



## Role of Emotional Intelligence in the Health Care Profession: A Quantitative and Cross-Sectional Study

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### ABSTRACT

Emotional Intelligence, the ability to identify, comprehend, and manage emotions effectively, is critical in healthcare settings where professionals frequently encounter emotionally charged situations. Conflict management, a key aspect of EI, is vital for fostering a constructive work environment and improving patient outcomes. Existing research highlights the impact of EI on leadership, teamwork, communication, and patient care. This study investigates the relationship between emotional intelligence and conflict management strategies among healthcare professionals, focusing on its influence on workplace dynamics and patient care. Descriptive and inferential statistical methods will analyse associations between EI levels, conflict management styles, and workplace performance. It is hypothesized that higher EI levels correlate positively with collaborative conflict management styles and improved job performance. The findings are expected to reveal that emotionally intelligent healthcare professionals demonstrate enhanced communication, reduced workplace conflicts, and higher patient satisfaction. This study underscores the importance of EI as a critical skill for healthcare practitioners.

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## **INTRODUCTION**

The term emotional intelligence refers to the capacity to identify, understand, and manage one's own emotions, as well as to perceive, understand, and influence others' emotions. EI is critical in the healthcare industry, a diverse field devoted to preserving and improving people's health. Healthcare professionals, such as doctors, nurses, pharmacists, dentists, and therapists, deal with emotionally charged situations daily, making the capacity to manage emotions a necessary skill for effective patient care and professional interactions (Nightingale et al., 2018). Another essential component of EI is conflict management, which is the process of resolving disputes in a way that is constructive. Successful conflict resolution not only resolves issues but also maintains relationships and fosters a positive work environment (Vlachou et al., 2016). Interpersonal dynamics in healthcare have been significantly shaped by emotional intelligence in recent years. The ability to control one's emotions and those of patients and coworkers becomes crucial for healthcare professionals as they handle emotionally taxing situations. (Jiménez-Picón et al., 2021). To improve patient outcomes, develop a compassionate and cooperative work environment among healthcare workers, and enhance communication, this research proposal aims to investigate the crucial impact that emotional intelligence plays in these areas (Alonazi, 2020). Knowing the effects of emotional intelligence could lead to major improvements in healthcare procedures at a time when the need for empathy and emotional awareness in patient care is critical (Czabanowska et al., 2014). Studies indicate that healthcare professionals possessing elevated emotional intelligence exhibit enhanced patient satisfaction, more robust teamwork, and superior stress mitigation. As a result, this study will investigate how EI affects both personal and professional efficacy in healthcare environments. This research will emphasize the significance of incorporating emotional intelligence training into healthcare education and practice through a thorough evaluation of the existing literature.

## **LITERATURE REVIEW**

Numerous studies have deepened our understanding of the ways in which emotional intelligence affects not only conflict resolution but also leadership, teamwork, communication, and overall patient care results (Srygley et al., 2023). Noshili's research highlights the importance of emotional intelligence as a critical element of leadership performance, especially in high-stress settings such as the healthcare industry. High EI leaders are more likely to build a positive work environment, strengthen team dynamics, and lower employee fatigue (Noshili et al., 2022). This is consistent with research by Devi, Banerjee, Kadadi & Bharamanaikar, which highlights the multifaceted character of emotional intelligence and implies that leaders who can identify, comprehend, and control their own emotions as well as those of their team would be better able to manage intricate interpersonal interactions (Devi & Banerjee, 2024; Kadadi & Bharamanaikar, 2020). In a 2014 study, Todres et al. investigated the connection between nurses' stress management and emotional intelligence (Todres et al., 2010). They discovered that nurses with higher EI

scores were more adept at handling stress at work, which enhanced their job satisfaction and patient care (McGuire, 2021). This is especially true in the healthcare industry, where there are a lot of high-stress scenarios and maintaining composure under duress is essential for patient safety and well-being (Ma et al., 2022). According to the study, emotional intelligence improves one's capacity to handle the emotional demands of the workplace and aids in conflict resolution (Asiamah, 2017).

The relevance of sociodemographic characteristics in the connection between emotional intelligence and conflict management is further supported by Scroggins' research (Scroggins, 2019). Their findings imply that variables including gender, marital status, and salary have an impact on EI and conflict management techniques, which are not consistent between health care workers (Weiszbrod, 2013). This shows that specific EI training is required, taking into consideration the varied backgrounds of healthcare professionals. Including this knowledge in training curricula could promote inclusive and efficient conflict resolution techniques. Additionally, a study by Pérez-Fuentes et al. highlighted the fact that nurses with greater EI are better at controlling their own emotions and enhancing patient outcomes by encouraging improved relationships and communication with patients (Pérez-Fuentes et al., 2020). Higher patient satisfaction is positively correlated with the quality of treatment received by emotionally intelligent nurses, according to reports from their patients (Nespereira-Campuzano & Vázquez-Campo, 2017).

This is consistent with Littlejohn's claim that emotionally intelligent healthcare workers are more adept at resolving any disputes before they become more serious, which fosters a more peaceful atmosphere for both patients and coworkers. Additionally, interprofessional collaboration – a crucial aspect of contemporary healthcare delivery requires emotional intelligence (Xu et al., 2023). A 2007 study by Awe and Bamford examined the ways in which EI promotes teamwork within medical teams. They discovered that individuals with greater EI were more adept at navigating the challenges of multidisciplinary teamwork, where disputes frequently result from disparate viewpoints and specializations (Awe et al., 2023). Effective cooperation requires the capacity to control emotions and communicate openly, especially in hectic healthcare settings where cooperative decision-making is critical to patient care. Emotional intelligence has a more comprehensive influence on job performance and retention than just handling conflicts. Healthcare workers with high emotional intelligence reported better job satisfaction, more emotional resilience, and a decreased risk of burnout in a study by Suleman and Severinsson (Suleman et al., 2020). The development of emotional intelligence in healthcare workers can enhance retention and foster a better work-life balance, which would eventually benefit patients and staff, given the high turnover rates in the industry caused by stress and emotional exhaustion. Furthermore, cultural variations in emotional expression and conflict resolution are highlighted by a global viewpoint on emotional intelligence in healthcare (Nomsule, 2021). For instance, a 2005 study by Fragkaki found that emotional intelligence was crucial to healthcare workers' capacity to manage stress and

settle disputes in a variety of cultural settings (Fragkaki et al., 2024). To ensure that healthcare teams in varied settings can collaborate more effectively, the study highlighted the necessity of culturally sensitive emotional intelligence training that considers how emotional expression and conflict resolution tactics vary between cultures. Studies by Molero Jurado et al. and Jerng et al. are only two examples of the international literature that continuously emphasize the significance of communication as a critical component in igniting or settling medical conflicts.

According to Greer's research, staff members who lack enthusiasm, have impersonal management approaches, and have different educational backgrounds all contribute to conflict and lower productivity (Molero Jurado et al., 2019). On the other hand, emotionally intelligent leaders may greatly lessen these conflicts and promote a happier and productive work atmosphere by placing a high value on open communication and emotional awareness. These results are supported by Jerng et al., who observe that although disagreements are typical in hierarchical healthcare settings, emotionally intelligent professionals are better able to handle these difficulties without jeopardizing their professional relationships (Sundararajan & Gopichandran, 2018). In conclusion, a rising corpus of research emphasizes how crucial emotional intelligence is in determining how well healthcare personnel handle conflict, lower stress, communicate better, and foster teamwork (Bertram et al., 2016).

Emotional intelligence is essential for both professional performance and well-being in health care settings, as it can enhance patient outcomes and provide a supportive work atmosphere. Numerous research findings indicate that adding emotional intelligence training to healthcare education and professional development courses may lead to better conflict resolution, more efficient healthcare delivery, and increased job satisfaction in general (Bertram et al., 2016; Karimi et al., 2014). As a result, EI is becoming more and more acknowledged as a necessary skill set for healthcare practitioners working at all levels of practice (Lartey et al., 2021).

## **METHODOLOGY**

A descriptive cross-sectional study will be conducted to assess emotional intelligence and its impact on healthcare professionals. The study will be conducted on health professionals working in Chandka Medical College, Larkana. Simple random sampling will be used for the research (Shahini et al., 2023). Study design: Quantitative, cross-sectional study.

### **Purpose of the Study**

To examine their relationship between emotional intelligence and conflict management strategies among healthcare professionals. Null Hypothesis  $H_0$ : Emotional intelligence does not significantly influence conflict management skills or patient care outcomes among healthcare professionals. This hypothesis assumes that EI does not have a measurable or significant impact on either conflict resolution or patient-related outcomes, which we will test against our data. If the evidence from the study supports rejecting this hypothesis, it would imply that EI does play a significant role in these areas.

### **Participants**

Participants will include health care professionals working in a hospital setting.

### **Inclusion Criteria**

Actively practicing health care professionals working in hospitals, clinics, or health care institutions.

### **Exclusion Criteria**

Health care professionals with less than 1 year of working experience or those not actively practicing.

Study Tool: Data Collection Instruments: A. Emotional Intelligence Measurement:

Instrument: The Wong and Law Emotional Intelligence Scale or the Schutte Self-Report Emotional Intelligence Test.

Dimensions Measured: Self-awareness, emotional regulation, use of emotions, and social skills.

Scale: Likert scale. B. Conflict Management Styles:

Instrument: The Thomas-Kilmann Conflict Mode Instrument.

Dimensions Measured: Five conflict management styles.

Scale: Likert scale to assess the frequency of use of each conflict management style.

Workplace Performance and Conflict Impact:

Job Performance: Self-reported or supervisor-rated scale.

Conflict Frequency and Severity: Use a Workplace Conflict Survey to assess the frequency and severity of conflicts faced by participants in their healthcare setting.

### **Data Collection**

The data will be collected from the healthcare professionals through an online survey questionnaire Google Form that we took from previous research tools. The questionnaires will be divided into four sections: the first section will include questions on the socio-demographic and occupational characteristics of the sample. The second section will measure the healthcare professionals' concerns about organizational factors. And the third section will be on health professionals' concerns about the factors causing conflicts, and the fourth section, which is the last section, contains a correlation analysis between conflict management and health professionals' emotional intelligence.

### **Data Analysis**

The quantitative and cross-sectional data will be analysed using appropriate statistical techniques. Descriptive statistics such as means and standard deviations will be calculated to understand the overall knowledge levels of health care professionals. The chi-square test will be used to analyse the relationships between knowledge levels and demographic factors to identify significant associations. The quantitative data will be collected by using multiple tools, such as knowledge assessment, in which we developed a questionnaire that has already been made and used in previous research, and the null hypothesis will be formulated to show the level of knowledge of health care professionals in emotional intelligence.

**RESULT AND DISCUSSION**

Table 1. Demographic Characteristics of the Study Population

Categories	Frequency (n)	Percentage (%)
Gender		
Male	101	51.3
Female	96	48.7
Total	197	100%
Age: 23.7(±6.3)		
15-20 years	32	16.2%
21-21 years	122	61.9%
26-30 years	35	17.8%
40 to above	8	4.1%
Academic year		
1 <sup>st</sup> year	30	15.2%
2 <sup>nd</sup> year	41	20.8%
3 <sup>rd</sup> year	45	22.8%
4 <sup>th</sup> year	81	41.1%
Profession		
Nurse	90	45.7%
Doctors	64	32.5%
Other professions	43	21.8%
Year of experience: 2.9(±1.8)		
Education		
Undergraduate	116	58.9%
Other education	81	41.1%

Section 2. Health professionals' concerns about organizational factors:

Table 2. Health Professionals' Concerns About Organizational Factors

S/ no	Organizational factors	Not at all %	Little %	Moderate %	Much %	Very much %
1	How much are you personally and professionally satisfied	19.3	23.5	20.8	10.2	14.2

	with the roles and duties you are assigned?					
2	How much do your expectations of the organization match the organization's expectations of you?	27.9	32.0	22.8	8.1	9.1
3	Does your organization respond negatively to your actual or potential membership or activities in professional organizations?	24.9	27.4	11.7	27.4	8.6
4	Do you think you work more when you compare your workload with the workload of other professional groups?	20.8	28.9	19.8	14.7	15.7
5	Do you think your wage is enough to motivate you sufficiently for your workload?	25.4	29.4	19.3	12.7	13.2
6	How much does your current job resemble your ideal job?	29.9	29.4	17.3	11.7	11.7
7	Do you think you would be happier, peaceful, and efficient if you worked in another profession than your current one?	28.4	17.3	15.7	21.8	16.8
8	If you are responsible for more than one executive, does this affect your work performance negatively?	29.9	24.9	21.3	14.7	9.1
9	If you are responsible for more than one executive, does this cause conflicts among them?	23.9	35.0	21.3	11.7	8.1
10	Do you consider your authority sufficient for the duties you are responsible for?	18.3	36.5	17.3	10.7	17.3
11	How much do you think legal regulations your duties and help you	28.4	33.0	16.2	10.2	12.2

	accomplish them efficiently?					
12	Do you have conflicts with other departments due to the highly interactive and collaborative nature of health service production in hospitals?	22.3	26.4	17.8	19.3	14.2
13	When making professional decisions, how autonomous and independent do you feel, in terms of not feeling pressured, obstructed, or directed by others?	24.4	29.4	21.8	9.6	14.7
14	How much do you think resource distribution is done fairly between departments?	29.4	31.5	15.2	14.2	9.6

Section 3. Health professionals' concerns about the factors causing conflict:

Table 3. Health Professionals' Concerns About Factors Causing Conflict

S/no	Factors causing conflict	Not at all	Little	Moderate	Much	Very much
1	How much do you think educational differences lead to communication problems between professional groups?	23.4	23.9	22.3	10.7	19.8
2	Are your messages clearly understood, and your job expectations shared by other professional groups?	21.3	32.0	20.8	13.7	12.2
3	Do you get the rewards you think your performance deserves? (early promotion, financial gain, vacation, appreciation, etc)	22.3	20.8	23.4	15.7	17.8
4	Do you think there is a fair distribution of rewards across different professional groups?	27.4	26.4	16.8	17.8	11.7
5	How much do you think hospital management is aware of your contribution to health service production?	28.4	26.4	18.3	16.2	10.7

6	How much do your promotions and career advancement match your expectations?	23.4	26.9	20.8	15.7	13.2
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### Conflict Management Strategies Report Led by the Health Professionals

Here is the histogram representing the health professionals' concerns about factors causing conflict. Each bar group represents the percentage distribution of responses for a specific factor causing conflict. The legend highlights the categories for easier comparison.

### Suggestions for Conflict Resolution

Here is the histogram representing the health professionals' concerns about factors causing conflict. Each bar cluster represents one category, while the different colours indicate specific factors causing conflict. Let me know if you'd like further adjustments or analyses.

Section 4: Correlation analysis between conflict management and health professionals' emotional intelligence

Table 4. Correlation Between Conflict Management and Emotional Intelligence Among Health Professionals

Accommodation (giving in)		Total emotional intelligence r (p-value)
1.	How much are you personally and professionally satisfied with the roles and duties you are assigned?	0.206 (0.011)
2.	How much do your expectations of the organization match the organization's expectations of you?	0.214 (0.009)
3.	Do you think you would be happier, peaceful, and efficient if you worked in another profession than your current one?	-0.176 (0.031)
4.	If you are responsible for more than one executive, does this affect your work performance negatively?	-0.164 (0.044)
5.	If you are responsible for more than one executive, does this cause conflicts among them? Do you have conflicts with other departments due to the highly interactive and collaborative nature of health service production in hospitals?	-0.182 (0.025)
6.	When making professional decisions, how autonomous and independent do you feel, in terms of not feeling pressured, obstructed, or directed by others?	0.164 (0.044)
7.	How much do you think resource distribution is done fairly between departments?	0.182 (0.029)

Correlation is significant at the 0.05 level. Correlation is significant at the 0.01 level.

This study examines the relationship between emotional intelligence and conflict management strategies among healthcare professionals. The findings offer significant insights into how EI impacts organizational dynamics, job satisfaction, and conflict resolution within a healthcare setting.

### **Demographic Characteristics and Contextual Relevance**

The demographic analysis reveals a balanced gender representation with most participants in their mid-20s and having a mean experience of 2.9 years (Srygley et al., 2023) This cohort represents a critical segment of healthcare professionals actively navigating workplace challenges. The academic and professional diversity enhances the study's relevance, reflecting various perspectives across different roles and levels of expertise (Musio et al., 2024).

### **Concerns About Organizational Factors**

Table 2 highlights key organizational concerns including job satisfaction, role clarity and perceptions of fairness in authority and resource distribution. Notably, dissatisfaction with job resemblance to ideal roles and concerns about wage sufficiency emphasize systemic issues affecting morale (Almogbel et al., 2024). These findings align with literature suggesting that organizational support and clarity are pivotal in maintaining healthcare professionals' well-being and performance (Rudolph, 2017).

### **Factors Causing Conflict**

Table 3 identifies educational differences and unclear communication as primary contributors to interprofessional conflict, with 19.8% rating communication issues as "very much" problematic. The inequitable distribution of rewards and perceived management awareness further compound workplace tensions. These issues underline the importance of fostering interprofessional collaboration and equitable management practices (Apore & Asamoah, 2019; Assi & Eshah, 2023).

### **Correlation Between EI and Conflict Management**

Table 4 establishes significant correlations between EI and conflict management, particularly the accommodation style. Positive correlations indicate that higher EI is associated with greater acceptance and adaptability in conflict scenarios. Conversely, negative correlations suggest that lower EI may exacerbate dissatisfaction and conflict intensity (Jowsey, 2020; Woolsey, 2016).

### **Implications of Findings**

These findings confirm the hypothesis that emotional intelligence significantly relates to conflict management styles and workplace outcomes. EI develops communication, enhances the resolution of conflict, and is a balancing act between individual and organizational expectations. The data also point towards a tentative suggestion that such training in EI may diminish workplace conflicts and enhance professional satisfaction. This is in line with earlier studies identifying EI as an important competency among healthcare professionals (Araque, 2015).

### **Methodological Strengths and Limitations**

The cross-sectional design can only provide an overview of the present dynamics in the target population. Because the study only deals with a

description, no establishment of cause can be claimed. The use of self-reported measures cannot avoid response bias; therefore, to enhance the reliability of data, this study relies on tools that have been validated, such as the WLEIS and TKI (Suleman et al., 2019; Rinfret et al., 2020).

### **Ethical Considerations and Rigor**

Adherence to ethical guidelines and ensuring participant confidentiality uphold the study's ethical standards. The rigorous design, use of validated instruments, and comprehensive data analysis reinforce the study's credibility and applicability (Senćanski et al., 2022).

1. **Cross-sectional Design:** Given the cross-sectional design of this research, an examination of the causal link between emotional intelligence and conflict management could not be done.
2. **Self-report data:** The mere dependence on self-report questionnaires may be prone to response biases in which participants may overstate or understate their abilities and experiences.
3. **Generalizability of Sample:** The proposed research at only one health care institution, namely Chandka Medical College, Larkana, will not allow generalization of the results to other areas or different institutions.
4. **Cultural Context:** The cultural and organizational environment in which the present study is embedded could shape perceptions about emotional intelligence and conflict management, hence generalizing across diverse cultural contexts.
5. **Tool-specific Bias:** Although these instruments are validated, for instance the WLEIS and the TKI, they don't capture the full complexity of EI and conflict within the clinical setting.

### **CONCLUSIONS AND RECOMMENDATIONS**

1. **Emotional Intelligence Training:**
  - Implement EI training programs tailored to healthcare professionals to improve self-awareness, emotional regulation, and social skills.
  - Focus on integrating EI concepts into medical and nursing curricula to prepare future professionals.
2. **Conflict Resolution Workshops:**
  - Provide workshops on conflict management strategies, focusing on collaboration and compromise to reduce workplace tensions.
  - Emphasize interprofessional communication and teamwork to minimize educational and hierarchical conflicts.
3. **Organizational Reforms:**
  - Enhance clarity in job roles, resource distribution, and performance reward systems to address dissatisfaction and reduce conflicts.
  - Ensure fair and transparent promotion and reward mechanisms to boost motivation and morale.
4. **Further Research:** Conduct longitudinal studies to explore causal relationships between EI and workplace outcomes.
  - Expand the study across multiple healthcare institutions and cultural settings for broader applicability.

- Investigate the impact of EI on patient care outcomes to provide a more comprehensive understanding of its importance in healthcare.

This study demonstrates the pivotal role of emotional intelligence in influencing conflict management strategies among healthcare professionals. Higher EI is associated with improved adaptability, communication, and conflict resolution, while lower EI correlates with dissatisfaction and workplace tensions. Addressing organizational concerns and fostering EI development can significantly enhance job satisfaction and interprofessional harmony.

The findings underscore the need for targeted interventions, such as EI training and organizational reforms, to address the systemic challenges identified. While the study has limitations, its insights lay the groundwork for further research into the intersection of emotional intelligence and workplace dynamics in healthcare. By prioritizing these areas, healthcare institutions can create more supportive environments, ultimately benefiting both professionals and patients.

### **FURTHER RESEARCH**

This research still has limitations, so further research on this topic is still needed.

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