Stature of Emotional Intelligence with Special Reference to Doctors in Healthcare Industry

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INTRODUCTION:

“There is no separation of mind and emotions; emotions, thinking, and learning are all linked.”
— Eric Jensen

Emotions influence our personality in different ways. On one hand, it is directly associated with an individual’s mental and physical functioning, his/her attitude, whereas on the other hand, its indirect impact comes in the form of reactions of individual towards peers and other social groups. Emotional Intelligence allows a person to think positively and solve problems in a creative manner. Emotional Intelligence overlaps, to some extent, with general and cognitive intelligence. The ‘emotionally intelligent’ or ‘emotionally sound’ person is skilled in four different areas: Identifying emotions, managing emotions, interpreting emotions, and regulating emotions. The term Emotional Intelligence is a very new concept in the field of management but it is a proven and much advocated concept in Indian mythology.

Named as ‘Stitpragya’ in the Indian Mythological text Gita, it literally means a balanced human mind. However, in management history, it was developed during the 1970s and 80s by the work and writings of psychologists Howard Gardner, Peter Salovey and John Mayer. Later, it first appeared in 1985 in a doctoral dissertation by Wayne Leon Payne, entitled “A Study of Emotion: Developing Emotional Intelligence.” His thesis on emotional intelligence not only included a framework of emotional intelligence but attracted management thinkers and psychologist towards it. Later it was coined by Daniel Goleman, who wrote the revolutionary book on the subject. He had actually co-authored it with his wife, Tara, triggered by sitting through many frustrating business meetings with her. Emotional Intelligence then appeared in a series of academic articles authored by John D. Mayer and Peter Salovey (1990, 1993). But, these publications garnered very little attention.
In the field of medical education and practice, it is observed that EI has direct relation with academic and professional achievement. It also improves the doctor-patient relationships. As, being a good doctor it’s not only about medical knowledge, but it also requires an understanding of people and their emotions. We not only expect our care providers to possess technical knowledge of their field to diagnose disease and prescribe treatment accordingly, but we also feel that they should serve us in such a way which reflects their acknowledgement of humanity.

REVIEW OF LITERATURE:


The first published use of the term ‘EQ’ (Emotional Quotient) is an article in the British Mensa magazine (Keith Beasley, 1987).

A model was put forward to describe EI (Stanley Greenspan, 1989), followed by another model on the same subject published in the following year (Peter Salovey and John Mayer, 1990).

However, the term became widely known with the publication of the book: Emotional Intelligence – Why it can matter more than IQ (Daniel Goleman, 1995). It is to this book's best-selling status that the term can attribute its popularity.

Research of EI and job performance shows mixed results: a positive relation has been found in some of the studies, while in others there was no relation or an inconsistent one. This led researchers to offer a compensatory model between EI and IQ (Cote and Miners, 2006), that posits that the association between EI and job performance becomes more positive as cognitive intelligence decreases, an idea first proposed in the context of academic performance (Petrides, Frederickson, & Furnham, 2004).

EI correlated significantly with different domains in performance, ranging from 0.24 for job performance to 0.10 for academic performance (Van Rooy and Viswesvaran, 2004).

According to some authors, EI contributes to develop strong and positive relationships with co-workers and perform efficiently in work teams (Lopes et al., 2006). This benefits performance of workers by providing emotional support and instrumental resources needed to succeed in their roles. Also, emotionally intelligent employees have better resources to cope with stressing situations and demanding tasks, which enable them to outperform in those situations. For instance, Law et al. (2004) found that EI was the best predictor of job
performance beyond general cognitive ability among IT scientists in computer company in China. Similarly, Sy, Tram, and O’Hara (2006) found that EI was associated positively with job performance in employees from a food service company.

SCOPE OF THE STUDY:

The scope of the study is to assess and improve the employees’ (Doctor) emotional intelligence at work place to help them in future. Emotional Intelligence calls for perceiving and comprehension of the issues in the organization. Based on the outcomes or such perception, organizations may adopt strategies and measures to improve the performance of their employees.

NEED FOR THE STUDY:

EI helps the employees to increase their emotional self-awareness, emotional appearance, creativity, positivity, increase tolerance, increase belief in integrity, build and improve relations within and across the organization and thus increase the performance of each employee and the organization as a whole. Emotional intelligence plays a noteworthy role in the organization and becomes a significant measure of evaluation for judgment of an effective employee, enhance productivity and trust within and across the organization.

OBJECTIVE OF THE STUDY:

The objectives of the study are as follows:

• To understand the concept of Emotional Intelligence.
• To examine the determinants of emotional intelligence in employees at work place.
• To find out the relationship between EI and burnout.
• To examine the association between EI and clinical outcomes.

HYPOTHESES:

Hypothesis 1: Emotional Intelligence is negatively associated with burnout in doctors.

Hypothesis 2: Emotional Intelligence is directly linked with better clinical outcomes.
RESEARCH METHODOLOGY:

The study is descriptive in nature. The data was collected from both primary and secondary source of information. Random sampling method was used to collect data from 80 respondents from various hospitals through a structured questionnaire. The Secondary Data were collected from various journals, articles, research report etc.

RESULTS & DISCUSSION:

The results of the study are discussed below:

This chart depicts the classification of respondents on the basis of gender and their respective EI scores.

As evident from this figure, out of the total participants, 58% were male and 42% were female doctors. The mean EI of male respondents is 3.91 and that of female respondents is 3.72.

Table 1: EI Scores with correspondence to Operational Parameters in Healthcare Sector

<table>
<thead>
<tr>
<th>Score in EI Variants</th>
<th>Percentage of Respondents</th>
<th>Professional Satisfaction</th>
<th>Patient Care</th>
<th>Clinical Outcomes</th>
<th>Burnout</th>
<th>Teamwork</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-2 (Low/ Unsatisfactory)</td>
<td>6%</td>
<td>3</td>
<td>3.75</td>
<td>3.25</td>
<td>3.5</td>
<td>3</td>
</tr>
<tr>
<td>3 (Mild/ Medium)</td>
<td>48%</td>
<td>3.73</td>
<td>4.6</td>
<td>3.8</td>
<td>2.4</td>
<td>4.1</td>
</tr>
<tr>
<td>4-5 (High/ Satisfactory)</td>
<td>45%</td>
<td>4.57</td>
<td>4.69</td>
<td>3.96</td>
<td>1.53</td>
<td>4.39</td>
</tr>
</tbody>
</table>
In view of the above findings, we may state that:

- 94% of the samples, i.e., 72 doctors have emotional intelligence levels ranging from medium to high.
- 58% of respondents were male and 42% were female doctors.
- The average EI of male doctors is 3.91 on a scale of 1 to 5, with 5 representing the highest level of emotional intelligence, and female respondents reported an EI score of 3.72.
- Professional Satisfaction of doctors is directly proportional to the level of the doctor’s emotional intelligence, be it male or female. Same is the case with all the other variants.
- Surprisingly, Burnout is inversely proportional to the level of the doctor’s emotional intelligence.

The conclusion from the above study are discussed below.

**CONCLUSION:**

Emotional intelligence plays a significant role for doctors in the healthcare industry. This study examines the various factors behind EI and impact of EI on other operational parameters related to the industry. Healthcare industry not only requires professional experience but the special touch of human factor or synonymously, humanity. Emotional Intelligence will help in increasing organizational commitment, better productivity, efficiency, lower levels of stress, effective patient care, retain best talent and motivate the doctors to give their best. This study recognizes that emotional intelligence and work life balance are two major parameters to create organizational success, professional success and patient satisfaction.

**Future Area of Research:** In future, this research can be extended further: to find out the relationship between EI and work experience, constraints of job, satisfaction with professional career and influence of personal life on professional growth. Other than this, further research can touch the area of students and their professional development with regards of emotional development. This study recommends that medical education and business schools must add emotional intelligence as part of their curriculum. This would eventually improve employee performance, work life balance, interactions in the workplace and eliminate problem of stress.
REFERENCES:


