Original Article

Emotional Intelligence Among the Medical Teachers; An Institutional Based Study

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Abstract

Objective: The study aims to assessing the emotional intelligence traits among the medical teachers at a private teaching hospital and medical college. Emotional Intelligence can act as protective factor against anxiety, tension, interpersonal communication, association with patients and provide better learning environment to medical students.

Methodology: A cross sectional co-relational study was designed at the Abwa Medical College, Faisalabad from March 5, 2024, to August 5 ,2024 using the convenient sampling technique. Only those with more than 2 years teaching experience were included in the study and others were excluded from the study. Senior teachers are those Associate Professor and Professors, while lecturers and Assistant Professors are junior teachers. A validated questionnaire "Leadership Toolkit Emotional Intelligence Questionnaire" was utilized to collect data. The participants were handed over a proforma and data collected was analyzed in SPSS 26 using the Chi square and Pearson correlational analysis.

Results: A total of 64 junior and senior medical teachers participated in the study. 36 (56.3%) were male and 28 (43.8%) females. 38(59.4%) belonged to basic medical science while 26 (40.6%) were from the clinical faculty. The overall mean value of emotional intelligence was reported to be 187.37 ± 23.04. The subsets of emotional intelligence were compared between gender, faculty and their positions. The social skill subset was reported to be statistically significant between the junior faculty (39.55 ± 5.02) and senior faculty (36.26 ± 5.99) with a P value of 0.020. The Pearson correlational matrix also indicated a significant relationship between the subsets of emotional intelligence among medical teachers.

Conclusion: Emotional intelligence is one of the key traits of medical teachers which yields professionalism, innovation and creativity. Emotional Intelligence is an important protecting factor that can act against anxiety, tension, interpersonal communication, association with patients and provide better learning environment to medical students.

Keywords: Emotional intelligence, medical Teachers

Introduction

As the world is progressing at a rapid pace and the dynamics of teachings have been changing with the continuous change in the implementation of newer teaching methodologies and learning outcomes. With time ticking down at a rabbit's pace, priorities in the education systems have also been changed. The stakeholders are now more concerned about the academic and professional achievements. Previously, Intelligence quotient was considered as sole predictor of the success. However, technology and research have contributed to developing tools and frameworks for measuring and understanding emotional intelligence (EI).

The concept of emotional intelligence has gained attention to a maximum extent in the late 20th century.[1] The health care professionals especially doctors have to play multiple roles in the society. The success of medical students is significantly influenced by the emotional intelligence (EI) of their medical college instructors. An environment of learning that promotes

constructive social interaction, proactive encouragement, and student enthusiasm to study is fostered by teachers who possess high emotional intelligence. [2]

As per Livesey PV. Goleman-Boyatzis model of emotional intelligence such as ability to recognize and manage own's emotion, motivating oneself, interpersonal skills, and ability to identify emotions in difficult conditions are the keystones of emotional intelligence. [3,4] The amalgam of these characteristics nurtures the ability of the educator to increase learning and prosperity. [5] The medical teachers with emotional intelligence recognize the students feeling and comprehension of what's causing them which ultimately aids in assistance of medical educators. The penultimate response between the students and the teachers results in reducing comportment problems and emotional fatigue between the teacher and student. [6]

With massive innovations and implementation of new strategies in today's world, the students undergo enormous stress. Numerous factors contribute to the generation of stress, including a large syllabus, long study hours, a competitive environment, a lack of peer support, a rigid, authoritative, and unsupportive administration, lack of recreational activities, staying away from home, financial challenges, uncertainty in future, issues pertaining to culture and minorities, and a mismatch between expectations and capacity. [7]

In the past several years, the topic of emotional intelligence of teaching staff at the medical colleges has gained importance as it has been well established that the ability to control and regard the self and others' feelings can be a determinant of success in health care provision. Other studies have emphasized the place of emotional intelligence in leadership and effective performance in the medical academic centers.[8] Within a health care setting, emotional intelligence has been demonstrated to be critical in physician-patient interaction, as well as teamwork and decision-making processes. It has also been determined that these same healthcare workers with high emotional awareness of their feelings are more skilled, more compassionate, and more adept at conflict and stress. Because of this, it is expected that the satisfaction of patients increases, the effectiveness of clinical practice improves, and a pleasant atmosphere at work is held within health care teams.[9]

Taken together, the existing literature suggests that there is a significant gap in emotional intelligence among teaching faculty in medical colleges, and that addressing this gap could have important implications for the quality of medical education and patient care. This study aims to evaluate the level of emotional intelligence among the medical teachers at a private medical college.

Methodology

A cross-sectional study using convenient sampling technique was conducted from March 5 to August 5 at Abwa medical college after taking approval from the institutional ethical committee. All the faculty members of the medical college with a teaching experience of more than 2 years were enrolled in the study comprising both the basic and clinical sciences while the faculty members with experience less than 2 years were excluded from the study. Informed consent was taken. The response rate was 95% as 64 participants filled out the questionnaire out of 67. A convenient sampling technique was used to collect data via a validated Questionnaire "Leadership Toolkit Emotional Intelligence Questionnaire" [10] and later analyzed in SPSS 26 The questioner contains 50 items rated on a five-point Likert scale with a Cronbach's alpha value of 0.912. Descriptive statistics was used to represent the frequencies of the gender, faculty and their position.

Results

A total of 67 faculty members were included in the study 3 questionnaires were not included as these were incomplete. 36 (56.3%) were male and 28 (43.8%) females. 38(59.4%) belonged to basic medical science faculty while 26 (40.6%) were from the clinical faculty. Table I depicts the distribution of participants based on the gender, position and faculty.

Table I: Distribution of participants based on Gender, Position and Faculty.		
Gender	Male	Female
	36 (56.3%)	28 (43.8%)
Faculty	**Basic Medical Sciences**	**Clinical Sciences**
	38 (59.4%)	26 (40.6%)
Position	**Junior**	**Senior**
	33 (51.6%)	31 (48.4%)

The mean and standard deviation for subset Self-awareness was reported to be 38.53 $\pm$ 5.34 while for the managing emotions it was 33.67 $\pm$ 6.65. The subset of motivating oneself reported to be 38.45 $\pm$

4.90 and for empathy it was 37.77 ± 5.08. Social skills were turned out to be 37.95 ± 5.72. Table II represents the overall mean and standard deviation of emotional intelligence and its subsets.

Table II: The overall mean and standard deviation of Emotional intelligence and subsets. (n=64)

	Mean±SD
Self-awareness (SE)	38.53±5.34
Managing emotions (ME)	33.67±6.65
Motivating oneself (MO)	38.45±4.90
Empathy (EM)	37.77±5.08
Social skill (SS)	37.95±5.72
Overall Emotional intelligence	186.37±23.04

Table III indicates the comparison of different subsets of emotional intelligence between male and female faculty members. Self-awareness and managing emotions reported a P-value of 0.967 and 0.731 respectively. The overall emotional intelligence reported to be 0.646 which was statistically non-significant among the faculty members.

Table II: Comparison of emotional intelligence and its subsets between male and female.

Variables	Males (n=36) Mean ± SD	Females (n=28) Mean ± SD	P-value
Self-Awareness	38.56 ± 6.48	38.50 ± 3.48	0.967
Managing emotions	33.42 ± 8.09	34.00 ± 4.26	0.731
Motivating oneself	38.83 ± 5.82	37.96 ± 3.40	0.486
Empathy	38.36 ± 6.30	37.00 ± 2.75	0.291
Social Skills	38.39 ± 7.09	37.39 ± 3.22	0.493
Overall emotional intelligence	187.56 ± 28.82	184.86 ± 12.56	0.646

Table IV indicates the comparison between the junior and senior faculty members. The P-value for the social skill subset was 0.020 which was reported to be the only statistically significant variable among the all.

Table IV: Comparison between faculty member. (Junior vs senior)

Variables	Juniors (n=33) Mean ± SD	Senior (n=31) Mean ± SD	P-value
Self-Awareness	39.12 ± 5.49	37.90 ± 5.19	0.366
Managing emotions	34.24 ± 7.38	33.06 ± 5.82	0.483
Motivating oneself	39.09 ± 5.69	37.77 ± 3.87	0.286
Empathy	38.27 ± 5.11	37.23 ± 5.07	0.414
Social Skills	39.55 ± 5.02	36.26 ± 5.99	0.020
Overall emotional intelligence	190.27 ± 25.66	182.23 ± 19.44	0.164

The subsets of emotional intelligence between the basic and clinical faculty members were represented in Table V. The self-awareness and managing emotions were reported to be 0.294 and 0.776. The variable for motivating oneself, empathy and social skills was turned out to be 0.950, 0.763, 0.699 respectively. Table VI

Table V: Comparison between Basic faculty and Clinical faculty.

Variables	Basic Faculty (n=38) Mean ± SD	Clinical Faculty (n=26) Mean ± SD	P-value
Self-Awareness	37.95 ± 5.98	39.38 ± 4.21	0.294
Managing emotions	33.47 ± 7.46	33.96 ± 5.38	0.776
Motivating oneself	38.42 ± 5.28	38.50 ± 4.38	0.950
Empathy	37.61 ± 5.44	38.00 ± 4.59	0.763
Social Skills	38.18 ± 5.86	37.62 ± 5.59	0.699
Overall emotional intelligence	185.63 ± 25.94	187.46 ± 18.44	0.758

Discussion

The study aims to explore the emotional intelligence among the faculty members of a private medical college. The traits of emotional intelligence were emphasized here. A study conducted by Zaima A, et al. reported a mean score of 190 ± 39 as an average emotional intelligence level based on Daniel Goleman EI toolkit recommendations. [11]

Contrary to that a study by Nazish Imran in Pakistan using the Schutte emotional intelligence scale and Davis interpersonal reactivity index reported a higher value of emotional intelligence among women. [12]

In current study, the mean score of junior faculties was 190.27 ± 25.66 and senior faculty had the score of 182.23 ± 19.44. However, there was no statistical difference noted as the P-value was 0.164. The "Social Skill" subset of emotional intelligence was reported to be statistically significant among the senior and junior. On the other hand, all the other variables such as managing others' emotions, self-emotions, motivation and empathy were not significant as P value was not less than 0.05. The junior faculty members reported a slightly greater score in managing emotions and empathy as compared to the senior faculty members. The integration of the upper-level trainees' views and "near peer" teaching enriched the discussions, as it was sometimes difficult for the junior residents to predict barriers they may face as future leaders.

Table VI: Correlation matrix. (N=64)

		Self-awareness	Managing emotions	Motivating oneself	Empathy	Social skill
Self-awareness	r	1	0.643[**]	0.512[**]	0.689[**]	0.402[**]
	Sig. (2-tailed)		0.000	0.000	0.000	0.001
Managing emotions	r	0.643[**]	1	.770[**]	0.817[**]	0.547[**]
	Sig. (2-tailed)	0.000		0.000	0.000	0.000
Motivating oneself	r	0.512[**]	0.770[**]	1	0.549[**]	0.495[**]
	Sig. (2-tailed)	0.000	0.000		0.000	0.000
Empathy	r	0.689[**]	0.817[**]	.549[**]	1	0.679[**]
	Sig. (2-tailed)	0.000	0.000	0.000		0.000
Social skill	r	0.402[**]	0.547[**]	0.495[**]	0.679[**]	1
	Sig. (2-tailed)	0.001	0.000	0.000	0.000	

**. Correlation is significant at the 0.01 level (2-tailed). r = Pearson Correlation

Learners to achieve the three essential components of in a study conducted by Ahmad et al. [13] similar results were obtained. Petrides and Furnham also advocated a significant social skill subset among the faculty members. [14] Overall, it was shown that the faculty members had very high levels of emotional intelligence. In terms of subdomains, self-awareness, self-motivation, and empathy have the highest ratings.

In current study, the subset of managing emotions were higher in females (34.00 ± 4.26) as compared to the males (33.42 ± 8.09). Contrary to that, the study by Zaima et al. reported a higher value among the males than the females. [11,15]

In contrast, the results in another study that found Juniors to have greater Emotional intelligence scores than senior participants. These results support the idea that age affects emotional intelligence.

For positive outline of Emotional intelligence notions into a medical course, the medical trainings that observe to a theoretical framework. The guidelines that flashed member assignation, like confirming an environment of expressive overhaul, breach up the didactic lectures into interactive, and integrating problem-based learning, self-awareness, replication, and de-briefing. [16]

Study conducted reported that the supervisors with strong emotional intelligence and skills with high level of self-awareness had better professionalism working capacity environment and innovation. [17]

This needs to be implemented while incorporating subjects as it confers the skills needed by the combinations and by facility to promote effective learning.[18] Another study by Christine G. Roth [19], organized different communication and professionalism workshops to inculcate traits of emotional intelligence among the medical graduates which ultimately will yield a higher score of emotional intelligence.

Conclusion

The junior faculty members and the members belonging to clinical faculty have reported a higher score for emotional intelligence. The findings of traits emotional intelligence are very significant as it is related to job stress in burnouts. The development of emotional and intelligence in faculty members can certainly raise the compassion and innovation at the workplace yielding positive outcomes and help in raising the bar for effective teaching environment. The junior medical teachers have higher social skill as compared to the senior medical teachers with little variations among the other subsets of emotional intelligence. Emotional Intelligence is an important protecting factor that can act as protective factor against anxiety, tension, interpersonal communication and association with patients. Emotional Intelligence may lead to provide better learning environment to medical students.

Limitations: There is a significant literature gap concerning the development and evaluation of emotional intelligence among the medical teachers. The scarcity of data leaves this aspect unexplored. Much needed efforts are required to inculcate and nourish emotional intelligence among the medical teachers. Quantitative study design, standardized tool and study setting at a private medical college could have been addressed by mixed method study design, self-developed validated tool and inclusion of public and private medical colleges can improve results.

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