Emotional Intelligence in Emergency Medicine Residents

Hamid Reza Morteza Bagi¹, Amir Gaffarzad², Golshan Farahi³*
¹Associate professor of emergency medicine, emergency medicine research team, Tabriz University of medical sciences
²Assistant professor of emergency medicine, emergency medicine research team, Tabriz University of medical sciences
³Resident of emergency medicine, emergency medicine research team, Tabriz University of medical sciences

Corresponding Author: Amir Gaffarzad, E-mail: amir.gaffarzad@gmail.com

ABSTRACT

Background and aims: Education of life skills and control of emotions during stressful periods are one of the essential needs of human being. Social intelligence in emergency medicine assistants in first-line is important to communicate properly with clients to provide health services and proper stress control. Material and Methods: In this study, 35 emergency medicine assistants completed the “Aung Tun Thet” questionnaire in two steps before and after communication skills education workshops, and the results were compared before and after the test. Results: There was statistically significant difference between before and after the workshop on social intelligence assistants. Conclusion: The overall result of the study showed that, after holding workshop, the social intelligence and communication skills of emergency medicine assistants increased significantly.

INTRODUCTION

Intelligence refers to the ability of individuals to learn and to argue. This is the same as the underlying concepts of common psychometrics such as intelligence tests, IQ and the like. Emotional intelligence is the ability to recognize the excitement of oneself and others and adjust emotions in social situations. Social intelligence has a meaning close to concepts such as social competence and social skills and also shares the concepts of Emotional intelligence and interpersonal intelligence. Social intelligence was first introduced as a single concept (1).

But later, others defined it as two types of individual intelligence that deal with two aspects of interpersonal intelligence and intrapersonal intelligence that include knowledge and awareness about oneself and others. The concept of social intelligence was introduced by Edward Thorndike in 1920, a term that refers to the ability to understand others, to act intelligently and to behave in relationships with others and to use them in adaptive social interactions (2).

Emotional–social intelligence is the intersection point of abilities, skills and social–emotional facilitator of a person that interconnected with each other. This set determines how effective we can in understanding and expressing ourselves, understanding others, communicating with them, and confronting the needs and problems of daily life. According to emotional–social intelligence, emotions, skills, and social and individual capabilities are important human life events that include valuable information on how to solve daily problems. In this way, it is an essential factor in physical and psychological adjustment with intelligent application them (3). Of course, social intelligence consists of eight different factors (4, 5).

Social intelligence has perceptual, analytical, cognitive, and behavioral components. Being intelligent in analyzing the social behaviors of others plays a central and bilateral role; because it includes the ability of identifying stimulants and various ways of understanding and recognition of people. In addition, people with high social intelligence are able to produce sufficient behavior to obtain and achieve their desired social goals. The meaning of social intelligence is common with concepts such as emotional intelligence and intrapersonal intelligence (6). In the case of emotional intelligence, individuals with emotional abilities can face life challenges better and regulate their emotions effectively and have better mental health and social relationships (7).

The psychological literature states that emotional intelligence plays a very useful role in helping people in the field of...
communication in stressful environments such as emergency rooms of hospitals. Related to this, researches have shown that emotional intelligence is a constitute element in success, high performance, health, life satisfaction and EQ, and it can be used to determine the level of relations for individuals (8,9).

Considering the importance and necessity of life skills education for controlling emotions during life and its confirmation by many studies, and the high risk and stressfulness of the emergency medicine assistants, and also the importance of communication with clients of health care; we have decided to evaluate social intelligence among emergency medicine assistants in Tabriz University of Medical Science by “Aung Tun Thet” questionnaire which is one of the well-known social intelligence measurement tests and has been approved in Iran (12).

With this action, while gaining general information on the level of social intelligence of emergency medicine assistants, strategies can be developed to increase communication skills and how to deal with clients for emergency medicine assistants.

MATERIAL AND METHODS

The present study is an analytical, and before and after interventional trial study, which is initially approved by Medical Ethics Committee of Tabriz University of Medical Science, and its professional ethic status has been reviewed and accepted.

In this study, the study population were emergency medicine assistants of Tabriz University of Medical Sciences. The sample size was obtained by census.

Assistants of all three courses (first year, three months after the beginning of the course) were examined.

All the assistants entered the study with satisfaction, and only the exclusion criteria was dissatisfaction with participating in the study. In this study, data was collected using a demographic questionnaire and social intelligence questionnaire “Aung Tun Thet” (2008). In order to collect data, assistants are asked to complete the questionnaire. Trained people were selected as questioners to provide and collect questionnaires. Then, assistants trained in a communication skill workshop and then the above questionnaires were used again.

In order to increase the accuracy of the completed questionnaires, the participants were trained to receive the completed questionnaires carefully and, if there was a defect, they should be guided. The questionnaire consists of 45 questions, that each of them related to oneself will be answered by choosing “Yes” or “No”. Also, in this study, the score of the questionnaire will be between 0 and 45.

RESULTS

In the study, 21 of the participants were male and 14 of them female. The average age of participants calculated 33.91 years old with the standard deviation of 4.

Fourteen of participant were first–year assistants, 9 were second–year, and 12 were emergency medicine assistants.

There wasn’t any significant difference in average scores of three groups of first, second and third year assistants before and after education workshop. Before the education workshop, the average scores in the group of residents in the first, second and third year was 29.21, 28.67 and 29.97 respectively. After communication skills workshop, the average score of social intelligence calculated in these three groups as well which were 33, 30 and 33.5 respectively.

Before communication skill workshop the average score of social intelligence for female participants was 29.79 and 29 for male (p=0.5).

After the workshop, the average score among male and female participants was 32.5 and 33.21 respectively (p=0.4) Figure 1.

Before workshop, the average level of social intelligence of married group was 30.18 and 27.85 was the average level of single group. By comparing these average scores and p-value which was 0.04; the results of average scores of married and single groups which were 33.64 and 30.62 respectively, was similar with p-value of 0.05 Figure 2.

Before communication skills workshops, the minimum score among participants was 23 and the maximum score was 35. The average score of participants before participating in workshop was 29.31 with standard deviation of 3.4.

After workshop, the minimum score among participants was 23, and the maximum was 43 Figure 3. The average score of social intelligence level calculated 32.51 with standard deviation of 4.5. The comparison of average scores before and after workshops showed that assistant’s scores increased significantly after workshop (p=0.00).

DISCUSSION

After the workshop, the average social intelligence of the assistants increased to 3.2, indicating the proper effect of
holding workshops on assistants. Therefore, with appropriate planning and conducting regular workshops, it would be hopeful to improve service status of hospitals in the country. Similar results had been obtained before our study in a research by Mahmoudi Raad et al. in Tehran. This study showed that conducting regular workshops on how to communicate with clients increases the social intelligence of individuals (10). Increasing emotional intelligence helps a person to respond more appropriately to critical and stressful situations. In 2012, Golman’s study found that nurses had higher emotional intelligence and showed on time and appropriate emotional responses to patients’ physical health (13).

One of the other interesting results in our study is the comparison of social intelligence between male and female. The results show that the average level of social intelligence of female was slightly higher than male which wasn’t statistically remarkable. In a study by Saffarinia et al. in 1389 in Kermanshah, social intelligence of male and female participants was not statistically different (12). One of the other results of our study was the comparison of the social intelligence of married and single people in the study. Both before and after the workshops on communication skills of social intelligence, married people were significantly higher than those who were single. Due to the lack of a coherent study in this field, further consideration of the result obtained is recommended for rejection or proof.

In our study, it was found that there is a positive correlation between the social intelligence of emergency medicine assistants and their age, as their age increases, social intelligence also increases.

Our study also found that there was no correlation between the academic year of the assistants and their emotional intelligence. There was no statistically significant difference between the assistants of different academic years.

At the end, this study despite the various limitations, indicated that with a correct education, social intelligence and communicational skills among individuals can be improved.

Our study results support the results of the study by Kahrizi et al., Which suggests that our communication abilities depend on continuous learning and periodic training (11).

The overall result of the study showed that after conducting workshops on social intelligence and communication skills, emergency medicine assistants increased significantly.

REFERENCES