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Relationship between Emotional Intelligence (EQ) and Psychological Adjustment among Health Care Workers (HCA) During Covid-19 Pandemic

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Abstract:

During COVID-19 pandemic, healthcare workers, in particular, were confronted with a heavy workload, anxiety, fear, and stress, making it impossible for them to adjust psychologically to the new terrible scenario. This study aims to assess the relationship between Emotional Intelligence (EQ) and Psychological Adjustment in frontline healthcare workers (HCWs) during COVID-19 pandemic. It was hypothesized that Emotional Intelligence (EQ) and Psychological Adjustment will be positively correlated among healthcare workers (HCWs) in COVID-19 pandemic. This research was carried out during the second wave of a pandemic in Maharashtra's Marathwada region. The study included 35 HCWs, 20 of whom were male and 15 of whom were female. The study used a correlational design. The participants were given the EQ test by N. K. Chaddha and the Weinberger Adjustment Inventory by Weinberger. After the data was collected, it was scored and interpreted. Pearson R was determined using the Pearson Correlation Coefficient Calculator. The Correlation Coefficient r had a value of 0.66. As a consequence of the statistical data analysis and results, it was discovered that Emotional Intelligence (EQ) and Psychological Adjustment among healthcare personnel had a moderate positive correlation (HCWs). Sensitivity, Maturity, and Competence are the three subscales of the EQ scale. Sensitivity and Psychological Adjustment have a 0.44 significant positive correlation. Maturity and Psychological Adjustment Correlation was determined to be 0.61. Furthermore, statistical research revealed a significant positive correlation of 0.53 between Competency and Psychological Adjustment. According to the findings of this study, having a high EQ can aid in better psychological adjustment.

Keywords: Emotional Intelligence (EQ), psychological adjustment, COVID-19 pandemic, healthcare workers.

Introduction:

The emergence of the novel coronavirus pandemic(COVID-19) has been linked to Wuhan in China. The first case of a patient suffering from COVID 19 in India was reported on 30 th January 2020. India currently has the largest number of confirmed cases in Asia. The per day cases peaked mid september in India with over 90,000 cases reported per day and have since come down to below 40,000 per day in December 2020.On 11 March 2020 , WHO(World Health Organization) declared CoronaVirus outbreak as a pandemic and asked the countries to take immediate actions in relation with the current situation for protecting people’s lives. On 11 March 2020 , WHO(World Health Organization) declared the CoronaVirus outbreak as a pandemic and asked the countries to take immediate actions in relation with the current situation for protecting people’s lives. The WHO country office for India and the government of India have been working together since then. On 23 rd March 2020 , the Government of India ordered a nationwide lockdown, since then the nation has experienced stages of lockdown till June 2020. The lockdown affected people in many ways. Along with its effect on social and physical aspects , lockdown also affected the psychological and mental well being of people.

Emotional Intelligence: Abraham Maslow first proposed the concept of emotional strength in the 1950s. The phrase "emotional intelligence" appears in a 1964 study by Michael Beldoch and a 1966 Emotional intelligence has been defined, by Peter Salovey and John Mayer, as "the ability to monitor one's own and other people's emotions, to discriminate between different emotions and label them appropriately, and to use emotional information to guide thinking and behavior" This definition was then broken down and refined into four proposed abilities: perceiving, using, understanding, and managing emotions. Emotional intelligence also refers to the ability to combine intelligence, empathy, and emotions in order to improve thought and comprehension of interpersonal dynamics.

Psychological Adjustment: In psychology, adjustment refers to the behavioral process by which humans and other animals achieve a balance between their numerous wants or between their demands and the difficulties in their circumstances.

In this COVID-19 pandemic, it was hard for people including healthcare workers(HCW) to adjust to the new situation psychologically.The objective of this study was to find the relationship between healthcare worker's Emotional Intelligence level(EQ) and Psychological Adjustment with this pandemic and to see if there is any correlation between them.

Hypothesis: Emotional Intelligence (EQ) and Psychological Adjustment will be positively correlated among Healthcare workers(HCWs) in COVID-19 pandemic.

Variables are Emotional Intelligence(EQ) and Psychological Adjustment.

Review of Literature

Smith, Sara A. Cloonan, Michael Strong, William D. S. Killgore)

Another study was conducted to better understand the psychological impact of the COVID-19 pandemic on healthcare workers (HCWs) in acute hospital settings in the South- East of Ireland, as a necessary step in driving policies and measures to ensure their psychological well-being. It was a multicentre observational cohort study of healthcare workers in acute hospital settings in Ireland's south-east. A self- administered electronic survey was sent to healthcare personnel at two acute hospital settings in the aforementioned region, A and B. The survey was prepared with Smart Survey and disseminated over the SecureWeb Mail service of the Health Service Executive. The sample size was set at 326 healthcare workers. The validated

Depression, Anxiety, and Stress Scale (DASS-21) and the Impact of Events Scale- Revised (IES-R) instruments were utilized in the questionnaire. The prevalence of depression, anxiety, stress, and post-traumatic stress disorder (PTSD) among all HCWs was the main finding. The Depression, Anxiety, and Stress Scale (DASS-21) provides independent assessments of depression, anxiety, and stress. Positive depression scores were found in 201 individuals, and positive anxiety and stress scores were found in 213 workers. In this study, psychological discomfort was discovered among healthcare personnel. HCWs should be provided training and intervention on how to enhance Emotional Intelligence, in my opinion. (Claire Sheehy, Saied

(Alina Rashid and Kanza Faisal)

Another study was conducted with the goal of determining the mediating function of job engagement in the direct influence of emotional intelligence on the work performance of health-care professionals. It was a cross-sectional research project. The Wong and Law Emotional Intelligence Scale (WLEIS), the Utrecht Work Engagement Scale, and the Individual Work Performance Questionnaire were completed by 1549 health-care employees (62.1 percent women; mean age 36.51 years) (IWPQ). The information was gathered by giving the participants a Google form including these scales through email. Even after controlling for socio-demographic variables, the results showed that work engagement has a mediation influence between emotional intelligence and work performance. The vigor component appears as the most crucial of the three structures of engagement, surpassing devotion and absorption.

(Mein- WoeiSuen, Ni'matZahroh, ValendriyaniNingrum, Widayat, MyrtatiDyahArtaria, Ni'matZahroh)

During the COVID-19 pandemic, another study was done to determine the predictors of burnout in healthcare workers in two Romanian hospitals. Burnout, job demands, job resources, and personal resources were all measured in a survey of 523 healthcare employees. The questionnaire was available in both paper & pencil and online formats. Job demand (work–family conflict, lack of preparedness/scope of practice, emotional demands) was positively associated with burnout, while job resources (training, professional development, and continuing education; supervision, recognition, and feedback; autonomy and control) were negatively associated with burnout. In terms of burnout, there were no differences between men and women. Limitation of this study was the sample consists of Romanian employees, raising concerns regarding the generalizability of our findings to other countries

Research Methodology:

Participants:

This study included a total of 35 healthcare workers (HCWs). Since the nationwide COVID-19 pandemic until the time of data collection, all of the participants have been frontline healthcare workers (present). Healthcare Workers (HCWs) were chosen at random. Participants had a variety of qualifications, including BAMS (Bachelor of Ayurveda, Medicine, and Surgery), BHMS (Bachelor of Homeopathic Medicine and Surgery), MBBS (Bachelor of Medicine and Bachelor of Surgery), Physiotherapists, Pharmacists, and Pathologists, among others. All of the participants were medical practitioners from Maharashtra's Marathwada

region. There were 20 men and 15 women among the 35 healthcare staff (HCWs). The participants ranged in age from 35 to 60 years old. There were no participants who declined to participate in the study or who did not finish the questionnaire. Every participant was required to answer every question.

Design:

Co-relational design was ideal for determining the relationship between Emotional Intelligence and Psychological Adjustment among healthcare workers. As a result, the study's design was correlationl. The Pearson Correlation Coefficient calculator was used to calculate the Pearson correlation coefficient(R).

Measures:

In this investigation, two scales were used. The Emotional Quotient (EQ)Test was used to test
EQ, and the Self Restraint - Weinberger Adjustment Inventory was utilized to assess
Psychological Adjustment.

Dr. DALIP SINGH and Dr. NK CHADHA developed the Emotional Quotient Test.

Emotional sensitivity, emotional maturity, and emotional competence are the three psychological characteristics evaluated by this EQ test. This test has been standardized for professional managers, corporations, bureaucrats, artists, graduate students, and the adolescent population. This EQ test has a test retest and split half reliability of 0.94 and 0.89, respectively, and a validity of 0.89. More than 25,000 people from all over the world have tried it online. This EQ test allows users to learn more about themselves and the people they interact with. This test assesses how people apply emotional abilities in their personal and professional lives.

There are 22 different scenarios (Questions) and four different ways to answer them. This EQ test assesses a person's emotional reactions to various scenarios. Individuals must respond based on their feelings, not their thoughts, and there is no right or wrong answer. The raw scores are added together to get the total EQ. There are 3 subscales of This IQ test -- Sensitivity, Maturity and Competency.

Weinberger Adjustment Inventory: Self-Restraint: (WAI; Weinberger & Schwartz, 1990)

Daniel A. Weinberger devised this scale. The Weinberger Adjustment Inventory is a test that evaluates a person's social-emotional adjustment in the face of external restrictions. There are four subscales: impulse control (e.g., "I say the first thing that comes to mind without thinking it through."), aggression suppression (e.g., "People who get me angry better watch out."), consideration of others (e.g., "Doing things to help other people is more important to me than almost anything else."), and temperance (e.g., "I say the first thing that comes to mind without thinking it through."), and temperance (e. (Responsibility). Participants are asked to rate how much their behavior in the previous six months matches a set of claims (1= False, 5= True).More positive behavior is indicated by higher scores on each of the subscales described (i.e. more impulse control, greater temperance and greater consideration for others). The Likert Scale is utilized in this inventory, which has 30 questions. The total score is obtained by adding the raw scores together. A high amount of emotional restraint is indicated by a maximum score of 150. A low level is indicated by a minimum score of 30.

Procedure:

35 healthcare workers who were frontline workers during the pandemic were chosen at random and an email with a google form was issued to them. The permission form on Google had three components. Questions about demographic traits were asked in the first segment (age, area, gender, educational qualification,etc.). The Emotional Quotient Test and the Adjustment
Inventory were included in the second and fourth sections of the google form, respectively, and all of the questions were required. The data was personally scored and interpreted once it was collected.

Data Analysis:

The value of correlation coefficient r was calculated using Pearson Correlation Coefficient Calculator.

Results:

The primary goal of this research was to determine the association between Emotional Intelligence (EQ) and Psychological Adjustment among COVID-19 pandemic healthcare personnel. To calculate the Pearson r correlation coefficient, the mean of the EQ test Adjustment Inventory scores was first obtained, and then the r was calculated using the Pearson correlation coefficient formula. A graph was created for qualitative analysis.

Table 1: Mean, standard deviation for both the gender groups for Emotional Intelligence and Psychological Adjustment

	Gender	N	Mean	Standard Deviation
Emotional Intelligence	Male(0) Female(1)	20 15	360.75 344.66	43.98 46.42
Psychological Adjustment	Male(0) Female(1)	20 15	111.60 108.86	15.41 11.13

Table 2:Summary Table showing Pearson's Product moment correlation coefficient relationship between Prosocial emotional intelligence, psychological adjustment and its aspects

**. Correlation is significant at 0.01 level (2-tailed)

*. Correlation is significant at 0.05 level(2-tailed)

The correlation coefficient r between Emotional Intelligence was 0.66, demonstrating a significant moderate positive correlation between Emotional Intelligence (EQ) and Psychological Adjustment in HCWs, r(34)=0.66, p=0.000016. This means there is a tendency for high X variable scores go with high Y variable scores and for high Y variable scores go with high X variable scores. Here, X variable is EQ and Y variable is Psychological Adjustment. Hence according to above calculations and results it is proved that there is positive correlation between Emotional Intelligence and Psychological Adjustment among healthcare workers in COVID-19 pandemic. Therefore this study's hypothesis is proved. This means that healthcare workers with high EQ are prone to higher Psychological Adjustment and vice versa.

Table 2: Summary of simple regression analysis with Emotional Intelligence as predictor and psychological adjustment as the dependent variable

Model	Sum of square	Degree of Freedom (DF)	Mean square	F	R	R2	β	t
Regression	2776.69	1	2776.69	25.90**	0.66	0.44	0.66	2.81
Residual	3537.87	33	107.20					5.08
Total	6314.57	34						

**p<0.01

Simple regression was carried out to find out if emotional intelligence could be a significant predictor of psychological adjustment. Emotional Intelligence contributes 44% variance to Psychological Adjustment, df(1, 33)=25.90, p<0.01). Beta weight of Emotional Intelligence in explaining Psychological Adjustment was statistically significant ($\boldsymbol{\beta}$=0.66, t=2.81, p<0.01).

Discussion:

As of October 4, 2020, the COVID-19 pandemic was a global menace that has resulted in massive mortality and morbidity, with over 40 million illnesses and over one million deaths. Most afflicted countries have failed to meet demand for personal protective equipment and infrastructure due to the disease's rapid spread. It has wreaked havoc on businesses and social cohesiveness while also creating mental health concerns. 10 HCWs are dealing with higher workloads as a result of increased demands on an already overburdened healthcare system, as well as the ever-present risk of infection and the fear of transfer to their family members. They typically demand self- quarantine when they come into contact with COVID-19 verified patients, which, when paired with social isolation and prejudice, leads to complex emotional reactions. Burnout has also been linked to physical and psychological manifestations of the fight between professionalism and personal self-doubt. According to statistics, healthcare professionals found it difficult to adjust psychologically to their new situation. Anxiety, worry, uncertainty, and fear of Coronavirus infection plagued healthcare personnel. Emotional Intelligence is a crucial aspect in managing emotions and stress, according to certain research included in the review of literature.

The current study looked at the relationship between Emotional Intelligence and Psychological Adjustment among healthcare personnel during a pandemic (HCWs). As a result, 35 HCWs were randomly selected and given a Google form with both the IQ Test and the Adjustment Inventory scales. HCWs of IQ and Psychological Adjustment are favorably related, according to the graphs above. Because this was a correlational

study, I needed to determine the correlation coefficient. The coefficient of correlation was calculated using Pearson's Correlation (R) formula. There was no significant difference between means of males and females in Emotional Intelligence test score, Mean(Males)=360.75 and Mean(females)=344.66. Similarly, there was no significant difference among means of males and females in Psychological Adjustment scale score, Mean(Males)=111.60 and Mean(Females)=108.86. After more calculations and feeding those data into the Pearson Correlation Coefficient procedure, we got the value of r. The correlation coefficient r was 0.66, demonstrating a significant moderate positive correlation between Emotional Intelligence (EQ) and Psychological Adjustment in HCWs, r(34)=0.66, p=0.000016. Emotional Sensitivity, Emotional Maturity, and Emotional Competency are the three subscales of the Emotional Intelligence Scale. The subscales of the Emotional Intelligence scale were calculated to determine the correlation between Emotional Intelligence (EQ) and the subscales of the Emotional Intelligence scale. Sensitivity and Psychological Adjustment were found to have a moderately positive correlation, with r(34)=0.44 and p=0.0081. Also Maturity and Psychological Adjustment were found to be moderately positively correlated, r(34)=0.61, p=0.0001. Furthermore, Competence and Psychological Adjustment were moderately positively correlated, r(34)=0.53, p=0.001.

To see if emotional intelligence could be a major predictor of psychological adjustment, researchers used simple regression. Emotional Intelligence contributes for 44% of Psychological Adjustment variance (df(1, 33)=25.90, p0.01). In explaining Psychological Adjustment, the beta weight of Emotional Intelligence was statistically significant (=0.66, t=2.81, p0.01).

Limitations:

1. Because there were only 35 participants in this study, all of whom came from the Marathwada region of Maharashtra, the conclusions of this study cannot be generalized all over the world.
2. When calculating the mean and correlation coefficient r, the gender element was not taken into account. If the mean of males and females had been calculated separately, the findings might have been different.
3. Some participants may have been given answers that conformed to societal norms (Morals). We can't say that the outcomes of this study are 100 percent accurate because of his flaw. As a result, more investigation is strongly advised.

Because of all the above limitations of this correlational study, further research is recommended to know more about the relationship between these variables.

Conclusion and Applications:

Disasters, pandemics, and other high-trauma events may signal that health-care workers require additional support tools to assist them produce and identify their own feelings, i.e. to improve their Emotional Intelligence. The study revealed that HCWs EQ and Psychological Adjustment were positively correlated, proving the hypothesis. Healthcare personnel with a high IQ, according to this study, were better at psychological adjustment. As a result, a variety of interventions can be adopted to help HCWs manage their emotions, workload, and stress in the event of a disaster such as a pandemic.

The majority of those who took part in this study came from underdeveloped areas. In poor places like Marathwada, it is challenging to raise public awareness about the importance of mental health. Only when research and surveys like these are disseminated can healthcare workers (HCWs) and others comprehend the notion of Emotional Intelligence and its relationship to Psychological Adjustment. According to several studies, practising Yoga, Mindfulness, and keeping a Gratitude Journal can assist HCWs and others deal with psychological challenges.IfHCWs will practice all these interventions then it will be a lot easier for better Psychological adjustment in difficult situations like pandemic.

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