Original Article

Association between Emotional Intelligence and Burnout among Doctors in a Private Medical College and its Associated Hospitals in Lahore

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ABSTRACT

Background: Emotional intelligence is measured in domains of self-confidence, motivation and behavioral patterns reflected as personal capability of managing emotions, while burnout is measured in terms of emotional exhaustion, depersonalization and reduced personal achievement. Worldwide, doctors face high burnout rates, which have been linked to their emotional intelligence. The objective of this study was to find an association between emotional intelligence and burnout of doctors in Lahore.

Methodology: An analytical cross-sectional study was conducted in four different tertiary health care hospitals attached to a private medical college of Lahore between April and December 2024 by the Department of Community Medicine, Akhtar Saeed Medical and Dental College, Lahore. Non-probability convenience sampling technique was used to include 292 doctors. All doctors working in different capacities, irrespective of their age and gender were included. Doctors with experience of less than six months were excluded. Questionnaire was developed to assess demographic profile, and to measure Emotional intelligence and burnout rates. Quantitative scores were analyzed by application of Pearson correlation keeping +1 as positive correlation and Chi-square test of significance was used to measure association between emotional intelligence and burnout scales keeping p value 0.05 significant value.

Results: According to WLEIS, 228 (78%) were categorized as highly intelligent in emotions. High burnout was seen in 231 (79.10%) participants. Strong association was seen between high burnout rates and male gender ($p = 0.003$), limited work experience ($p = 0.001$) and low emotional intelligence ($p = 0.001$). There is a moderate, statistically significant positive correlation ($r = 0.383$, $p < 0.001$) between low emotional intelligence and high burnout among doctors.

Conclusion: Male gender, work experience of less than one year and low emotional intelligence are associated with high burnout rate in doctors working at tertiary health care facilities in Lahore, Pakistan.

Keywords: Emotional intelligence; Burnout rates; Health professionals

INTRODUCTION

Emotional intelligence (EI) is defined as capability of person to appraise and manage emotions in oneself and others too and be flexible enough to cope with environmental stressors.[1] Recent works on EI reveal that there is utmost importance of emotional intelligence in various domains like self-confidence, motivation, behavioral patterns and most importantly empathy in person.[2] Emotional intelligence is helpful in improving quality of life by a lot of methods like control in temperament, speaking to your own self and others with confidence.[3] Use of positive coping styles helps individuals to gain more support and reduce negative emotions and improve work efficacy.[4] Emotional intelligence in hospitals is an important element in competencies of doctors and quality of service provided in healthcare settings and has great impact on job satisfaction, work efficacy and professional practice.[5] Recent studies reveal doctors with high EI score are dynamic and competent in critical situations which leads to their better performance.[6] Emotional intelligence of doctors has impact on following dimensions like doctor-patient relationship, effect on staff and work performance of doctors themselves.[7] Various studies on EI reveals emotional intelligence of doctors is significantly important for their effective practice in healthcare settings with regard to delivering better care for patients.[8] Health profession demands that doctors must be competent enough to interact with patients efficiently which demands

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ability of doctors to perceive patient's emotions efficiently and manage patient critical situations leading to ultimate goal of patient care.[7] Burnout Syndrome is characterized by emotional exhaustion (EE), depersonalization (DP) and reduced personal achievement (PA) and a result of prolonged stress at workplace as doctors continuously encountering critical situations.[8] A cross sectional study on job burnout among critical care physicians in Egypt reveals that critical care specialists had a mean job burnout score of 29.39 with 63.2% of respondents experiencing burnout syndrome.[9] Another study on burnout among resident doctors in public sector hospitals in Mumbai India reveals that about 57.14% of respondents had work-related burnout syndrome.[10] A cross sectional on burnout among residents and surgeons at Mayo Hospital Pakistan reveals 46.3% females and 32.8% males reporting early burnout, 36.6% females and 25% males reporting advanced burnout.[11] Emotional intelligence has great impact on stress coping abilities as various studies reveals doctors with high score in EI deals with stressful situations with positive problem solving attitudes while doctors with low EI deals with critical situations by avoiding, rumination.[12] Professional burnout is mostly seen in doctors with low EI score due to inadequacy in perceiving and managing one's own emotions and others.[8] Low social skills, negative behavioral patterns and low emotional perceptions in doctors predisposes to professional exhaustion and such doctors working constantly in stressful health settings over longer period faces burnout syndrome than ones with high EI score.[13] A lot of studies reveals high emotional intelligence can improve and reduce effects of stressful workload on performance and work outcomes of doctors in healthcare settings.[14] Considering effect of EI on job performance, efficient working in health care settings, it seems necessary to study and evaluate EI among health care providers. Limited studies have been conducted in Pakistan to find out an association between emotional intelligence among doctors and burnout at workplace. The objective of this research was to find out association of emotional intelligence among doctors with burnout in Lahore.

METHODOLOGY

An analytical cross-sectional study was conducted at Akhtar Saeed Medical, Dental College and associated hospitals, including Akhter Saeed Trust Hospital Lahore, Farooq Hospital Westwood Lahore, Farooq Hospital Iqbal Town Lahore, and Farooq Hospital DHA Lahore. Approval was taken from Institution Review Board of Akhter Saeed Medical and Dental College, Lahore, on 04-06-2024 Ref. No. M-24/177/CM, before collection of data. Informed consent was taken from each participant. Data were kept confidential and collected anonymously.

The study was conducted between April and December 2024 by the Department of Community Medicine. The non-probability convenience sampling technique was used to include 292 doctors from both clinical and basic health sciences. All doctors present on duty irrespective of their age and gender and who gave informed consent were included in this study. However, those having work experience of less than six months were excluded from the study. A questionnaire was used to collect data regarding the socio-demographic profile of participants. The validated Wong and Law Emotional Intelligence Scale was used to measure emotional intelligence among doctors. The scale consists of 16 items rated on a seven-point Likert scale, ranging from 1 (strongly disagree) to 7 (strongly agree), yielding a total score of 16-112. It covers appraisal of self-emotions, regulation, and use of emotions. Emotional intelligence scores were categorized as follows: scores above 100 indicated high emotional intelligence, scores from 80 to 100 indicated moderate emotional intelligence, and scores below 80 indicated below-average emotional intelligence.

The Maslach Burnout Inventory scale was used to assess burnout among health professionals, across three dimensions: emotional exhaustion, depersonalization and personal achievement. The overall score of all three parameters was classified with burnout rates. For emotional exhaustion, scores of 17 or less indicated low-level burnout, scores between 18 and 29 indicated moderate burnout and over 30 indicated high burnout. For depersonalization scale, score of 5 or less indicated low-level burnout, score between 6 and 11 indicated moderate burnout and score 12 and greater indicated high burnout. For personal achievement scale, scores of 33 or less indicated high burnout, scores between 34 and 39 indicated moderate burnout and greater than 40 indicated low burnout. The overall burnout status of healthcare professionals was determined using the cumulative scores across the three dimensions.

Data were entered, coded, and analyzed on SPSS version 29. Data were presented in the form of frequency tables. The Pearson Correlation was calculated between quantitative values of Emotional intelligence and the burnout scale, with +1 as positive correlation and -1 as negative correlation. Chi-square test of significance was used to assess the relationship of burnout among doctors with different categorical variables fixing p-value at ≤ 0.05.

RESULTS

Out of 292 participants, 191 individuals (65.4%) were between 20-30 years, followed by 58 (19.9%) between 31-40 years. One hundred and ninety-nine participants were

females (68.2%) and 93 were males (31.8%). One hundred forty-one (48.3%) were married. Majority of the participants, 148 (50.7%) were graduates of last 5 years. Regarding their time at work, major proportion of participants 243 (83.3%) worked for more than 6 hours per day and majority, 213 (72.9%), participants had only one day off. Senior members, 63 (21.6%) had involved them in private practice. According to WLEIS, out of 292 participants, 228 (78%) were categorized as highly intelligent in emotions, 48 (16.4%) were above average and 16 (5.47%) were below average in their emotional intelligence. Out of these 292 participants, 231 (79.10%) showed high burnout rate while 61 (20.89%) showed low level of burnout (Table 1).

Out of 292 participants, 82 had done FCPS (28.1%), only 8 had done FRCPS (2.7%), 9 of them were PhD doctors (3.1%), 15 of them had done MRCP (5.1%), whereas majority, 78 (61%), had none of these qualifications. Majority were physicians (n = 165, 56.5%). Two twenty-six out of 292 participants were overworked

Table 1: Association of sociodemographic variables with burnout rates in doctors

Characteristics	High burnout	Moderate burnout	Low burnout	p-value*
Age (in years)				
20-30	48 (25.1%)	32 (58.1%)	111 (16.8%)	0.069
31-40	15 (25.9%)	7 (12.1%)	36 (62.1%)	
41-50	2 (6.9%)	3 (10.3%)	24 (82.8%)	
51-60	0 (0.0%)	3 (42.9%)	4 (57.1%)	
61-70	1 (14.3%)	0 (0.0%)	6 (85.7%)	
Gender				
Male	32 (34.4%)	15 (16.1%)	46 (49.5%)	0.003
Female	34 (17.1%)	30 (15.1%)	135 (67.8%)	
Marital status				
Married	26 (18.4%)	21 (14.9%)	94 (66.7%)	0.212
Unmarried	40 (26.5%)	24 (15.9%)	87 (57.6%)	
Years since graduation				
0-5	40 (27%)	22 (14.9%)	86 (58.1%)	0.139
6-10	15 (23.1%)	14 (21.5%)	36 (55.4%)	
11-15	8 (17.8%)	7 (15.6%)	30 (66.7%)	
16-20	3 (17.4%)	2 (11.9%)	29 (70.7%)	
Professional category				
MBBS	47 (26.6%)	25 (14.1%)	105 (59.3%)	0.074
BDS	19 (16.5%)	20 (17.4%)	76 (66.1%)	
Form of employment				
Temporary	47 (26.6%)	25 (14.1%)	105 (59.3%)	0.129
Permanent	19 (16.5%)	20 (17.4%)	76 (66.1%)	
Years of service in health				
Less than 5	40 (24.2%)	25 (15.2%)	100 (60.6%)	0.403
6--10	12 (21.4%)	9 (16.1%)	35 (62.5%)	
11-15	9 (22.0%)	7 (17.1%)	25 (61.0%)	
16-20	0 (0.0%)	4 (25.0%)	12 (75.0%)	
More than 20 years	5 (41.7%)	0 (0.0%)	9 (58.3%)	
Working hours per day				
Less than 6 hours	14 (28.6%)	7 (14.3%)	28 (57.1%)	0.549
More than 6 hours	52 (21.4%)	38 (15.6%)	153 (63.0%)	
Years of experience				
Less than 1 year	33 (37.9%)	7 (8.0%)	47 (54.0%)	<0.001
1-3 years	24 (24.0%)	20 (20.0%)	56 (56.0%)	
3-5 years	6 (12.0%)	8 (16.0%)	36 (72.0%)	
More than 5 years	3 (5.5%)	10 (18.2%)	42 (76.4%)	
Weekly off days				
One day	53 (24.9%)	35 (16.4%)	125 (58.7%)	0.155
Two days	13 (16.5%)	10 (12.7%)	56 (70.9%)	
Dual Practice				
Only One Job	51 (22.3%)	36 (15.7%)	142 (62.0%)	0.943
Private Practice	15 (23.8%)	9 (14.3%)	39 (61.9%)	
Emotional intelligence				
Highly intelligent	38 (16.7%)	158 (69.3%)	32 (14%)	<0.001
Above average	19 (39.6%)	19 (39.6%)	10 (20.8%)	
Below average	9 (64.3%)	4 (14.3%)	3 (21.4%)	

* Chi-square test of significance was applied and a p-value of less than 0.05 was taken as significant

Table 2: Association of Wong and Law emotional intelligence scale responses with high burnout rate in doctors

Question	Strongly disagree n (%)	Disagree n (%)	Slightly disagree n (%)	Neither agree nor disagree n (%)	Slightly agree n (%)	Agree n (%)	Strongly agree n (%)	p-value*
I have a good sense of why I feel certain feelings most of the time	14 (4.8)	19 (6.5)	11 (3.8)	35 (12.0)	65 (22.3)	110 (37.7)	38 (13.0)	<0.001
I have a good understanding of my emotions	9 (3.1)	11 (3.8)	19 (6.5)	27 (9.2)	61 (20.9)	109 (37.3)	56 (19.2)	<0.001
I really understand what I feel	7 (2.4)	12 (4.1)	17 (5.8)	28 (9.6)	71 (24.3)	125 (42.8)	32 (11.0)	<0.001
I always know whether I am happy or not	4 (1.4)	13 (4.5)	20 (6.8)	299.9)	63 (21.6)	123 (42.1)	40 (13.7)	<0.001
I always know my friend's emotions from their behavior	6 (2.1)	18 (6.2)	22 (7.5)	40 (13.7)	77 (26.4)	87 (29.8)	42 (14.4)	<0.001
I am a good observer of others' emotions	6 (2.1)	8 (2.7)	33 (11.3)	39 (13.4)	64 (21.9)	87 (29.8)	55 (18.8)	<0.001
I am sensitive to the feelings and emotions of others	13 (4.5)	7 (2.4)	20 (6.8)	34 (11.6)	61 (20.9)	102 (55)	55 (18.8)	<0.001
I have a good understanding of the emotions of people around me	6 (2.1)	9 (3.1)	27 (9.2)	41 (14.0)	67 (22.9)	98 (33.6)	44 (15.1)	<0.001
I always set goals for myself and then try to achieve them	3 (1.0)	12 (4.1)	18 (6.2)	48 (16.4)	60 (20.5)	103 (35.3)	48 (16.4)	<0.001
I always tell myself I am a competent person	5 (1.7)	10 (3.4)	19 (6.5)	37 (12.7)	68 (23.3)	100 (34.2)	53 (18.2)	0.001
I am a self-motivating person	3 (1.0)	15 (5.1)	22 (7.5)	36 (12.3)	69 (23.6)	102 (34.9)	45 (15.4)	<0.001
I would always encourage myself to try my best	4 (1.3)	10 (3.4)	18 (6.2)	35 (12.0)	59 (20.2)	104 (35.6)	62 (21.2)	<0.001
I can control my temper so that I can handle difficulties rationally	7 (2.4)	16 (5.5)	35 (12.0)	39 (13.4)	64 (21.9)	90 (30.8)	41 (14.0)	0.002
I am quite capable of controlling my own emotions	4 (1.4)	15 (5.1)	33 (11.3)	46 (15.8)	67 (22.9)	88 (30.1)	39 (13.4)	<0.001
I can always calm down quickly when I am angry	11 (3.8)	23 (7.9)	20 (6.8)	46 (15.8)	74 (25.3)	85 (29.1)	33 (11.3)	<0.001
I have a good control of my emotions	10 (3.4)	21 (7.2)	25 (8.6)	46 (15.8)	69 (23.6)	84 (28.8)	37 (12.7)	0.016

*Chi square test of significance was applied and p value of less than 0.05 was taken as significant

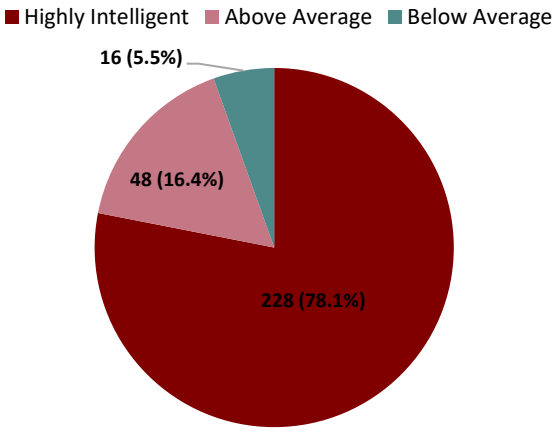


Figure 1: Classification of respondents according to their emotional intelligence

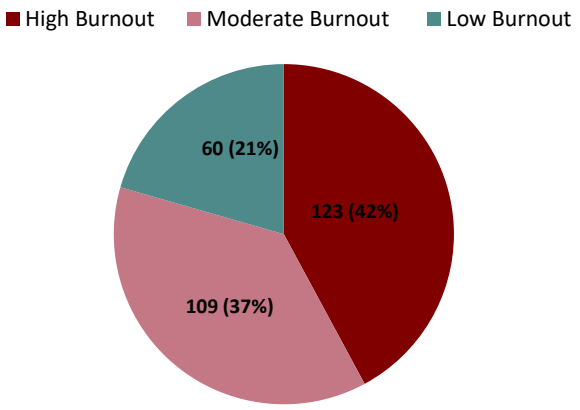


Figure 2: Classification of respondents according to their burnout status

Table 3: MASLACH Burnout Inventory Scale and its association with emotional intelligence

Questions	Never n (%)	A few times per year n (%)	Once a month n (%)	A few times per month n (%)	Once a week n (%)	A few times per week n (%)	Every day n (%)	p-values
I feel emotionally drained by my work	25 (8.6)	31 (10.6)	45 (15.4)	54 (18.5)	52 (17.8)	51 (17.5)	34 (11.6)	0.023
Working with people all day long requires a great deal of effort	22 (7.5)	23 (7.9)	26 (8.9)	61 (20.9)	44 (15.1)	47 (16.1)	69 (23.6)	0.009
I feel like my work is breaking me down	44 (15.1)	24 (8.2)	53 (18.2)	56 (19.2)	54 (18.5)	37 (12.7)	24 (8.2)	0.077
I feel frustrated by my work.	45 (15.4)	37 (12.7)	52 (17.8)	48 (16.4)	48 (16.4)	36 (12.3)	26 (8.9)	0.081
I feel I work too hard at my job	36 (12.3)	22 (7.5)	49 (16.8)	49 (16.8)	50 (17.1)	40 (13.7)	46 (15.8)	<0.001
It stresses me too much to work in direct contact with people	72 (24.7)	49 (16.8)	46 (15.8)	34 (11.6)	43 (14.7)	29 (9.9)	19 (6.5)	0.257
I feel like I'm at the end of my rope	89 (30.5)	47 (16.1)	42 (14.4)	34 (11.6)	37 (12.7)	24 (8.2)	19 (6.5)	0.079

Table 4: MASLACH Burnout Inventory Scale and its association with emotional intelligence

Questions	Never, n (%)	A few times per year, n (%)	Once a month, n (%)	A few times per month, n (%)	Once a week, n (%)	A few times per week, n (%)	Every day, n (%)	p-value
I feel I look after certain patients/clients impersonally, as if they are objects.	178 (61.0)	37 (12.7)	29 (9.9)	24 (8.2)	11 (3.8)	10 (3.4)	3 (1.0)	<0.001
I feel tired when I get up in the morning and have to face another day at work.	35 (12.0)	53 (18.2)	61 (20.9)	46 (15.8)	39 (13.4)	32 (11.0)	26 (8.9)	0.397
I have the impression that my patients/clients make me responsible for some of their problems.	77 (26.4)	50 (17.1)	51 (17.5)	55 (18.8)	31 (10.6)	16 (5.5)	12 (4.1)	0.200
I am at the end of my patience at the end of my workday.	58 (19.9)	40 (13.7)	67 (22.9)	36 (12.3)	44 (15.1)	30 (10.3)	17 (5.8)	0.021
I really don't care about what happens to some of my patients/clients.	157 (53.8)	30 (10.3)	29 (9.9)	34 (11.6)	27 (9.2)	13 (4.5)	2 (0.7)	0.017
I have become more insensitive to people since I've been working.	128 (43.8)	29 (9.9)	47 (16.1)	34 (11.6)	25 (8.6)	15 (5.1)	14 (4.8)	<0.001
I'm afraid that this job is making me uncaring.	144 (49.3)	33 (11.3)	30 (10.3)	38 (13.0)	20 (6.8)	15 (5.1)	12 (4.1)	<0.001
I accomplish many worthwhile things in this job.	13 (4.5)	49 (16.8)	42 (14.4)	41 (14.0)	48 (16.4)	50 (17.1)	49 (16.8)	0.001
I feel full of energy.	12 (4.1)	22 (7.5)	51 (17.5)	57 (19.5)	47 (16.1)	59 (20.2)	44 (15.1)	0.005
I am easily able to understand what my patients/clients feel.	6 (2.1)	26 (8.9)	23 (7.9)	40 (13.7)	33 (11.3)	56 (19.2)	108 (37.0)	<0.001
I look after my patients'/clients' problems very effectively.	3 (1.0)	13 (4.5)	27 (9.2)	30 (10.3)	27 (9.2)	60 (20.5)	132 (45.2)	<0.001
In my work, I handle emotional problems calmly.	1 (0.3)	27 (9.2)	22 (7.5)	37 (12.7)	39 (13.4)	70 (24.0)	96 (32.9)	<0.001
Through my work, I feel that I have a positive influence on people.	3 (1.0)	14 (4.8)	33 (11.3)	31 (10.6)	45 (15.4)	69 (23.6)	97 (33.2)	<0.001
I am easily able to create a relaxed atmosphere with my patients/clients.	6 (2.1)	11 (3.8)	20 (6.8)	29 (9.9)	43 (14.7)	64 (21.9)	119 (40.8)	<0.001
I feel refreshed when I have been close to my patients/clients at work.	17 (5.8)	14 (4.8)	34 (11.6)	35 (12.0)	40 (13.7)	64 (21.9)	88 (30.1)	<0.001

(77.4%) and 117 (40.1%) were not satisfied with their jobs. None of these factors showed significant association with high burnout rates. To find out the association between high burnout rates among doctors, chi square test of significance was applied with responses of Wong and Law emotional intelligence scale, showed significant association between high Emotional intelligence and low burnout rates (Table 2).

According to Wong and Lee scale of emotional intelligence, among 292 health care workers, 228 (78%) were classified as highly intelligent, 48 (16.4%) were labelled as above average and 16 (5.47%) were reported below average in their emotional intelligence (Figure 1). The scale of burnout rate of health care workers showed

that High level burnout rate was reported in 123 (42.12%) doctors, while moderate burnout rate was showed by 109 (37.33%). Low level burns out rate was reported by 60 (20.54%) of the doctors (Figure 2).

On bivariate analysis, chi square test of significance was applied to assess association of burnout with emotional intelligence and strong association was seen between low emotional intelligence and all variables in MASLACH burnout inventory except feeling emotionally drained by my work (Table 3). Significant association was observed with high emotional intelligence and variables in MASLACH burnout scale except the feeling of tiredness in morning going to work (Table 4). Pearson correlation test was applied on quantitative cumulative scores of emotional intelligence and burnout score. There was a statistically significant positive correlation ($r = 0.383$, $p < 0.001$) between high emotional intelligence and low burnout among doctors as seen in scatter plot (Figure 3).

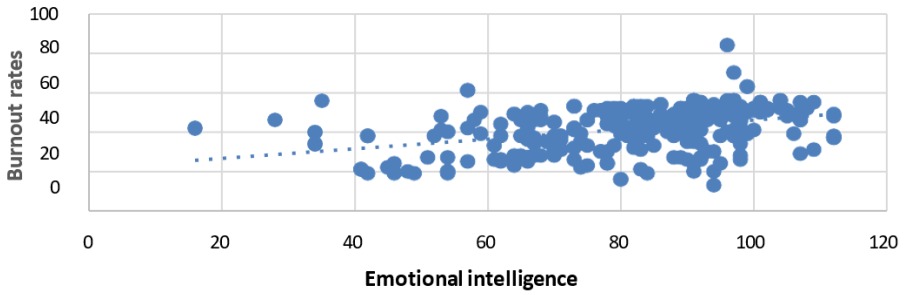


Figure 3: Scatter diagram to show correlation between emotional intelligence and burnout rate

DISCUSSION

Reducing burnout from work among medical professionals is regarded as an essential objective of healthcare policy. In the effort of lowering workplace burnout among healthcare personnel, "emotional intelligence a crucial safeguard against psychosocial risks and a quantifiable positive psychological resource continues to receive insufficient attention.[15] Emotional intelligence has been implicated in a number of professions as a key factor to determine career contentment, client satisfaction etc. This study was designed to establish an association between emotional intelligence and burnout in healthcare professionals, more specifically doctors currently working with in the healthcare system. Data was collected from 292 doctors working in four tertiary health care facilities of Lahore. The findings of this study showed that out of 292, 228 participants (78%) demonstrated high emotional intelligence and a significant proportion of the group 123 individuals, accounting for 42% were found to be experiencing high levels of burnout. Demographic data showed that majority of the participants in the study were aged between 20-30 years (65.4%). A similar cross-sectional study was conducted in a Tertiary Care Hospital in Rawalpindi with a population in similar age range, where the mean age was reported to be 26.67.[16] Wong and Long's Emotional Intelligence Scale was used in the study which showed the average score of emotional intelligence to be 52.527. While majority of individuals in this study were highly intelligent. However, a study in Gujrat consisted of individuals mostly within the age ranging from 35-40 years (53.3%), where mean emotional intelligence by self-rating of residents was found to be 3.74 rating by feedback methods.[17]A similar study assessing burnout in healthcare workers using Maslach Burnout Inventory Scale had demographic profile of participants within the age group of 25 to 30 years (38%). The mean score of MBI was reported to be 60.32 which is high level of burnout. However, no significant association was established between age and level of burnout in participants in this particular study.[18] Based on this study, 68.2% of the 292 participants were female, making up the majority of the population but males faced more burnout as compared to females. A similar study with 261 participants in Karachi, Pakistan, found that 69% of the participants were female and the average emotional intelligence score among participants was 5.56 (IQR = 4.9-6).[19] In a separate study involving 100 participants, it was observed that the population was evenly split, with 50% being male and 50% female and it was found that male doctors are more emotionally intelligent than female doctors.[20] In contrary, another study concluded that women's EI is significantly higher than that of men.[15] Of the 292 participants, 141 were married (48.3%), while 151 were unmarried (51.7%). These figures were markedly similar to research conducted in Egypt among dental interns to assess emotional intelligence where (88%) participants were unmarried. Single interns showed high levels of emotional intelligence than married interns.[21] In contrast to this a cross-sectional study in China, on emotional intelligence and its role in mediating workplace violence, showed stats where 562 of

825 (68.1%) individuals were married. Unmarried participants had a high Emotional Intelligence score (76.62) than married ones (75.66) and also experienced less burnout than married participants. A negative correlation was found between emotional intelligence and degree of job burnout.[15] Contrary to this sample population a study on occupational burnout assessment among obstetrics and gynecology healthcare professionals in a public hospital in Islamabad, Pakistan included majority married individuals (65.7%) and occupational burnout was found in only 39.2% of these participants.[22] While in this study consisting majorly of unmarried individuals' high level of burnout was prevalent, with 123 out of 292 participants being severely burnt out although significant association was not found. Regarding the workload of professionals, this study revealed that 83.2% of professionals work more than 6 hours per day, with 56.2% managing fewer than 5 beds and 72.9% taking one day off each week. In comparison, a similar study on emotional intelligence and job performance in healthcare conducted in Pakistan found that average working hours ranged from 6 to 8 hours per day, with 49.7% overseeing more than 8 beds and 69.2% having weekly days off and found that emotionally intelligent healthcare practitioners have better work-life balance and higher job satisfaction. Pharmacists demonstrated superior social skills and drive, while physicians excelled in work-life balance compared to other healthcare professionals in Pakistan.[23] This contrasts with another study where the average workweek was reported to be 25 hours.[24] Additionally, another study indicated that 46.4% of professionals supervise fewer than 20 patients per day and this study also revealed that among the people subjected to workplace violence, 67% assessed their burnout score to be higher than 30, and 3% evaluated their burnout level to be greater than60. This demonstrates that moderate burnout is widespread among healthcare workers subjected to violence, with some individuals experiencing severe degrees of burnout.[15] Data was collected from MBBS and BDS graduated working in hospitals in Lahore, with MBBS graduates being in the majority (92.5%). Similar results were obtained in a cross-sectional correlational study conducted in Peshawar, Pakistan with 77.8% MBBS students and 22.2% BDS students. In this particular study, 45.1% of individuals were reported to have low level of intelligence, which was in contrast to this study where the majority of the individuals were highly intelligent (78%).[25] Regarding technical titles, this study found that 56.5% of healthcare professionals were physicians. In comparison, a similar study revealed that only 38.3% of professionals held this title and found that emotionally intelligent healthcare practitioners have better work-life balance and higher job satisfaction and less burnout rates.[26] Furthermore, a study conducted in China indicated that 70.42% of professionals occupied junior and it was concluded that the Hospital staff with comprehensive humanistic care training, volunteer service activities, and higher CAI and WLEIS scores showed higher performance, with a statistically significant difference in Pediatrics Department staff scores compared to Outpatient and Emergency Department staff.[27] Majority of the healthcare professionals included in this study had less than 5 years in service (56.5%) In comparison to this, a study on the same topic included a major proportion of participants with experience in healthcare of 2-4 years (47.2%) where majority (50.8%) of the professionals had high emotional intelligence within the range of 59 to 80.[23] A study in Japan reported mean years of experience to be 11.5, where burnout was noted in 50% of the total participants who were engaged in COVID 19 care experienced burnout.[28] Years of service in the healthcare are essential factors in determining individuals' ability to cope up with work related stresses and the level of burnout they are able to withstand in their respective jobs. Data regarding years of services reported in a separate study was in contrast to our sample population where majority of the individuals had service years of more than 25 years. It has already been established that participants with more emotional intelligence were better able to cope with work related stresses.[29] From a total of 292 participants 229 (78.4%) had only one primary job with being overworked as the most significant difficulty faced during job (77.4%). A research conducted in Karachi had almost similar results with only 31.9% participants having dual jobs with being overworked as the number one difficulty faced during job (25.3%), followed closely by provision of insufficient equipment (23.9%). 50.8% of the population were found to be highly emotional intelligent with 43.3% of these scoring well on job performance scales. A positive correlation was seen in level of Emotional Intelligence and job performance in the participants in this study. Number of jobs and difficulties faced during job did not have any significant effect on Emotional Intelligence.[23] In this study on job satisfaction, we found that 59.9% of healthcare professionals were satisfied with their roles. This is comparable to a similar study where 60.6% reported satisfaction.[23] Additionally, another study revealed that 92.5% of participants were content with their jobs and it was revealed that the majority of respondents (84.3%) reported high EI, 15.7% reported average EI, and none reported low EI.[21] Studies have consistently found a negative correlation between EI and burnout. A study among medical students in Malaysia found that higher EI scores were associated with significantly lower burnout scores, suggesting that EI helps in coping with stress and preventing burnout and among healthcare professionals, EI was found to be negatively correlated with emotional

exhaustion and depersonalization, while positively associated with personal accomplishment.[30]

This study covers both basic and clinical sciences faculty so covers a broader range of doctors. The sample is representative of faculty of a private medical college and associated three tertiary care hospitals in Lahore, covering both genders and different age groups which makes sample representative of total population of Lahore.

CONCLUSION

This study concluded that doctors in Pakistan with below-average emotional intelligence have high burnout rates.

Author Contributions

IM: supervision, statistical analysis, and final review of the manuscript. IF: writing the Introduction, data collection, data entry, and literature review. JI: questionnaire development and literature review. IJ: writing the Methodology and data entry. IZ: writing the Discussion, literature review, and data entry. IS: contributed to data collection, literature review, and data entry.

AI Disclosure

The authors declared that no generative AI or AI-assisted technologies were used in the preparation of this manuscript.

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