EMOTIONAL AND SPIRITUAL INTELLIGENCE OF EMPLOYEES IN THE WORKING IN MULTI SPECIALTY HOSPITALS IN COIMBATORE

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ABSTRACT

This study aims to examine the influence of emotional and social intelligence on millennial employees' engagement in the medical sector. The target population chosen were millennials because, globally, they would generate 75% of the working community by 2025. This was a quantitative study that used the survey method to collect primary data. In addition, self-reported questionnaires were used to collect cross-sectional data. This study revealed that both spiritual intelligence and emotional intelligence are important determinants of employee engagement. Thus, this study will provide a better understanding of the role of emotional intelligence and spiritual intelligence to improve millennials' engagement. This was the first study of its kind that was done among millennials in Indian's Multi specialty hospitals.

Keywords: Emotional Intelligence, spiritual intelligence, employee engagement and Hospital.

INTRODUCTION

In the contemporary workplace, particularly within the demanding and multifaceted environment of multi-specialty hospitals, the concept of intelligence has transcended beyond the traditional measures of cognitive abilities. Emotional intelligence (EI) and spiritual intelligence (SI) are increasingly recognized as critical competencies that influence not only individual performance but also organizational effectiveness. Emotional intelligence refers to the ability to identify, understand, and manage one's own emotions and the emotions of others. Spiritual intelligence, on the other hand, encompasses the capacity to apply spiritual resources and values to enhance one's life and work. In the context of multi-specialty hospitals in Coimbatore, the interplay between these forms of intelligence can significantly impact employee well-being, patient care, and overall hospital performance.

Emotional Intelligence

Emotional intelligence is a multifaceted construct that involves several key components: self-awareness, self-regulation, motivation, empathy, and social skills. Daniel Goleman, a prominent psychologist, popularized the concept and highlighted its relevance in professional settings. Self-awareness involves recognizing one's emotions and their effects on others. Self-regulation refers to the ability to control or redirect disruptive emotions and impulses. Motivation involves a passion for work that goes beyond money and status. Empathy is the ability to understand the emotional makeup of

other people, and social skills are about managing relationships to move people in desired directions.

Importance of Emotional Intelligence in Healthcare

In the healthcare sector, particularly in multi-specialty hospitals, emotional intelligence is indispensable. Healthcare professionals frequently encounter high-stress situations, emotional labor, and the need for effective communication with patients and colleagues. High EI among employees can lead to better stress management, improved teamwork, enhanced patient relationships, and overall higher job satisfaction. For instance, empathetic interactions with patients can lead to better patient compliance and satisfaction, as patients feel understood and cared for on a personal level. Furthermore, emotionally intelligent leaders in healthcare can foster a supportive and collaborative work environment, which is crucial for maintaining high standards of patient care and staff morale.

Spiritual Intelligence

Spiritual intelligence is a less explored but equally important dimension of workplace intelligence. It involves the ability to use spiritual values and resources to solve problems and achieve excellence. According to Zohar and Marshall, spiritual intelligence is the intelligence with which we address and solve problems of meaning and value. It is the foundation for the qualities such as humility, compassion, integrity, and a sense of higher purpose.

Role of Spiritual Intelligence in Healthcare

In a healthcare setting, spiritual intelligence can manifest in various ways, including the provision of holistic care that addresses not just the physical but also the emotional and spiritual needs of patients. Employees with high SI are likely to exhibit a strong sense of purpose, ethical behavior, and a compassionate approach to patient care. This can contribute to a more humane and patient-centered healthcare environment, which is particularly important in multi-specialty hospitals where patients often face complex and life-threatening conditions. Additionally, spiritual intelligence can support healthcare professionals in coping with the emotional demands of their job, leading to reduced burnout and enhanced resilience.

Integration of Emotional and Spiritual Intelligence

The integration of emotional and spiritual intelligence can create a powerful synergy that enhances the overall effectiveness of healthcare professionals. Employees who are both emotionally and spiritually intelligent are likely to have a balanced

approach to their work, combining empathy and compassion with a sense of purpose and ethical integrity. This integration can lead to a more cohesive and supportive work environment, where employees feel valued and motivated to provide the best possible care for their patients.

Context of Multi-Specialty Hospitals in Coimbatore

Coimbatore, a major city in Tamil Nadu, India, is known for its advanced healthcare infrastructure and numerous multi-specialty hospitals. These hospitals provide a wide range of services, from primary care to specialized treatments, and cater to a diverse patient population. The dynamic and often high-pressure environment of these hospitals necessitates a workforce that is not only technically skilled but also emotionally and spiritually intelligent. In such settings, the ability to manage stress, maintain compassion, and uphold ethical standards is crucial for ensuring high-quality patient care and employee well-being.

Impact on Employee Well-being and Organizational Performance

The well-being of employees in multi-specialty hospitals is directly linked to their emotional and spiritual intelligence. High EI and SI can lead to lower levels of stress, higher job satisfaction, and better mental health among healthcare professionals. This, in turn, can reduce turnover rates and enhance the overall performance of the hospital. Moreover, emotionally and spiritually intelligent employees are likely to contribute to a positive organizational culture, characterized by mutual respect, support, and a shared commitment to patient care. Therefore, the current author will focus on the relationship between emotional and spiritual intelligence towards employee engagement by Hospital employees in the Multi-specialty hospitals in Indian. The results of this study will guide the Human Resource managers to acknowledge the value of accepting emotional and spiritual intelligence in enhancing Hospital employees' engagement.

STATEMENT OF THE PROBLEM

Employee engagement is a critical factor in the performance and success of multi-specialty hospitals. However, the complex and high-pressure environment of healthcare settings poses significant challenges to maintaining high levels of engagement among employees. Emotional intelligence and spiritual intelligence have been identified as key factors that can enhance employee engagement by improving interpersonal relationships, reducing stress, and fostering a sense of purpose and well-being. Despite their potential benefits, there is limited research on the interplay between emotional and spiritual intelligence and their combined impact on employee engagement in the healthcare sector,

particularly in multi-specialty hospitals in Coimbatore. Based on the problem the following are considered to be research problems of the study,

- What are the demographic profiles of employees working in multi-specialty hospitals in Coimbatore, and how do these profiles relate to their levels of emotional and spiritual intelligence?
- How reliable are the measures of emotional intelligence, spiritual intelligence, and employee engagement among employees in multi-specialty hospitals?
- What is the relationship between emotional intelligence, spiritual intelligence, and employee engagement among employees in multi-specialty hospitals, and which of these factors has the greatest influence on employee engagement?

OBJECTIVES OF THE STUDY

- To Analyze the Demographic Profiles of Employees in Multi-Specialty Hospitals in Coimbatore.
- To Evaluate the Reliability of Emotional and Spiritual Intelligence Measures.
- To Examine the Relationship Between Emotional and Spiritual Intelligence and Employee Engagement.

SCOPE OF THE STUDY

The study focuses on analyzing the demographic profiles (gender, age, marital status, and educational qualifications) of employees working in multi-specialty hospitals in Coimbatore to understand their distribution and potential impact on emotional and spiritual intelligence.

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The study evaluates how emotional and spiritual intelligence influence employee engagement levels in multi-specialty hospitals, determining which factor has a more significant impact on enhancing engagement among healthcare professionals.

METHODOLOGY AND RESEARCH DESIGN

Research Design

This research is designed to observe the relationship between two independent variables of emotional and spiritual intelligence and the dependent variable of employee engagement. This was a quantitative study based on a deductive approach. Cross-

sectional research was to be conducted by recognizing a sample that signifies the chosen population. The variables were measured at a single time phase utilizing a survey design strategy (Clark and Creswell, 2015). The scholar generated a survey through a quantitative process, which were directed the survey questionnaires to the sample to collect data (Clark and Creswell, 2015). This research used a deductive approach, in which the scholar focuses on verifying hypotheses using a large amount of numerical data (Clark and Creswell, 2015). Self-Administered Questionnaires (SAQ) were distributed to gather data from Hospital employees in the Multi-specialty hospitals. The SPSS was to be utilized to evaluate the data and present the outcomes.

Population, Sampling and Sample Size

The population of this study is Hospital employees affiliated with the Multi-specialty hospitals in Coimbatore. A probability sampling method was used because it allows every element in the target population to be given an equal chance. Sampling was undertaken to choose a suitable number of sample elements from the target population that accurately signifies the population (Sekaran and Bougie, 2016). A sampling frame was developed to show the list of individuals in the target population (Zikmund et al., 2012). The sample size implies the number of respondents from whom the data was gathered for further analysis (Fink, 2003). Simple random sampling was used to select the sampling elements from the sampling frame. Many research papers indicate that the appropriate sample size is higher than 30 and less than 500, which is satisfactory (Roscoe, 1975). various rules-of-thumb have been advanced, including (a) a minimum sample size of 100 or 200 (Boomsma, 1985). For this study, the target sample size was 150 respondents.

Instrument and Questionnaire Design

The survey was designed through a questionnaire adapted from past researches, where the goal is to collect data through the relevant respondents based on the current condition. The 5-point Likert Scale was used because this is one of the most frequently used variations of the summarized rating scale. The scale comprises an announcement that is expressed with a positive or negative attitude towards the object of interest (Cooper and Schindler, 2006). The first section of the questionnaire was based on the demographic information of the respondents. The second section is close-ended questions on the dependent variable of employee engagement. Employee engagement questions were taken from the Work and Well-Being Survey (UWES) by Schaufeli and Bakker (2006). The third section comprises the independent variables, which are emotional intelligence

and Spiritual Intelligence. Emotional intelligence questions were adapted from self-reporting WLEIS (Wong and Law, 2002), whereas spiritual intelligence was adopted from the Self-Report Inventory by King (2009). The pilot study was done on 30 respondents. The objective was to test the instrument. The data reliability of the data was confirmed.

Data Collection and Preliminary Checking and Data Analysis

In collecting quantitative data, it is required to identify the data process (Clark and Creswell, 2015). The process of collecting the data is necessary to understand because it is important to confirm data quality (Clark and Creswell, 2015). A total of 160 questionnaires were distributed electronically, and another 40 were distributed by hand to the respondents. A total of 130 questionnaires were obtained electronically, and another 20 were collected through the direct distribution and collection method. Ten questionnaires were deleted due to missing data. Hence, 150 questionnaires met the target sample size and were undertaken to analyze the data. The ethicality of this research was observed at a higher level, which involves preserving the respondents' confidentiality and privacy.

In analyzing the data, the researcher used SPSS. The relationship among the variables was tested utilizing the SPSS. The validity, composite reliability, factor loading, and average variance extract was tested (Hair et al., 2010). The t-values were obtained in order to test the significance level. The R^2 for the dependent variables was evaluated to understand the variance in each variable identified in the model (Hair et al., 2010).

RESULTS

Demographic Profiles of the Respondents

According to the gender profile, most of the respondents turned out to be male, which was 52.7%, where the female respondents accounted for 47.3%. Based on the respondents' age, most of the Hospital employees were within the age group of 20-30, which amounted to 82.7%, whereas the age group of 31-40 indicated an amount of 17.3%. In terms of the respondents' marital status, most of them were single, which showed an amount of 78.7%. In terms of Hospital employees' qualifications, it was discovered that the majority of the respondents held a bachelor's degree, which accounted for 42%, followed by the diploma level, which was 34.7%.

Reliability Test to measure Consistency

TABLE 1: Reliability Testing

Variables	Cronbach Alpha Value (r)
Emotional Intelligence	.889
Spiritual Intelligence	.922
Employee Engagement	.892

Reliability in this study was conducted to measure the consistency of the data presented by the respondents. The variables were measured based on the Cronbach Alpha Values. A Cronbach Alpha Value nearer to 1 indicates high reliability, which illustrates the greatest internal constancy reliability is (Sekaran, 2016). The preferred level of Cronbach Alpha Value is 0.7 and above. A value of 0.8 or higher signifies excellent reliability (Hulin, Ntemeyer and Cudeck, 2001). In this study, the Cronbach Alpha Value shows a greater value which is above 0.7 for the variables of emotional intelligence, spiritual intelligence, and employee engagement.

4.3 Normality Test

TABLE 2: Skewness and Kurtosis

Variables	Skewness	Kurtosis
Emotional Intelligence	-.498	.856
Spiritual Intelligence	-.423	.081
Employee Engagement	-.446	.090

Skewness and Kurtosis measure the normality of the distribution of data. The Skewness value displays the symmetry of data distribution. The Kurtosis values indicate the peakedness of the data distribution. The preferred level for Skewness and Kurtosis is between -2 and +2 (George and Mallery, 2010). According to this study, the values indicate within the range, and it indicates that the data is normally distributed.

Pearson Correlation Test

The Pearson Bivariate Correlation Coefficient, r, indicates the strength and the trend of the relationship among the study's constructs. The correlation coefficient among the independent constructs and the dependent construct is positive and significant. The outcomes demonstrate the emotional intelligence has the strongest relationship with employee engagement (Pallant, 2010).

TABLE 3: Pearson Correlation Coefficient

No	Variables	Emotional	Spiritual	Engagement
1	Emotional Intelligence	1		
2	Spiritual Intelligence	416**	1	
3	Employee Engagement	408**	464**	1

Multiple Regression and Model Fit Summary

There is one dependent construct, and multiple regression analysis was conducted to determine the presence or the dearth of the statistically significant relationship among independent constructs and the dependent construct. The R-value of .611 demonstrates an adequate level of the forecast. The R^2 value of .374 demonstrates that the two independent constructs accounted for 37.4 per cent of variances in the dependent construct in the study (Field, 2009). The F-value is 43.826, and the F-Test is significant (.000). This demonstrates the model fit is sufficient, and the two independent constructs forecasted the dependent construct reliably.

TABLE 4: Model Fit Summary

Multiple R	.611
R Square	.374
Adjusted R Square	.365
F Value	43.826
Sig	.000

The standardized coefficient represented by the Beta value and T-value was checked. In this study, all the Beta values were positive. Emotional intelligence, the Beta value was positive, and T-value was 4.004. Hence, hypothesis H1 was accepted. Spiritual Intelligence, the Beta value was positive, and T-value was 4.432, where the hypothesis H2 was accepted. The outcomes of the data indicate spiritual intelligence has the greatest influence on employee engagement.

TABLE 5: Coefficients

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
(Constant)	1.121	.282		3.980	.000
EI	.335	.084	.325	4.004	.000
SI	.369	.083	.360	4.432	.000

DISCUSSION, IMPLICATION AND RECOMMENDATIONS

The study was conducted to understand better the relationship between emotional and spiritual intelligence towards employee engagement in the Multi specialty hospitals by Hospital employees. The outcomes disclosed that there was a positive and significant relationship between emotional and spiritual intelligence towards employee engagement. Greater emotional and spiritual Intelligence of Hospital employees would direct to a greater level of engagement.

From the theoretical viewpoint, this study concluded on a variety of implications for organizations and Hospital employees' engagement in the Multi-specialty hospitals in Indian. Firstly, this study provided new knowledge connected to the emotional and spiritual Intelligence of Hospital employees in the Indian Multi specialty hospitals. Further, due to the dearth of research on the relationship among emotional and spiritual intelligence towards employee engagement by Hospital employees in the Multi-specialty hospitals, this study supports to fill the empirical gaps by offering holistic information on engaging Hospital employees more effectively. Hospital employees with a higher level of emotional and spiritual intelligence are expected to be engaged within the IT organizations. Hence, practically, the outcomes of this study recommend that the leaders in the conglomerates and Human Resource managers should execute policies and apply those policies to enhance Hospital employees' viewpoints about the organization in valuing the work and engaging more within the organizations. It is suggested to enhance emotional and spiritual intelligence by executing practices within the conglomerates to boost Hospital employees' engagement.

In this study, there are some limitations that could lead to further recommendations for future researchers. Firstly, this study did not demonstrate the impact of demographic constructs on the observed constructs. The presence of demographic

constructs such as gender could be a moderator between the independent and the dependent constructs. Secondly, this is a cross-sectional study that was undertaken only among Hospital employees in the Multi-specialty hospitals in Indian. Thirdly, this study focused on Hospital employees' emotional and spiritual intelligence toward engagement. Therefore, it is suggested for further studies; the demographic aspects should be taken into consideration. This was a cross-sectional study, and it is recommended to conduct longitudinal research where it can track the results over time. Additionally, in future research, it could be expanded to other sectors such as the manufacturing sector.

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