EMOTIONAL INTELLIGENCE AMONGST PHYSIOTHERAPY UNDERGRADUATE STUDENTS

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# ABSTRACT



**OBJECTIVE**

To study the level of emotional intelligence in physiotherapy students

# STUDY DESIGN

A cross sectional study

# PLACE AND DURATION OF STUDY

Baqai Institute of Physical Therapy and Rehabilitation Medicine Karachifrom September 2016-October2016.

# SUBJECTS AND METHODS

A cross sectional, self administered, structured questionnaire survey was conducted. 142 Undergraduate physical therapy students from second, third, fourth and final years aged 16-28 yearsparticipated in the study from Baqai Medical University.The structured questionnaire was adopted from Sterrett's El questionnaire. It comprised of 30 questions, to evaluate the six domain of emotional intelligence by using 5-point Likert type scale

# RESULTS

The findings showed that out of 142 undergraduate students 23 were males and 119 were female. The mean and standard deviation of age were 21.16 (1.94). In all domains self awareness was found to be more than others, with themean and median scores of 19.47 and 20.Though self-confidence, self-control and social competency were at the lowest side, the complete emotional intelligence was evaluated with thehighest score 148 and lowest 61 with the mean 108.3 and median 110. After the complete score calculated participants were evaluated. Only

19.71o/o of students had good emotional intelligence with score

between 21-25 in all the areas.

# CONCLUSION

The study was carried out to have a fundamental data on emotional intelligence of physical therapy undergraduate students. Only 19.71% of the students had good Emotional intelligence and rest of them required definite intervention for the enhancement of their emotional intelligence.

# KEYWORDS

Emotional Intelligence, Social Competency, Empathy, Self Confidence

# INTRODUCTION

EmotionalIntelligence is anattribute just recently beingobserved for its importance in physical therapy and other health care disciplines.It is the ability to recognize and moderate one's own and others emotions', while simultaneously processing the Information in order to make a decision about the present situation. It is a vital element of numerous health professions. Emotional intelligence is a potential that can be on both conscious and unconscious controls'·'. Emotional intelligence plays the part to bring up the professional success4. These abilities help Individuals to stay relaxed in tense situations as well as help others in controlling their emotions. Unfortunately, emotional intelligence height in society and health profession is reducing'. The modern generation of students lacks in communication and decision making qualities5,6. In addition, they lack discipline and empathy, at the same ti me being highly stressed, agitated and selfabsorbed'·'.Tolerance level is necessary for new professionals to function in their academic and professional liveseffectively'·'.

Gard and Gyllensten analyzed the literature on the significance of emotions during treatment sessions. They concluded that physiotherapists tend to respond mainly at an intellectual level even though they are aware of underlying emotions. They believe that if physiotherapists could better identify and express emotions, there might be a rise in their clinical reasoning skills and eventually on the treatment outcomes'. Another study revealed the need of emotional intelligence. If the measurement of El is associated with effective therapist and patient interaction, and then physical therapy programs haveto target that part in theircurriculum".

Data is scarce in the country when Emotional intelligence of physiotherapists concerns, this demanded a study to cater the need. Present study was designed to fill in the gap. It is a cross sectional, self administered, structured questionnaire survey.

# SUBJECTS AND METHODS

142Undergraduate physical therapy studentsfrom second, third,fourth and final years, aged 16-28 years participated in the study from Baqai Medical University. The structured questionnaire was adopted from Sterrett'sElquestionnaire".It comprised of 30questions, to evaluate the six domain of emotional intelligence by using 5-point Likert type scale ranging from virtually never= 1 to virtually always= 5. All the students responded to each question. The total score was the sum of the 6 domains. The minimum and maximum score for each domain were 5 and 25 respectively. Average of higher than 20 were considered for



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good emotional intelligence. Score between 16-20 was counted for average, score below 15 and 10 were considered for poor and very poor emotional intelligence. The collected data were evaluated using statistical software SPSS version 20. The mean, medium, and mode for responsesbetween the groupswere than correlated.

# RESULTS

The findings showed that out of 142 undergraduate students 23 were malesand 119 were female. The mean and standard deviation of age were 21.16 and 1.94. In Table 1 statistical variables are illustrated with minimum and maximum scores of each of component of emotional intelligence.In all variables self awareness was found to be more than the others, with the mean and median scores of 19.47 and 20. Empathy and motivation were almost the samebetween all thestudents.

Though self-confidence, self-control and social competency were at the lowest side, the complete emotional intelligence was evaluated with the highest score 148 and lowest 61 with the mean 108.3 and median 110. After the complete score calculation, only 19.71% of students had good emotional intelligence with score between 21-25 in all theareas.Whereas more thanhalfof about 51.40% documented to have an average emotional intelligence. 28.16% of students have poor emotional intelligence while 0.70% are on beam ends scoring below 10.

## Table I

The statistical variance of the Six Components of Emotional Intelligence

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **N-142** | **Selr Aware-**  **ness** | **Selr Conll-**  **dence** | **Self Cont-**  **rol** | **Em- pathy** | **Moti- vation** | **Social Compe- tence** | **Overall**  **score** |
| Mean | 19.47 | 17.5 | 17.19 | 18.34 | 18.5 | 17.30 | 108.3 |
| Median | 20 | 18 | 17.00 | 19.0 | 19 | 17 | 110.0 |
| Standard | 2.82 | 3.13 | 2.861 | 2.84 | 2.84 | 3.23 | 17.72 |
| **Deviation** | | | | | | | |
| Minimum | II | 9 | 10 | II | II | 9 | 61 |
| Maximum | 25 | 25 | 25 | 24 | 25 | 24 | 148 |

## Table 2

Percentages of the overall subjects

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Emotional Intelligence Components** | **Scores between (21-25)** | **Scores**  **between**  **(16-20)** | **Scores between (10-15)** | **Scores between (9-1)** |
| Self Awareness | 36.6 | 54.2 | 9.15 |  |
| Self Confidence | 16.90 | 59.85 | 21.12 | 2.11 |
| Self Control | 13.38 | 55.63 | 30.92 |  |
| Empathy | 23.23 | 56.33 | 20.42 |  |
| Motivation | 23.23 | 64.78 | 11.97 |  |
| Social Competency | 19.71 | 51.40 | 28.16 | 0.70 |

# DISCUSSION

Resultshad shown that out of 142 students 119 were females.Thisis

in accordance with the trend in the majority of the colleges in Pakistan, as most of the females haveselected physiotherapy as their profession. The emotional intelligence of all the participants were evaluated by the six facetsof El: Self-awareness, self-confidence, self­ control, empathy, motivation, and social competency. When each domain was evaluated in present study, few had scored above 20; while the majority of the students obtained average scores (16-20) followed by poor (11-15) and very poor (below 10).The same trend was seen when the overall scores were considered.This showed that most of the studentsrequired assistance to improve theiremotional intelligence.Physiotherapy education isone of the most challenging, demanding, and stressful fields of study, as students are expected to acquire diverse competencies such as academic and clinical along with the interpersonal skills. Assessment of emotional intelligence is an important factor in determining students' adjustments and educational achievements. It is believed that emotional intelligence may explain differences in the quality of intrapersonal and interpersonal relationships and contributes to job performance and management effectiveness and predict success". However, it is also expected that students have to develop communications, professionalconducts and moralreasoning"·".Only few studieshave been doneandavailable data issparse.

We acknowledge several limitations in the study. This study was limited to the students of Baqai medicaluniversity and the randomly selected samples of male and female students were not proportionate to respective populations.These aspects may limit the generalizability of the findings.However, thisstudy providesbasisfor further exploration in the field of emotional intelligence which requiresagreat dealof research.

As El was assessed based on the self-reported scale,the validity of the data can be questioned. This type of studies can be accurate only when the individual's self-concept isprecise.The results of the study are prone for response biasasstudentscan tend to either exaggerate or fake theirresponses.

# CONCLUSION

The study was carried out to have a fundamental data on emotional intelligence of physical therapy undergraduate students. Only 19.71% of the physiotherapy students had good emotional intelligence and rest of them required definite intervention for the enhancement of theiremotionalintelligence.

Further research is required to identify the educational experiences that may produce an impact on the development of emotional intelligence. According to the specific cultural and social research, questionshave to be redesigned to assess the emotionalintelligence asPakistan being known for the culturaldiversification.

# REFERENCES

1. Mayer JD, Salovey P. The intelligence of emotional intelligence. 1993;17:433-442.
2. Konrath S,O'Brien E, Hsing C.Changes in dispositional empathy in American college students over time: A meta-analysis. Personality and Social Psychology Review. 2011;15:180-198.
3. Petrides K, Frederickson N, Furnham A. The role of trait emotional intelligence in academic performance and deviant



behavior at school.Personality and Individual Differences. 2004; 36:277-293.



1. Birks YF, Watt IS. Emotional intelligence and patient-centered care. Journal of the Royal Society of Medicine. 2007; 100: 368- 374.
2. Carr WD, Volberding JL. Employer and employee opinions of thematic deficiencies in new athletic training graduates. AthleticTraining Education Journal. 2012;7:53-59.
3. Newton F.Thenewstudent. About Campus. 2000;5:8-15.
4. Konrath S,O'Brien E, Hsing C.Changes in dispositional empathy in American college students over time: A meta-analysis. Personality andSocial Psychology Review. 2011;15:180-198.
5. Eberman L, Kahanov L. Emotional intelligence: A requisite for goodclinical practice.AthleticTraining Education Journal. 2011; 6:127-128.
6. Gard G, Gyllensten AL. The importance of emotions in physiotherapeuticpractice.PhysTher Rev. 2000;5:155-60.
7. Gard G, Gyllensten AL. Are emotions important for good interaction in treatment situations? Physiother Theory Pract. 2004;20:107-19.
8. Serrett EA. The Manager's Pocket Guide to Emotional Intelligence: From Management to Leadership. Ch. 3. Amherst Massachusetts: HRD Press; 2000. Assesssing emotional

intelligence; pp. 21-9.

1. Shetty CS, Venkatappa KG, Parakandy SG, Sparshadeep EM, Das SK. Assessment of emotional intelligence in first year medical students: A questionnaire based study. IOSR J Dent Med Sci. 2013; 3(4): 23-6.
2. Barnitt RE. 'Deeply troubling questions': The teaching of ethics in undergraduate courses.

BrJOccupTher.1993;56:401-6.

1. Finley C, Goldstein MS. Curriculum survey: Ethical and legal instruction-A report from the APTA Department of Education and the APTA Judicial Committee. JPhys Ther Educ.1991;5:60- 4.

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