



Investigating The Relationship Among Peer Support, Burnout And Social Intelligence

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Abstract: The study investigates the relationship between peer support, burnout, and social intelligence. The research's novelty lies in its unique combination of variables conducted in the Indian context extending beyond prior research which has predominantly focused on healthcare professionals. The study expands over a diverse sample from different industries, working places and job roles mostly between the age group of 22 to 55 years. Data are gathered using the Multidimensional Scale of Perceived Social Support (MSPSS) to assess peer support, the Tromsø Social Intelligence Scale (TSIS) to measure social intelligence, and the Oldenburg Burnout Scale (OLBI) to evaluate burnout levels. The study proposes three key hypotheses: there will be a significant relationship between (1) peer support and burnout (2) burnout and social intelligence, and (3) social intelligence and peer support. The findings indicate three significant correlations: a moderate positive relationship exists between peer support and social intelligence, a negative correlation between peer support and burnout and a negative correlation between social intelligence and burnout. The study reveals that improved peer support mitigates burnout, while higher social intelligence facilitates stress management. These insights have practical applications in educational and professional settings, such as implementing peer mentorship programs, integrating social intelligence training and developing workplace policies that support a positive environment.

Keywords - peer support, burnout, social intelligence, working professionals, positive environment

INTRODUCTION

Humans are inherently social creatures exhibiting a meaningful reliance on healthy and positive relationships and nurturing environment. The availability of peer support facilitates performance, enhances productivity and improves daily functioning. Effective functioning and maintaining peer relations requires intelligence. The dimensions involving emotional intelligence, spiritual intelligence and social intelligence facilitate interactions and performance. The individuals possessing the elements of intelligence accompanied with peer support, they excel. Conversely, the absence of these dimensions of intelligence can lead to diminished performance and escalated the risk of burnout affecting performances and interactions.

While the previous studies predominantly focused on peer support or social intelligence in isolation concerning the burnout. For instance, a study found that teachers with lower social intelligence were more vulnerable to burnout (Datta, 2024). Another study demonstrated that nurses who are actively participating in peer supervision experience reduced psychological distress and depersonalization (Gamache et al., 2023). Moreover, a study revealed that a significant and inverse relationship was found between emotional

intelligence and job burnout and negligible relationship exists between emotional intelligence with social support and job burnout with social support among the nurses in the medical and educational center of Medical Sciences (Kochaksaraei et al., 2020). Therefore, limited / no research has analyzed the combined effect of peer support and social intelligence on burnout and thus, representing a research gap. Moreover, the previous studies focused on the medical students, nursing educators and educational setup and thus overlooked diverse employee groups leaving this segment insufficiently explored. Therefore, the study seeks to explore the understanding essential interactions, addressing a significant existing gap contributing to the novelty aspect of the present study.

The aim of the study is to examine the relationship between peer support, social intelligence and burnout, in order to assess the impact of peer support on burnout levels, to evaluate the role of social intelligence in managing the burnout and contribute to the development of the strategies, policies and programs promoting a healthy work environment.

The objective of the present study is to evaluate the interrelationship between the peer support, burnout and social intelligence. Through examination, this pertinent aspect, the paper will contribute to the unexplored research domain on these variables and deliver useful findings peer mentorship programs, training and working policies and individual developmental strategies.

The study incorporated standardized questionnaires which includes the Multidimensional Scale of Perceived Social Support (MSPSS) to assess peer support, the Tromsø Social Intelligence Scale (TSIS) is used to measure social intelligence, and the Oldenburg Burnout Scale (OLBI) to evaluate burnout levels.

The present investigation proposes the following three key hypotheses (1) a significant relationship between peer support and burnout, (2) a significant relationship between burnout and social intelligence, and (3) a significant relationship between social intelligence and peer support.

In a study conducted by Sunheri and Singh (2025) on 350 adolescents in India using the Tromsø Social Intelligence Scale (TSIS) and Peer Relationship Scale for Adolescents in which it was found that adolescents with high social intelligence (SI) are capable of developing a strong peer relationship outlined by trust, intimacy and mitigated peer conflict. In alignment with the previous study, Raniand and Sangwan (2016) conducted a study with 240 adolescents India where they found that the key components of social intelligence were associated to pro-social behavior and thus nurturing trust and cooperation and unfavorably associated with bullying and persecution. This alignment is supported by a study conducted by Nayak and Yadav (2018) examining 659 students across multiple disciplines which revealed that transitioning adults with high SI are capable to establish stronger peer bonds although the students with low SI often struggles with maintaining an optimal relationship. The study also focused on the gender where female students exhibited a higher SI as compared to males. Moreover, Farooq et al. (2022) conducted a study in Pakistan which investigated the role of peer tutoring as a strategy presenting that structured peer learning enhances social sensitivity, communication, leadership and confidence which aligns with the study of Sunheri and Singh (2025) in accentuating the role of the networks of peers in improving the SI.

However, the study is inconsistent with Ismail et al. (2020) investigated on multiple intelligences including Emotional Intelligence (EI), Social Intelligence (SI), Physical intelligence, Spiritual intelligence in relation to burnout among the Secondary school teachers in Malaysia in which the findings revealed that Emotional Intelligence (EI), and spiritual intelligence (SQ) were the most significant factors for the burnout. Moreover, higher physical intelligence and resilience preserve psychological resources more optimally. However, social intelligence (SI) had no direct impact on burnout and thus, inconsistent with studies affirming that social intelligence diminishes stress. This incongruity suggests that while SI improves interpersonal relationships, its role in diminishing burnout may depend on other contextual factors such as emotional and spiritual intelligence. This study is inconsistent with Ran and Mi (2016) where the study was conducted on the moderating role of Social Intelligence in nurse burnout where it was found that social intelligence reduced the aversive effects of emotional exertion, however the study also revealed an unexpected positive correlation between Emotional Intelligence and burnout indicating that that emotionally intelligent individuals, in spite

of performing well in workplace interactions, still experience exacerbated exhaustion due to the emotional strains of their roles.

This study however aligns with the study of Connors et.al. (2019). The study examined that nurse seeking support demonstrated higher level of burnout suggesting that individuals under severe stress have higher probability to seek help. Interestingly, nurse leaders assisting peer support showed higher level of resilience without increased burnout and thus strengthens the idea that support seeking is often a response to distress rather than a risk-reducing measure. Moreover, the study also highlighted the Resilience In Stressful Events (RISE) program among nurses and discovered that despite of having a low utilization rate, those individuals who were engaged in peer support reported higher level of resilience. Similarly, another study also gave emphasis on programs for instance, Simms et al. (2023) investigated the effectiveness of the Care for Caregivers (CFC) program during the COVID-19 pandemic and revealed that it successfully reduced burnout and promoted workplace support nevertheless, monetary strain and family responsibilities persisted as significant contextual stressors. Spence et al. (2018) explored burnout among anesthesiology residents in Canada, a group experiencing heightened stress. The study pointed out the effectiveness of structured peer support groups (PSGs) in alleviating burnout, enhancing resilience, reduced emotional isolation and emotional validation however, the logistical barriers such as lack of time and high workloads limited the participation and thus reduced the effectiveness of the program. The findings of the study align with the studies of Simms et al. (2023) and Connors et al. (2019) regarding the benefits of peer support programs but at the same time both the studies focused on the structured programs tailored to professional expectations.

Sari et al. (2025) examined the role of peer support and self-compassion in academic burnout of the high school students which revealed that peer support and self-compassion had a negative effect on the academic burnout. Similarly, Rufino et al. (2022) examined a study of college students amidst of Covid-19 which revealed that the strong social support from family, friends and teachers provides a trustworthy-networks during the stressful times specifically during online learning periods. The study also focused on the gender differences with female students reporting higher exhaustion as compared to males.

Similarly, Yu et al. (2021) further conducted a study on academic burnout among college students and emphasized the role of family cohesion and adaptability in reducing academic burnout, showing that a fostering family environment enhances resilience. While peer support was beneficial, its effects were most marked when combined with positive psychological capital (PsyCap), including hope, resilience, optimism, and self-efficacy. Students with high PsyCap managed academic stress more effectively and were less likely to experience burnout. This study is consistent with the study of Rufino et al. (2022) pertaining to the defensive role of social support during the pandemic but inconsistent with Farooq et al. (2022) suggesting that peer interactions enhance Social Intelligence but reducing burnout may require further resources.

RESEARCH METHODOLOGY

This section of the study structures the approach and method emphasizing on how the study is conducted including the participants, materials, procedure and statistical analyses.

Participants

The study emphasized on the working employees from a diverse working culture in India. Participants representing different professions and different sectors like public sector, private sector, government employee and self-employee respectively. The sole inclusion criterion for participation was the full-time working employment and having a working culture. The age range of the participants included in the study was 22 to 55 years.

Random sampling was employed in which the participants were chosen randomly and then few of the participants were excluded. The informed consents were made available to all the participants.

Materials

The study employed three standardized questionnaires including Multi-dimensional Scale of Perceived Social Support (MSPSS) to assess peer support, the Tromsø Social Intelligence Scale (TSIS) to measure social intelligence, and the Oldenburg Burnout Scale (OLBI) to evaluate burnout levels respectively.

MSPSS comprises of 12 items including of 3 subscales (family support, friend support, support of closest people) and each subscale is represented by 4 items. Therefore, the MSPSS measurement tool can be regarded as having a good reliability of Cronbach alpha value of 0.760. Validity test has likewise been conducted using the corrected item-total correlation technique and the coefficient value is more than 0.2 hence, that it can be said that the measurement scale is valid.

Silvera et al. (2001) formulated a 21-item Social Intelligence Scale that has three elements that measure social, social awareness and social information processing utilizing 7 items each, on a 7-point Likert scale (1 = Strongly disagree, 7 = Strongly agree), but 11 items are scored conversely (2, 4, 5, 8, 11, 12, 13, 15, 16, 20, and 21). Silvera et al., also confirmed its content validity and stated the reliability coefficients for the subscales of social information processing, social skills and social awareness, by Cronbach's alpha method, equal to 0.81, 0.86 and 0.79 respectively (Silvera et al., 2001).

The Oldenburg Burnout Inventory (OLBI) formulated by Demerouti in 1999. This questionnaire comprises of 16 items and two dimensions including the disengagement and the exhaustion dimensions and employees both positively and negatively terms. Items 1, 3, 6, 7, 9, 11, 13 and 15 measure the disengagement dimension while the items 2, 4, 5, 8, 10, 12, 14 and 16 indicates the exhaustion dimension. Respondents were required to respond to statements on a 1–4-point scale, where 1 is 'strongly agree' and 4 is 'strongly disagree'. In this study, the Cronbach's Coefficient Alpha for the OLBI was 0.928, with the sub-scales of exhaustion and disengagement having Alpha values of 0.82 and 0.80 respectively. The eight items of the exhaustion sub-scale assess the feelings of emptiness and physical exhaustion experienced by respondents. The disengagement sub-scale is also consisted of eight items and relates to individuals disengaging themselves from work. The Cronbach's Alpha for the exhaustion and disengagement sub-scales was established by Bosman, Rothmann and Buitendach (2005) as being 0.85 and 0.84 respectively, and has been found by Demerouti et al. (2003) to be a reliable and valid instrument, with both convergent and discriminant validity.

Procedure

The data was gathered online using Google Forms. Participants were informed about the general purpose of the study and presented with an informed consent form defining the study's objectives, the data collection methods, and the privacy protections. Participants were notified that the data would be managed confidentially and that they had the right to withdraw from the study even after submitting their responses without any repercussion. After reviewing the form and aggregating to it voluntarily, then participant proceeded with the following phase. The demographic details such as age range, gender, educational qualification and occupations were collected due to the scientific reasons. The participant was allotted flexible time frame and thus allowing to fill the form according to their convenience. However, they were instructed to provide authentic responses. Responding the questionnaire took approximately 7 to 10 minutes. All data were kept confidential and coded numerically in order to maintain the confidentiality. The datasets were stored in encrypted files accessible only to the primary researcher in accordance with ethical guidelines of the most recent version of the Helsinki Declaration (World Medical Association, 2013).

Statistical Analysis

For statistical analysis was initially started in Microsoft Excel where the arbitrary number- coding was done for all the demographic details that were collected from the participants. In addition to number coding, the scoring for each of the questionnaires was completed according to the standardized scoring procedures stated in the manuals of the three questionnaires.

In the next step, descriptive statistics was conducted by using the software JASP {JASP Team (2024). JASP (Version 0.19.) [Computer software]} for all the demographic details that were taken into evaluation, that is, age, gender, yearly income of family in lacs after tax deduction, educational qualification, occupation, family structure, marital status, history of any psychiatric illness or diagnosis and current ongoing of any kind of psychological interventions. Descriptive statistics for peer support and burnout and Social Intelligence was also calculated. The tables of descriptive statistics are provided by including the statistics mean, median, mode, standard error of mean, standard deviation, kurtosis, standard error of kurtosis, skewness, standard error of skewness, range, minimum and maximum. Regarding the inferential statistics, Pearson Product Moment Correlation was performed to assess the relationship among the variables.

RESULTS

The data is collected from 100 participants incorporating random sampling. This section is divided into three parts which reveal the study findings.

SECTION A – DEMOGRAPHICS

This section shows the graphical representations of the demographic details of the participants.

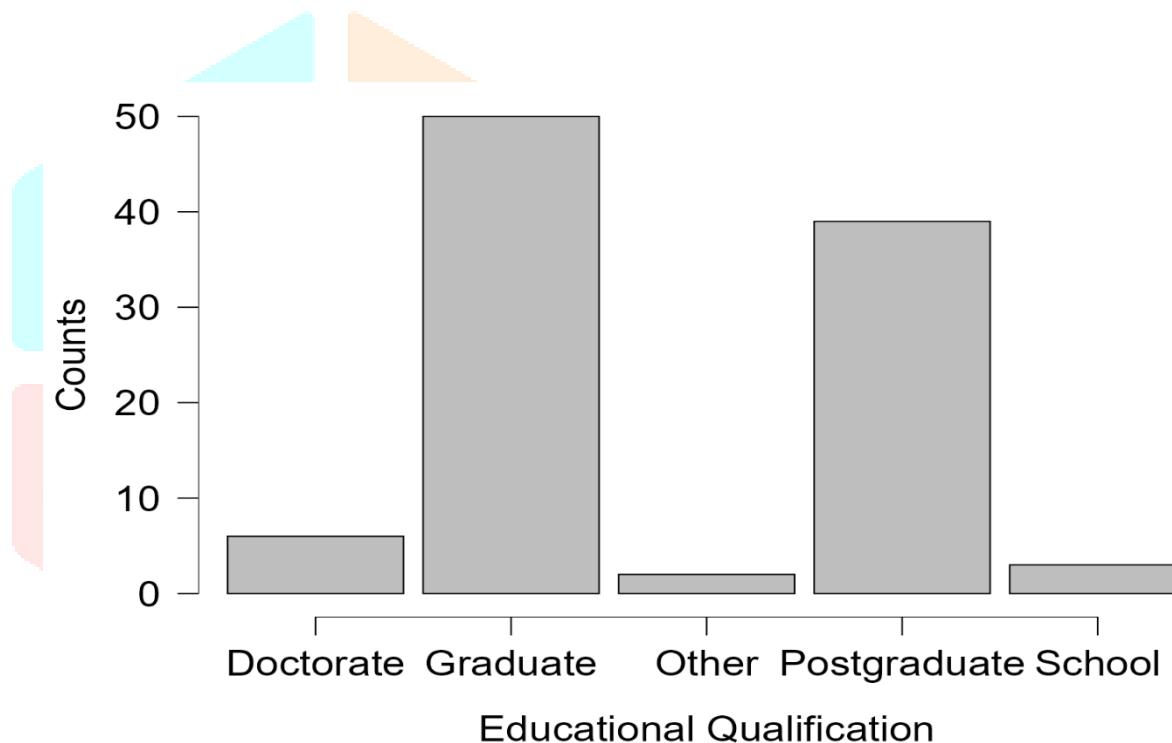


Fig 1: figure showing the Educational Qualification of the participants.

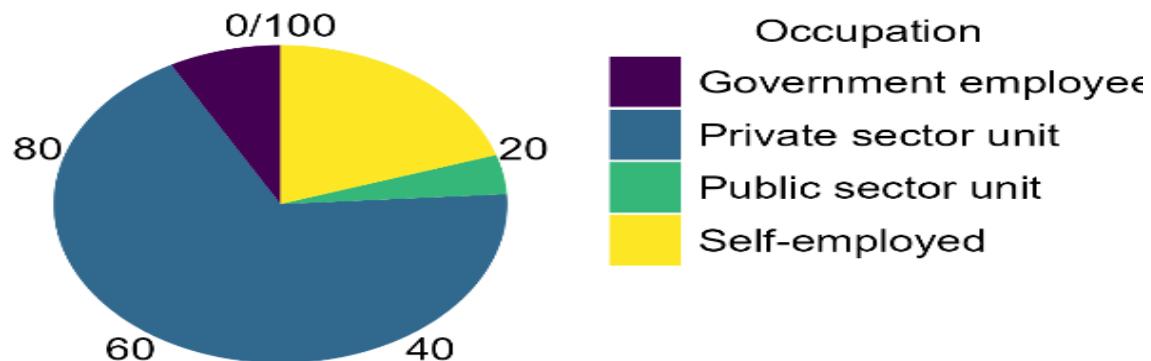


Fig 2: figure showing the different sectors of occupation of the participants.

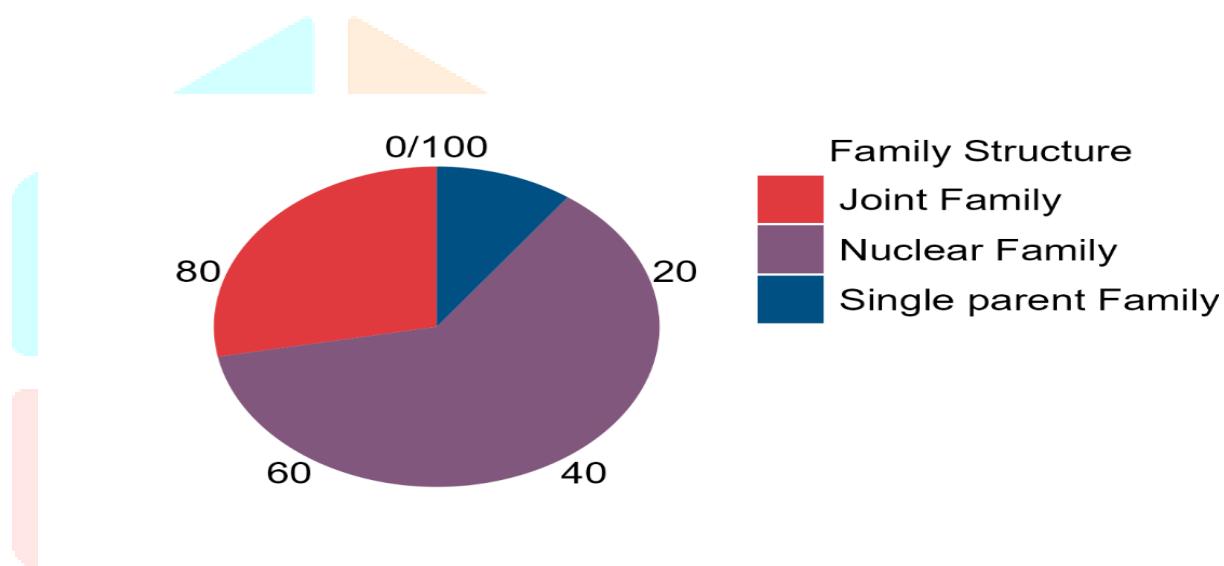


Fig 3: figure showing family structure of the participants.

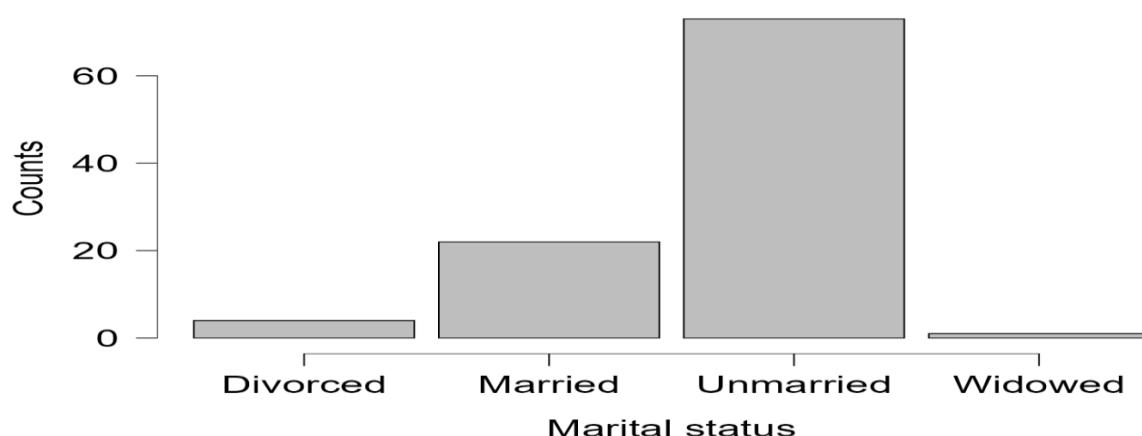


Fig 4: figure showing the marital status of the participants

SECTION B – DESCRIPTIVE STATISTICS

In order to calculate the descriptive statistics, the software JASP version 0.19.3 used ([JASP Team (2024), Version 0.19.3]. the descriptive statistics include mean, median, mode, standard error of mean, standard deviation, kurtosis, standard error of kurtosis, skewedness, standard error of skewedness, range, minimum and maximum. This section shows the descriptive statistics of the demographic details and total scores of Peer support, Burnout and Social intelligence respectively.

Table 1 : The table depicting the demographic details of the participants in the study.

| Descriptive Statistics | Gender | Educational Qualification | Occupation | Monthly Income after tax deduction (in numbers) | Family Structure | Marital Status |
|-------------------------------|--------|---------------------------|------------|---|------------------|----------------|
| Valid | 100 | 100 | 100 | 99 | 100 | 100 |
| Missing | 0 | 0 | 0 | 1 | 0 | 0 |
| Mode | 1.000 | 2.000 | 2.000 | 50000.000 | ^a | 3.000 |
| Median | – | – | – | 45000.000 | – | – |
| Mean | – | – | – | 94289.899 | – | – |
| Std. Error of Mean | – | – | – | 21945.522 | – | – |
| Std. Deviation | – | – | – | 218355.191 | – | – |
| Skewness | – | – | – | 6.543 | – | – |
| Std. Error of Skewness | – | – | – | 0.243 | – | – |
| Kurtosis | – | – | – | 50.996 | – | – |
| Std. Error of Kurtosis | – | – | – | 0.481 | – | – |
| Range | – | – | – | 1.917×10^6 | – | – |
| Minimum | – | – | – | 3000.000 | – | – |
| Maximum | – | – | – | 1.920×10^6 | – | – |

^a The mode is computed assuming that variables are discrete.

Table1 shows the demographic details of gender, educational qualification, occupation, monthly income, family structure and marital status.

Table 2: The table depicting the total scores of Peer Support (PI), Burnout (BO) and Social Intelligence (SI)

| Descriptive Statistics | TOTAL SCORES (Peer Support) | TOTAL SCORES (Social Intelligence) | TOTAL SCORES(Burnout) |
|-------------------------------|-----------------------------|------------------------------------|-----------------------|
| Valid | 100 | 100 | 100 |
| Missing | 0 | 0 | 0 |
| Mode | 72.000 ^a | 83.000 ^a | 40.000 ^a |
| Median | 65.000 | 89.000 | 39.000 |
| Mean | 61.610 | 91.430 | 38.130 |
| Std. Error of Mean | 1.579 | 1.546 | 0.627 |
| Std. Deviation | 15.787 | 15.462 | 6.268 |
| Skewness | -1.113 | -0.148 | 0.287 |
| Std. Error of Skewness | 0.241 | 0.241 | 0.241 |
| Kurtosis | 1.055 | 3.665 | 1.586 |
| Std. Error of Kurtosis | 0.478 | 0.478 | 0.478 |
| Range | 72.000 | 112.000 | 38.000 |
| Minimum | 12.000 | 27.000 | 23.000 |
| Maximum | 84.000 | 139.000 | 61.000 |

Table 2 shows the total scores of the Peer Support (PI), Burnout (BO) and Social Intelligence (SI)

SECTION C – INFERENTIAL STATISTICS

This section focuses on the inferential statistics and the analysis of the data. In order to calculate the inferential statistics, the software JASP version 0.19.3 used ([JASP Team (2024), Version 0.19.3] was implemented. Pearson Product Moment Correlation is taken into consideration to show the correlation among the variables.

Table 3: The table depicting the relationship among the variables (peer support, burnout and social intelligence) using Pearson Product Moment Correlation.

| Variable | TOTAL SCORES (Peer Support) | (Peer) | TOTAL SCORE (Social Intelligence) | TOTAL SCORE (Burnout) |
|---|-----------------------------|--------|-----------------------------------|-----------------------|
| 1. TOTAL SCORES (Peer Support) | Pearson 's r | — | | |
| | p-value | — | | |
| 2. TOTAL SCORE (Social Intelligence) | Pearson 's r | 0.406 | — | |
| | p-value | < .001 | — | |
| 3. TOTAL SCORE (Burnout) | Pearson 's r | -0.366 | -0.421 | — |
| | p-value | < .001 | < .001 | — |

Table 3 shows the correlation between peer support and social intelligence, social intelligence and burnout and burnout and peer support.

Employing Pearson's correlation coefficient, the findings revealed a moderate positive correlation ($r = 0.406$, $p < 0.001$) between peer support and social intelligence, showing that individuals with higher social intelligence tend to receive more peer support. Additionally, a moderate negative correlation ($r = -0.366$, $p < 0.001$) was found between peer support and burnout, implying that peer support is linked with reduced burnout. Additionally, social intelligence was determined to be negatively correlated with burnout ($r = -0.421$, $p < 0.001$), signifying that individuals with higher social intelligence tend to encounter less burnout.

DISCUSSION

The present study was designed to investigate the relationship among peer support, burnout and social intelligence confronting the significant void in the existing literature where these variables have often been studied in independently rather than together. The study expands over a diverse sample from different industries, working places and job roles providing a comprehensive insight of the contexts. The findings indicate three significant correlations: a moderate positive relationship exists between peer support and social intelligence and two moderate negative correlations between peer support and burnout and between social intelligence and burnout respectively.

The positive correlation between peer support and social intelligence implies that individuals with higher social intelligence are competent of establishing, sustaining and gaining from peer networks. These results corroborate the findings of Sunheri and Singh (2025) and Nayak and Yadav (2018), emphasized that socially intelligent individuals are more likely to engage in reliable, collaborative, and empathetic interactions and the individuals with lower social intelligence face difficulty with maintaining a favorable relationship Farooq et al. (2022) further validate this interaction by demonstrating that structured peer tutoring boosts rational understanding and communication skills, the elements essential to social intelligence. These findings support that social intelligence not only promotes individual engagements but also open pathways to supportive peer environments.

Moreover, a negative correlation exists between peer support and burnout suggesting that individuals with high peer support is linked with lower burnout. The finding is supported by earlier research such as the study of Gamache et al. (2024), which showed that having regular peer discussions helped to reduce distress and boost job satisfaction among nurses. Similarly, Sari et al. (2025) found that peer support plays a vital role against academic burnout suggesting that students who received more support from their peers felt less stressed by academic pressure. And, thus peer support creates a feeling of belonging, mitigates the feeling of isolation and helps individuals manage challenges in a better way and thus reducing the chances of encountering burnout in individuals and thus, encouraging a supportive social setting enhances the personal wellness of the individuals.

Additionally, the negative correlation between social intelligence and burnout suggests that individuals with higher social intelligence are unlikely to confront burnout. However, the insights from Ismail et al. (2020) are contrasting with this view, revealing that social intelligence did not significantly influence burnout among secondary school teachers. This variation could be explained by situational variations such as work-place environment, cultural norms or the presence of mediating factors like emotional intelligence and spiritual intelligence. In addition, the finding is also affirmed by the study of Kochaksaraei et al. (2020), which reported that emotional intelligence is conversely related to burnout levels. Moreover, the observations of Ran and Mi (2016) exhibiting that social intelligence mitigates the aversive effects of emotional strain among the nurses. However, the study by Ran and Mi (2016) presents the delicate interactions that challenge straightforward analysis, revealing a positive correlation between Emotional Intelligence and burnout indicating emotionally or socially aware individuals may be more sensitive to workplace demands, making them susceptible to emotional overload.

The present study reveals that a positive correlation between peer support and social intelligence and negative correlation exists between peer support and burnout, similarly a negative correlation exists between social intelligence and burnout ultimately confirming the relevance of social intelligence and peer support in managing burnout.

Regardless of the meaningful insights acquired through the study, several limitations must be taken into account. Firstly, the course of the correlation existing among peer support, burnout and social intelligence remains unclear and also constrain the establishment of cause-effect relationships. Secondly, participants may provide biased responses downplaying feelings of burnout or isolation or overemphasizing the extend of peer support and social intelligence. Moreover, the study did not take into account for personal life factors like the quality of sleep, family stress, medical history or therapies.

The implications of the findings are multifaceted. Firstly, the academic settings and workplaces should incorporate the peer support initiatives such as peer mentoring programs, group reflection sessions or peer buddy systems to promoting a cohesive environment. Secondly, the workplaces should include training programs oriented at developing social intelligence such as communication skills, improving empathy, cultural understanding, conflict resolution, self-confidence and emotional well-being which focuses in building a healthy interpersonal dynamics eventually resulting to the job satisfaction and increase in productivity in an organization. Third, counselors and psychologists might employ these valuable insights in order to design interventions that strengthen both peer networks and social effectiveness as a means of mitigating burnout symptoms.

In future, potential opportunities for exploring the relationship can be achieved by conducting longitudinal studies to explore the interrelationships of the variables over time offering insights about the developmental trends in job strain and resilience. Secondly, expanding the study to include sample from various cultures would intensify the external validity of the research helping in tailoring support programs based on the cultures and requirements. The study can also emphasize on how the workplace culture (flexible culture vs. rigid culture) buffers the impact of social intelligence and peer relations on burnout.

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