
IMPACT OF EMOTIONAL INTELLIGENCE FOR ORGANISATIONAL BETTERMENT SPECIALLY IN HEALTHCARE SECTOR - A REVIEW STUDY

Article Particulars

Received: 22.5.2017

Accepted: 30.5.2017

Published: 28.7.2017

N.POORNIMA

Research Scholar,
Bharathiar University,
Coimbatore, Tamil Nadu, India

Dr.V.KUMARAVEL

Dean-Academic,
Commerce & Management Studies,
Vivekanantha Arts & Science College (Autonomous),
Tiruchengode, Coimbatore, Tamil Nadu, India

Dr.P.N.RAGHUNATHAN

Research Guide,
Assistant Professor,
Dept. of Business Administration, Govt. Arts College,
Coimbatore, Tamil Nadu, India

Abstract

Emotional intelligence plays a mediatory role between mental health and higher Emotional Intelligence physical environment of organization for its betterment. People with can better cope with the environmental factors of the organisation. This study aims at measuring how far Emotional Intelligence is betterment for various organizational factors like conflict resolution, coping job stress, leadership qualities, training and development, performance management and so on., in Healthcare Sector. It also focuses on association of Emotional Intelligence with organizational factors or/ and is there any unproved association between Emotional Intelligence and organizational factors.
Literature Search: Pub Med, Science Direct, and Various Journals of Medical Sciences. **Results:** High Emotional Intelligence have positive association with organizational factors and vice-versa.
Core concepts highlighted in this Article: Conflict Resolution, Coping Job Stress, Leadership Qualities, Training and Development, Performance Management.
Key Words: Emotional Intelligence, Organizational Factors, Association, Unproved Association and Organizational Betterment.

Introduction

Healthcare Professionals are professionals who have a direct and frequent relationship with patients and need to be highly sensitive to the needs and emotions of the patient. The performance of the physicians have direct implications on the

effectiveness of the treatment and the well-being of the patient. Having understood the components of emotional intelligence, its measures and its role in improving performance of healthcare professionals, this section explains the ways in which emotional intelligence can be developed and improved in healthcare professionals.

High Emotional Intelligence with Positive Association of Organisational Factors

Sharif et al., highlighted Training of ICU nurses in emotional intelligence significantly improves the general health of them. As such, lack of control on emotions can lead to irrevocable negative effects on both nurses and patients. Montes also supported the same concept. Bushel in his article Putting your emotions to work analysed that the nurses with a lower level of self-management are less accepting of patients' complaints and criticisms. On the other hand, Kerfoot limelighted in his study the emotional side of leadership: the nurse manager's challenge, those with better self-management skills are more accepting of others' views and demands and are after patients' satisfaction. Guleryuz and Haghghatjoo analysed separately in with their associates that High emotional intelligence can lead to more successful management, job satisfaction and organizational commitment. Nooryan et al., analysed that Teaching the components of emotional intelligence can reduce the situational stress and anxiety in doctors and nurses in ICUs, which will help them cope with stressful situations much easier and have more efficient strategies in dealing with such situations. Regarding Gender study on Emotional Intelligence, Montes did not find any significant difference between male and female participants in their emotional intelligence. However, Molaei and Haghghatjoo reported that female participants had a higher score in self-awareness, self-management, and social awareness. Banihashemian study demonstrated that women demonstrate characteristics like empathy, self-control, and emotional evaluation more than men, it is logical to expect them to enjoy a better self-management. Also, Molaei observed a difference in social awareness and self-management in Gender. Hajloo in his study concluded that the Relationship between Emotional Intelligence and Demographical Variables in Nurses, there is a difference observed between genders, female employees have a better performance interpersonal relationships. Petrides & Furnham in their study analysed that Women score higher in EI in the category of interpersonal relationships than men, but men believe their level of EI is higher than that of women.

Referring to a Dutch nurse study, discussed in the literature review section of this thesis, also supports the above. The study reported that female nurses did score significantly higher in both the interpersonal composite scale and the interpersonal relationships subscale. Loes, Berno, & Derksen in their research found that the female nurses scored significantly higher than their male colleagues on the emotional self awareness subscales. Mayer and Kilpatrick suggested that emotionally intelligent people were better equipped to deal with the challenges of clinical nursing practice

and independent study. Birks et al have identified stress as being high for students in healthcare courses, Chabeli, Edgar and Cummings in their study have linked EI to important areas of practice such as clinical decision making, clinical environment, knowledge utilization, and inter professional relationships at multiple levels.

Although some people may attempt to separate emotions from the workplace, emotions and the workplace are inseparable because humans carry emotions wherever they go. Moss in his research found that increases in stress levels erode mental abilities and make people less emotionally intelligent. On the other hand, yang in his study have shown that negative stress consequences in nurses and nursing students can be avoided by using EI. Ramesar involving in his study that nurses showed positive correlations between clinical performance levels and EI scores. Murden et al found that medical students considered by admissions interviewers to have high levels of maturity, personal integrity, motivation, or rapport were twice as likely to receive outstanding recommendations during their clinical rotations as would those previously considered as not having these attributes. Moss posited that for healthcare to move forward, conflict must be resolved so that the result is cost-effective, high-quality patient care. In other words, healthcare providers scoring high in EI are far more effective in a number of key performance areas, including stress management. Another study, by Weng et al, found that higher EI was significantly associated with less burnout ($P < .001$) and higher job satisfaction ($P < .001$) among doctors. Research evidence of Zeidner et al., has shown that EI is related, directly or indirectly, to better adjustment or success in academic, personal, social or occupational settings. Different studies conducted by the authors Bastian, Bar-on, Platsidou and Carmel high EI is associated with lower levels of anxiety and depression, occupational stress and burnout and with higher levels of job satisfaction respectively.

Author Pool analysed that the Intelligent quotient (IQ) predicts only about 20 percent of career successes, which leave the remaining 80 percent to other factors such as emotional intelligence. He also found that Low EI may hinder the academic success and adjustment throughout the medical training. Locke in his study entitled nature and causes of job satisfaction analysed that positive association between EI and JS (the latter being defined as "a pleasurable or positive emotional state resulting from the appraisal of one's job or job experiences"). Kafetsios, Sy, Bar-on, Carmeli, Prati and Weng in their studies on different topics and different work environment supported that, employees with higher EI are more satisfied with their job. Various authors in varied working environment analysed by various authors, Emotional Labour is associated with emotional exhaustion and job burnout, higher levels of work stress and psychological distress, and job dissatisfaction. Typically, research indicates a negative correlation between Emotional Labour and Job Satisfaction. Wagner and her colleagues also documented a modest correlation between physicians' EI and patient satisfaction. It will also help to select applicants in medical college with high EQ.

Spooner, Satterfield and Stratton in their studies on different topic, emotional intelligence training identified randomized controlled trials all showing positive outcomes with improvement in empathy, communication skills, better patient understanding and supportive behavior. Several other investigations have also been done by the authors Birks, Lopes, Humpel, Yosefi, Haghghatjoo, Farzadnia Davoodi and Sayeed in their different topics of the research the relation between emotional intelligence and stress levels, work related burnout, work related stress , life quality, job satisfaction, conflict management, patients' satisfaction.

In particular, several scholars Law and Sy, have suggested a strong relationship between EI dimensions and job satisfaction. These results partially diverge from Guleryuz and his colleagues' findings that only regulation of emotion is strongly correlated with JS (both internal and external components of JS) followed by use of emotions aspect. Carmeli in his research entitled the relationship between emotional intelligence and work attitudes, behavior and outcomes have found that the employees who successfully appraise and express their emotions, are in a position to be better accepted and understood by their colleagues, and as a result, they possess the ability to develop themselves, manage their career path and lead individuals.

Moreover, individuals who can utilize their emotions to produce multiple and flexible plans for their future, to improve decision making, to cultivate creative thinking and to improve persistence against challenging tasks are more adaptive and effective in dealing with both positive (satisfaction) and negative emotions (quitting). Thus, organizational members with high emotional intelligence (SEA & UOE) experience almost uninterrupted positive moods, inducing higher levels of satisfaction compared to those who consider such feelings as distress and disappointment, failing to experience a higher level of fulfillment.

Emotional intelligence plays a mediatory role between mental health and stress. Persons with higher emotional intelligence have more ability to cope with the conflicts of the environment than those with low emotional intelligence. Emotional awareness and its regulation can also lead to better stress management and performance of tasks. As nurses face numerous occupational stressors including shift work, high work load, frequent contacts with patients, suffering and death, they are more prone to develop conflicts that would ultimately result in jeopardizing interpersonal relationships.

Jordan and Morisson in their different kinds of study analysed tahtEmotional intelligence and mental health can help people solve their occupational problems and develop committed nurses. Sharif et al., limelighted that Emotional intelligence skills, particularly "self awareness," help nurses to get familiar with their emotions, behaviors, and reactions as self awareness is the process of understanding one's thoughts, conflicts, motivations. Landa et al., have found that EI is shown for nurses as a protective factor against stress and a facilitative factor for their health. Görgens-Ekermans in research found that, Higher EI is significantly related with lower stress and

burnout. In Pau's study EI is positively correlated with physician job satisfaction. Pau in his study showed that higher EI scores are correlated with better ability to reflect and appraise, as well as social and interpersonal, and organizational/time-management skills.

Low Emotional Intelligence with Negative Association of Organisational Factors

In a similar vein, Akrivos and Konstantopoulos in their varied research emotionally intelligent employees are likely more capable to recognize, manage and use their emotions to overcome obstacles, develop their skills and qualifications, and finally, advance their horizon better than other individuals. They can also control stress caused by highly complex and demanding work environments preventing their negative influences on their career path. Considering turnover, a strong negative association between EI and intentions to quit has been put forth by several scholars like Firth, Goleman, Kooker, Wong, Lee and Falkenburg. Landa and Lopez-Zafra in his study analysed among the main causes of stress, is the contact with suffering and death, lack of preparedness to deal with the emotional needs of patients and their families, fatigue and night work. Lepidou, et al., in their research limelighted that Anxiety is one of the most common problems that health professionals have to deal with. Nooryan analysed that Hospital is a stressful environment for its staff, especially physicians and nurses. These stressors may have negative effects on their mental health and performance. But the complications caused by this stress can be prevented by using emotional intelligence as an anxiety management tool.

In research of Polikandrioti Individuals who have direct contact with patients, extreme of hazardous responsibility, precision at the performance of duty, or shift work develop over a longer or shorter period of time the burnout syndrome. Halbeslaben in his study found that burnout were more likely to make medication errors than those who did not feel burned out. He also found that physician burnout was associated with lower patient satisfaction and longer post discharge recovery time. Welp recently found that emotional exhaustion of residents was associated with mortality among patients in the intensive care unit. Pau found that in dental undergraduates, low EI scores correlated with greater amounts of perceived stress.

Conclusion

Major part of the above studies prove high levels of emotional intelligence as an indicator and a positive element in control and improvement of the mentioned factors. The results from these studies shows that emotional intelligence and its benefits and its necessity in healthcare professionals which requires more attention. on the other hand, low levels of emotional intelligence correlated with negative outcomes of the healthcare environment. Since emotional intelligence is been shown to be intractable and learnable thing in healthcare environment.

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