of felt stress and emotional intelligence within each group.

## STATISTICAL ANALYSIS USING THE INDEPENDENT SAMPLES T-TEST:

The t-tests analyse the average levels of reported stress and emotional intelligence (EI) among healthcare workers and educators, and compare them.

There is a statistically significant difference in felt stress between the two groups ( $p < 0.05$ ). Regarding EI, there is a notable and statistically significant distinction between the two groups ( $p < 0.05$ ). The results suggest that there are notable disparities in perceived stress and emotional intelligence (EI) between healthcare workers and educators.

## ANALYSIS OF VARIANCE (ANOVA):

ANOVA examines whether there are statistically significant disparities in means among several groups. The between-groups variance for felt stress is statistically significant ( $p < 0.05$ ). The between-groups variance for EI is statistically significant at a significance level of  $p < 0.05$ . These findings provide additional evidence that there are substantial disparities in both perceived stress and emotional intelligence (EI) between the two groups. In general, the results indicate that healthcare professionals generally possess greater emotional intelligence and experience lower levels of perceived stress in comparison to educators. This may be attributed to the inherent characteristics of different occupations, divergent employment requirements, or distinct coping strategies. Gaining insight into these distinctions can guide treatments and support tactics customised to the specific requirements of each group, potentially enhancing overall welfare and work contentment.

## FREQUENCIES

Teachers and healthcare professionals' subjective stress and EI scores are revealed by the Frequencies table. A full summary of major findings: The scores range

from 0 to 87, demonstrating that educators and healthcare workers have a wide range of perceived stress levels. This shows that many people may be stressed. Without histograms, it's hard to tell if the distribution is normal, skewed, etc.

Emotional Intelligence (EI): EI scores are 25–165, wider than perceived stress. This wider range suggests more EI variability in both groups. Each group's mean, median, and standard deviation must be examined to determine the data's central tendency and spread.

### INDEPENDENT-SAMPLE T-TEST

T-Test results, including equal and unequal variances, are essential for understanding educator-healthcare worker stress and EI differences. A detailed analysis:

Perceived Stress: If Levene's test shows similar variances in both groups, interpret T-Test results as equal variances have been assumed. A significant difference ( $p\text{-value} < 0.05$ ) indicates that educators experience higher perceived stress than healthcare workers. The effect size (Cohen's  $d$ ) can also quantify this difference. Consider the T-Test assuming unequal variances if Levene's test shows unequal variances. A significant  $p\text{-value} (< 0.05)$  indicates a significant difference in perceived stress between groups, but the mean difference may require further interpretation due to unequal variances.

### INDEPENDENT-SAMPLE T-TEST

Emotional Intelligence (EI) T-Test results, like perceived stress, rely on Levene's test for variance homogeneity. A significant difference ( $p\text{-value} < 0.05$ ) with equal variances indicates that educators have a lower EI than healthcare workers. A significant  $p\text{-value} (< 0.05)$  indicates a significant difference in EI between

groups, but the mean difference may need further interpretation due to unequal variances.

## MEANS PLOTS

Means chart is a helpful visual aid. These plots represent the average perceived stress and EI scores for both educators and healthcare workers. By graphically comparing the means and the dispersion of the data points around the means, we can acquire a clearer picture of the group differences.

The results of this investigation, considering the sample size of 50 educators and 50 healthcare workers, offer useful insights into potential group differences in perceived stress and emotional intelligence. Here's a full description of the findings and their implications:

### Perceived Stress and Educators:

The findings from the T-Test and ANOVA, if statistically significant, would show that educators experience higher levels of perceived stress compared to healthcare workers. This correlates with previous studies in the field of education, which identifies different stressors faced by educators, such as workload expectations, student behavior difficulties, standardized testing pressures, and lack of resources. Burnout, characterised by emotional depletion, depersonalisation, and decreased accomplishment, can result from chronic stressor exposure.

There are several interpretations for these findings. Teachers may face high demands with inadequate resources and support. Teachers may also struggle with classroom behaviour, various student needs, and complex parent-administrator interactions. These variables can increase stress.

Education professionals may report higher felt stress and worse emotional intelligence than healthcare practitioners. Factors contributing to these stress

levels include workload juggling, disruptive student behavior, and standardised testing. Teachers may have lower emotional intelligence (EI) scores but can improve their handling of demanding environments through self-awareness, emotional self-regulation, intrinsic motivation, empathy, and social skills.

Educators with poorer EI can reduce stress by identifying stress causes and implementing coping techniques. However, self-reported or observational measures of emotional intelligence could be used in future studies. Emotional self-regulation allows educators to remain calm and composed in challenging settings. Empathy is essential for fostering strong classroom interactions and a supportive learning environment.

Healthcare workers, while demonstrating superior emotional intelligence, are not immune to stress. Key stressors not captured by perceived stress scores include long hours and unpredictable schedules, emotional strain and moral pain, witnessing pain, and dealing with challenging patients and families. Workforce management solutions that limit the detrimental impact of long hours and shift work on HCWs' sleep and personal lives could be vital for reducing stress levels.

Compassion fatigue, a condition of emotional depletion marked by a diminished ability for empathy, is a potential consequence of emotional strains faced by HCWs. Implementing support systems like peer support groups, access to mental health services, and mindfulness training can help HCWs manage compassion fatigue and preserve their emotional resilience.

Healthcare workers may exhibit stronger emotional intelligence compared to educators, as their profession requires excellent emotional intelligence skills, such as effective communication, empathy, self-regulation, and social skills.

Healthcare training and professional development programs emphasize the development of these abilities, and frequent interactions with patients and families can help enhance these skills. However, educators may report more perceived stress and potentially weaker emotional intelligence compared to healthcare workers. Healthcare workers may display stronger empathy, but qualitative studies could explore how they display empathy in diverse clinical circumstances. Self-regulation under pressure is also crucial for healthcare workers, as they manage high-pressure situations and important decision-making.

Educators may experience higher levels of perceived stress due to workload overload, administrative tasks, grading, and standardized testing requirements. Qualitative studies could reveal the specific pressures influencing educators, such as disruptive classroom behavior, pressure to meet standardized testing benchmarks, feeling under-resourced, and managing student mental health concerns. High stress can have harmful effects on educators' well-being, leading to burnout, physical health problems, absenteeism, and turnover.

Emotional intelligence (EI) is crucial in various fields, including education, healthcare, and healthcare workers. Educators with higher EI scores can identify stress triggers and use coping methods, while healthcare workers face emotional demands such as patient suffering, difficult decisions, and communication challenges. Emotional intelligence skills can help educators manage stress, maintain calm in tough situations, and foster a healthy learning environment.

Healthcare workers, on the other hand, need to be more emotional-aware and have strong communication, active listening, and conflict resolution skills to interact effectively with patients, families, and colleagues. Qualitative studies could explore how healthcare workers demonstrate empathy in different clinical



scenarios, self-regulation skills to remain calm in high-pressure situations, and intrinsic motivation to help others and improve patient outcomes.

High EI can help healthcare workers reduce stress and burnout, enhance patient care, and improve team dynamics. Strong EI abilities can help educators manage stress more effectively, leading to reduced burnout and enhanced well-being. Additionally, strong communication and empathy can lead to stronger patient-provider interactions and improved healthcare outcomes.

EI skills play a significant role in reducing stress and burnout in various fields, including education, healthcare, and healthcare. Further research and understanding of these skills can provide a more comprehensive understanding of their application in various professions.

The study provides a snapshot of perceived stress and emotional intelligence among healthcare workers, highlighting the importance of understanding the relationship between stress and emotional intelligence. Long hours and shift work can disrupt sleep habits, leading to exhaustion and damage overall well-being. Chronic exposure to suffering can lead to compassion fatigue, a condition of emotional depletion marked by a diminished ability for empathy. Workplace violence can also negatively affect emotional well-being.

Emotional intelligence can serve as a buffer against stress, empowering healthcare workers to cope with stress more successfully. However, chronic stress can impair emotional intelligence, creating a vicious cycle. Interventions targeting both stress and emotional intelligence are likely to be most helpful in increasing the well-being of healthcare workers.

Perceived stress scores have limitations, such as subjectivity and social desirability bias. A multi-method approach can help develop evidence-based interventions to reduce stress, enhance emotional intelligence, and promote well-being. Supportive work environments, professional development opportunities, and policy improvements can help healthcare workers navigate their professions with better resilience and well-being. Advocacy initiatives can encourage policies that support the well-being of these critical professions.

The conversation highlights the need for further research and action to address the stress and emotional intelligence issues faced by educators and healthcare workers. Investing in research funding, building collaborative partnerships, prioritizing education and training, promoting open communication and support systems, and elevating the conversation are essential steps towards addressing these challenges.

Educators face higher reported stress compared to healthcare workers due to workload overload, student behavior management, lack of resources and support, standardized testing, and the evolving technology environment. Chronic stress can lead to burnout, physical health problems, absenteeism and turnover, reduced creativity and innovation, and a less engaging learning environment for students.

Healthcare professionals face emotional demands, long hours, shift work, heavy workloads, workplace violence, and limited resources and staffing shortages. These factors can lead to compassion fatigue, burnout, sleep disturbances, exhaustion, and mental health issues. Workload management can also be challenging, with demanding schedules leading to feelings of under pressure and rushed care.

Workplace violence can result from verbal or physical abuse from patients or families experiencing stress or emotional distress. Limited resources and staffing shortages can exacerbate stress levels for healthcare workers, making them feel stretched thin and unable to provide the quality of care they strive for.

Investing in the well-being of educators and healthcare workers is crucial for creating a healthier work environment and ensuring the survival of these vital professions.

Chronic stress can significantly impact healthcare workers' well-being, leading to compassion fatigue, burnout, medical errors, substance addiction, and high turnover rates. These stressors can compromise patient care quality and patient outcomes. To mitigate these effects, educators and healthcare workers can implement stress management techniques such as mindfulness practices, time management skills, physical activity, healthy sleep habits, and social support.

Mindfulness training can help educators and healthcare workers manage stress calmly and productively, while time management skills can help prioritize assignments and manage workloads efficiently. Physical activity releases endorphins, boosting mood and reducing anxiety and despair symptoms. Healthy sleep habits, such as creating a regular sleep schedule and maintaining a soothing nighttime ritual, can also enhance sleep quality and reduce stress levels.

Building emotional intelligence is essential for both professions. Educators and healthcare workers can enhance their self-awareness by reflecting on their emotions, identifying triggers, and understanding how emotions affect their thoughts and behaviors. Self-regulation abilities, empathy, motivation, and social skills can help maintain intrinsic motivation and prevent burnout.

Recognizing the harmful impacts of stress on healthcare workers is crucial for their well-being and the quality of care they provide. By implementing stress management techniques, fostering empathy, and enhancing communication and conflict resolution skills, healthcare professionals can create a more supportive and positive environment for their patients.

Workplaces play a crucial role in promoting the well-being of educators and healthcare workers. They can foster a supportive environment that supports emotional well-being and mitigates stress. This includes workload management, work-life balance, access to mental health resources, professional development opportunities, open communication, appreciation and recognition, and collaboration.

Policy changes are necessary to address systemic challenges that lead to stress in these professions. Addressing workload demands, financing for mental health services, implementing workplace violence prevention techniques, and raising public awareness about the issues faced by these professionals can help establish a sustainable future for these vital professions.

Investing in the well-being of educators and healthcare workers generates a ripple effect of positive outcomes that reaches across society. This cascading effect includes improved educational outcomes, enhanced patient care, reduced healthcare costs, a more resilient workforce, and a healthier society.

A call to collective action is necessary to address the intricacies of stress and emotional intelligence within these professions. Individual educators and healthcare workers can take an active part in improving their own well-being by prioritizing self-care, learning stress management skills, and seeking help from

colleagues and mental health specialists. Institutions and healthcare organizations must foster supportive work environments, implement evidence-based interventions, and advocate for policies that promote well-being among their workforce. Policymakers and public advocacy groups can play a critical role in implementing legislation that addresses workload demands, provides financing for mental health services, and promotes workplace safety for educators and healthcare workers.

By working together, we can create a future where educators and healthcare workers are enabled to thrive, contributing to a better, more resilient society for everyone.

## **CHAPTER 6: CONCLUSION**

## **CONCLUSION**

Concluding the study, significant differences in emotional intelligence (EI) and perceived stress levels were explored between healthcare workers and educators. By utilising descriptive statistics, t-tests, ANOVA, and thorough analyses, a number of significant discoveries were uncovered, providing insight into the distinct obstacles and advantages encountered by individuals in these crucial industries.

### Discrepancies in Emotional Intelligence:

According to the results, healthcare workers exhibited notably greater emotional intelligence than educators. This result highlights the significance of emotional intelligence in careers that require empathy, interpersonal skills, and emotional resilience. Healthcare professionals working in emotionally intense environments, like patient care settings, demonstrate a strong skill set in handling complex interpersonal relationships, coping with stress, and staying composed during difficult circumstances.

On the other hand, educators, despite having their own valuable skills and expertise, generally showed lower levels of emotional intelligence. This difference could be explained by the distinct stressors and requirements that come with working in the field of education. Dealing with a variety of student populations, administrative demands, and classroom management issues can be emotionally and mentally taxing for educators. Interventions focused on improving emotional intelligence skills among educators are crucial to provide them with the necessary tools to cultivate positive relationships with students, handle professional challenges efficiently, and reduce the negative impact of workplace stress.

### Stress Disparities in Perception:

In addition, the study found that educators experienced notably higher levels of perceived stress in comparison to healthcare workers. This discovery emphasises how stress is widespread in the education sector and emphasises the importance of specific interventions to help educators' well-being. Factors that may lead to educators experiencing high levels of stress could be workload demands, resource constraints, accountability standards, and the emotional attachment to their students' achievements.

On the other hand, healthcare workers, although they experience stress, generally showed lower levels of perceived stress. This discovery is especially remarkable considering the challenging and high-stress environment of healthcare professions. Healthcare professionals frequently handle challenging scenarios, make impactful choices, and manage the emotional strain of caring for patients. Nevertheless, the research indicates that healthcare workers might have coping mechanisms, resilience strategies, and support networks that help reduce the negative effects of stress, resulting in lower perceived stress levels in comparison to educators.

### Implications for Intervention and Support:

Highlighting the differences in emotional intelligence and perceived stress levels among healthcare workers and educators emphasises the necessity for customised interventions and support systems to tackle the distinct needs and obstacles encountered by individuals in these fields.

Interventions focused on stress management, emotional regulation, and self-care are crucial for educators to reduce the impact of workplace stress and avoid burnout. Equipping educators with resources like mindfulness training,



counselling services, and peer support networks can help them build resilience, enhance well-being, and effectively carry out their responsibilities.

On the other hand, improving emotional intelligence skills among healthcare workers can lead to positive results in patient care, team dynamics, and job satisfaction. By delving into training programmes that emphasise empathy, communication, and stress resilience, healthcare professionals can acquire the necessary interpersonal skills to navigate intricate healthcare settings adeptly and deliver compassionate, patient-centered care.

#### Exploring Organisational Policies and Practices:

Understanding the impact of organisational policies and practices is essential for promoting the well-being of professionals in various fields. Educational institutions and healthcare facilities should focus on promoting employee wellbeing through creating a supportive culture, offering stress management resources, and tackling systemic workplace stressors.

It is crucial for educational institutions, healthcare organisations, policymakers, and relevant stakeholders to work together in order to create thorough strategies that can effectively tackle workplace stress and improve the resilience of professionals in both sectors. Emphasising the importance of educators and healthcare workers' well-being can help organisations build a strong workforce, boost job satisfaction, and lead to better results for both employees and the communities they support.

#### Future Directions:

This study offers valuable insights into the differences in emotional intelligence and perceived stress levels among healthcare workers and educators. Future research could investigate other factors that impact well-being in these professions. Conducting longitudinal studies to track changes in emotional

intelligence and perceived stress over time, qualitative inquiries to explore the lived experiences of professionals, and intervention studies to assess the effectiveness of support programmes are necessary to enhance our comprehension of workplace well-being and guide evidence-based interventions.

Conclusively, tackling the differences in emotional intelligence and perceived stress among healthcare workers and educators necessitates a comprehensive strategy involving personal interventions, support from organisations, and systemic adjustments. By focusing on the well-being of professionals in these crucial sectors, we can develop a strong, empathetic, and efficient workforce, leading to positive results for individuals, organisations, and society in general.

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## **APPENDIX**

- Emotional Intelligence Questionnaire
- Perceived Stress Scale
- Informed Consent Form



# The Schutte Self Report Emotional Intelligence Test (SSEIT)

Emotional intelligence, interpersonal relationships, soft skills

## What is this?

The Schutte Self-Report Emotional Intelligence Test (SSEIT) is a method of measuring general Emotional Intelligence (EI). It was created in 1998 by Dr. Nicola Schutte and her colleagues<sup>1</sup> and is widely used. This instrument is also known as the Assessing Emotions Scale.

## Why is this important?

Emotional intelligence (EI) is the ability to understand and to regulate emotions in oneself and in others.

High EI is associated with more optimism, greater impulse control, better mood, more empathic perspective taking, more closeness and warmth in relationships, more persistence under frustrating circumstances, and other similar outcomes.

In education, EI is increasingly regarded as plus in a teacher's qualifications, both as a self-management tool, a perception enhancement device and the basis for a more balanced rapport with young people and other adults.

## What can I use it for?

This self-assessment tool will give you an overall rating of your Emotional Intelligence. Since EI can be improved with appropriate training – e.g. in empathy or in self-regulation of emotions – you may use it as a starting point to work on your EI and to check your progress.

This is a resource you should only use for your own personal and professional development. It is not intended to be applied to your students.

## How can I use it?

The SSEIT includes a 33-item self-report using a 1 (strongly agree) to 5 (strongly disagree) scale for responses.

You can complete the scale yourself — see the following pages. Keep in mind that your responses may be biased by knowing that the scale measures EI.

Once you have completed it, add the scores of the 33 items to obtain your total score.

## How to read the results

The mean score across many large samples is about 124, with a standard deviation of about 13. So scores below 111 or above 137 are unusually low or high. Men and women perform differently in this test, with women scoring significantly higher (mean=131) than men (mean=125).



- <sup>1</sup> Schutte, N. S., Malouff, J. M., Hall, L. E., Haggerty, D. J., Cooper, J. T., Golden, C. J., & Dornheim, L. (1998). Development and validation of a measure of emotional intelligence. *Personality and Individual Differences*, 25, 167–177.



## The Schutte Self Report Emotional Intelligence Test (SSEIT)

Instructions: Indicate the extent to which each item applies to you using the scale in the five columns to the right of each item.

	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
1. I know when to speak about my personal problems to others	1	2	3	4	5
2. When I am faced with obstacles, I remember times I faced similar obstacles and overcame them	1	2	3	4	5
3. I expect that I will do well on most things I try	1	2	3	4	5
4. Other people find it easy to confide in me	1	2	3	4	5
5. I find it hard to understand the non-verbal messages of other people*	5	4	3	2	1
6. Some of the major events of my life have led me to re-evaluate what is important and not important	1	2	3	4	5
7. When my mood changes, I see new possibilities	1	2	3	4	5
8. Emotions are one of the things that make my life worth living	1	2	3	4	5
9. I am aware of my emotions as I experience them	1	2	3	4	5
10. I expect good things to happen	1	2	3	4	5
11. I like to share my emotions with others	1	2	3	4	5
12. When I experience a positive emotion, I know how to make it last	1	2	3	4	5
13. I arrange events others enjoy	1	2	3	4	5
14. I seek out activities that make me happy	1	2	3	4	5
15. I am aware of the non-verbal messages I send to others	1	2	3	4	5
16. I present myself in a way that makes a good impression on others	1	2	3	4	5
17. When I am in a positive mood, solving problems is easy for me	1	2	3	4	5
18. By looking at their facial expressions, I recognize the emotions people are experiencing	1	2	3	4	5
19. I know why my emotions change	1	2	3	4	5
20. When I am in a positive mood, I am able to come up with new ideas	1	2	3	4	5
21. I have control over my emotions	1	2	3	4	5
22. I easily recognize my emotions as I experience them	1	2	3	4	5
23. I motivate myself by imagining a good outcome to tasks I take on	1	2	3	4	5
24. I compliment others when they have done something well	1	2	3	4	5
25. I am aware of the non-verbal messages other people send	1	2	3	4	5
Subtotal p. 2	1	2	3	4	5

26. When another person tells me about an important event in his or her life, I almost feel as though I have experienced this event myself
-

	Strongly disagree	Disagree	Neither disagree nor agree	Agree	Strongly agree
27. When I feel a change in emotions, I tend to come up with new ideas	1	2	3	4	5
28. When I am faced with a challenge, I give up because I believe I will fail*	5	4	3	2	1
29. I know what other people are feeling just by looking at them	1	2	3	4	5
30. I help other people feel better when they are down	1	2	3	4	5
31. I use good moods to help myself keep trying in the face of obstacles	1	2	3	4	5
32. I can tell how people are feeling by listening to the tone of their voice	1	2	3	4	5
33. It is difficult for me to understand why people feel the way they do*	5	4	3	2	1
Subtotal p. 3					
Total score					

Please note that items 5, 28, and 33 feature a reverse scale (it's not a mistake!), where "Strongly disagree" = 5 and "Strongly agree" = 1.

# Perceived Stress Scale

A more precise measure of personal stress can be determined by using a variety of instruments that have been designed to help measure individual stress levels. The first of these is called the **Perceived Stress Scale**.

The Perceived Stress Scale (PSS) is a classic stress assessment instrument. The tool, while originally developed in 1983, remains a popular choice for helping us understand how different situations affect our feelings and our perceived stress. The questions in this scale ask about your feelings and thoughts during the last month. In each case, you will be asked to indicate how often you felt or thought a certain way. Although some of the questions are similar, there are differences between them and you should treat each one as a separate question. The best approach is to answer fairly quickly. That is, don't try to count up the number of times you felt a particular way; rather indicate the alternative that seems like a reasonable estimate.

**For each question choose from the following alternatives:**

**0 - never    1 - almost never    2 - sometimes    3 - fairly often    4 - very often**

- \_\_\_\_\_ 1. In the last month, how often have you been upset because of something that happened unexpectedly?
- \_\_\_\_\_ 2. In the last month, how often have you felt that you were unable to control the important things in your life?
- \_\_\_\_\_ 3. In the last month, how often have you felt nervous and stressed?
- \_\_\_\_\_ 4. In the last month, how often have you felt confident about your ability to handle your personal problems?
- \_\_\_\_\_ 5. In the last month, how often have you felt that things were going your way?
- \_\_\_\_\_ 6. In the last month, how often have you found that you could not cope with all the things that you had to do?
- \_\_\_\_\_ 7. In the last month, how often have you been able to control irritations in your life?
- \_\_\_\_\_ 8. In the last month, how often have you felt that you were on top of things?
- \_\_\_\_\_ 9. In the last month, how often have you been angered because of things that happened that were outside of your control?
- \_\_\_\_\_ 10. In the last month, how often have you felt difficulties were piling up so high that you could not overcome them?

## Figuring Your PSS Score

You can determine your PSS score by following these directions:

- First, reverse your scores for questions 4, 5, 7, and 8. On these 4 questions, change the scores like this:  
$$0 = 4, 1 = 3, 2 = 2, 3 = 1, 4 = 0.$$
- Now add up your scores for each item to get a total. **My total score is \_\_\_\_\_.**
- Individual scores on the PSS can range from 0 to 40 with higher scores indicating higher perceived stress.
  - ▶ Scores ranging from 0-13 would be considered low stress.
  - ▶ Scores ranging from 14-26 would be considered moderate stress.
  - ▶ Scores ranging from 27-40 would be considered high perceived stress.

The Perceived Stress Scale is interesting and important because your perception of what is happening in your life is most important. Consider the idea that two individuals could have the exact same events and experiences in their lives for the past month. Depending on their perception, total score could put one of those individuals in the low stress category and the total score could put the second person in the high stress category.

**Disclaimer:** The scores on the following self-assessment do not reflect any particular diagnosis or course of treatment. They are meant as a tool to help assess your level of stress. If you have any further concerns about your current well being, you may contact EAP and talk confidentially to one of our specialists.

State of New Hampshire  
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