ABSTRACT

Emotional Intelligence (EI) is an art of controlling and regulating oneself and also in others, managing situations even with abnormality, accomplishing selected aims. People acquire knowledge from various sources and with this knowledge they practice to regulate the feelings and emotions of individuals and also to control others’ emotions with the same knowledge. The medical profession is a very noble profession and the role of a Doctor is highly vital to save the lives of the patients, as they being the core reason for their wellbeing. The Doctors having completed their course are forced to work in a different environment of vary nature of human behavior at different parts of Tamilnadu. Principally and significantly, the doctors are extensively working with people who are with ailments, for maximum number of hours in every day basis, and also engaged with relationship among their superiors, peers, subordinates; medical representatives in addition to their personal relationship with their family and friends. This has intensive effect on their mental and physical state of life. Hence, it becomes mandatory that their life has to deploy emotional intelligence, as their way of life to better manage their mind and body, for enhanced living.

This study aspires to learn and evaluate the emotional intelligence of Doctors of Professional protection linked social security scheme in Indian Medical Association – Tamilnadu. This study considers the theory contributed by Daniel Goleman, on Emotional Intelligence, which has appropriate suitability and credibility. He has proposed intrapersonal and interpersonal competencies, in which Self-awareness, Self-regulation and Self-motivation constitute the intrapersonal competence, additionally
Empathy and Social skills encapsulate the interpersonal competence. This theory is determined to propose accurate factors of relationship that a person, particularly suitable for Doctors to portray his personal and professional lifestyle. Through his theory, Daniel Goleman states EI as “The capacity for recognizing our own feelings and those of others, for motivating ourselves, for managing emotions well in ourselves and in our relationships”, which deliberately suitable for this study obviously opted by the researcher. Emotional intelligence is much complex in service oriented organizations in general and it is too complex in the health care organizations.

Indian Medical Association is the only national voluntary organization which effectively represents, Doctors of Modern Scientific System of Medicine, which takes care of doctors well being, and thus contributing better medical practitioners to the community by and large. The Indian Medical Association – Tamilnadu State Branch (IMA – TNSB) is the state branch of Indian Medical Association, representing the entire spectrum of the modern allopathic medicine and its specialties in the State of Tamilnadu. The association has a number of initiatives for the welfare of the Doctors and among them Professional Protection Linked Social Security Scheme (PPLSSS) and Family Security Scheme (FSS) are of unique importance. PPLSSS, further incorporates Hospital Protection Scheme (HPS) and Family Benefit Scheme (FBS), which adds value to this scheme and has encapsulated nearly half of the total members of IMA-TNSB. By 2011, it is accounted that 8395 Doctors of IMA-TNSB has obtained membership in PPLSSS. As this scheme claims to ascertain support to a Doctor on professional perspective, on protection of the Hospital owned by a Doctor and
also for the benefit of the family of Doctors, it is understood that principal focus of the scheme is to extend support and balance for the personal and professional life of enrolled Doctors in the scheme. Thus, this study is formulated to investigate the level of Emotional Intelligence practiced by Doctors of PPLSSS of IMA-TNSB and also to propose a systematic model for better wellbeing of Doctors to them.

Considering the objective of the study a well-structured questionnaire is used to collect the primary data by field survey method. The respondents were selected by using stratified random sampling technique. The stratification covers the Doctors who are the members of PPLSS Scheme in IMA – TNSB, in all the 32 districts of Tamilnadu, in proportion to their population in each of the district. From the population 8,395, ten percentage of the population has been selected randomly and proportionately to every district. By virtue of a mass of data obtained from the research survey, as well as data from secondary sources collected are presented in the present report, descriptive and analytical research were considered to be the most appropriate for the study.

The differences in the context of emotional intelligence by different types of respondents based on their like sex, age, education qualifications, marital status, the place of education, specialization, number of years of experience, place of work and the levels of emotional intelligence practiced by the Doctors of PPLSS scheme in 32 districts of IMA –TNSB, was studied by means of percentage analysis, descriptive, reliability, factor analysis, independent sample t test, analysis of variance (ANOVA), chi-square test, correlation and regression as and when they were found
necessary. In addition to these tools, Henry Garrett ranking technique was also employed to ascertain the order of the issues. The study gives a clear picture that the 70.2% of Doctors of the PPLSS Scheme are having high score of Emotional Intelligence, following them 22.6% Doctors of the above mentioned scheme has medium level and 7.1% have low level Emotional Intelligence. The intra personal competencies for better regulation to different situations that the Doctors face in personal and professional endeavors, of the level of self-awareness, level of self-regulation and the level of self-motivation, which comprises the intrapersonal competencies are high in Doctors of PPLSSS, IMA-TNSB. Empathy and social skills are the interpersonal competencies, which equip Doctors to better regulate and manage other people in both personal and professional endeavors, are high in Doctors of PPLSSS, IMA-TNSB.

Thus, by understanding the finding of the research, this study proposes a model named CAREDOC MODEL, for the wellbeing of Doctors managing personal and professional relationships in a better way. The CAREDOC MODEL gives suggestions for what Doctors need to accomplish in daily basis, weekly basis and monthly basis with respect to their personal relationship, additionally the Emotional Intelligence, what has to be maintained in professional environments and further this model proposes suggestions to be initiated by the PPLSSS of IMA-TNSB in addition to the present agenda for the wellbeing of Doctors in a better way, every year.