



RESEARCH PAPER

Emotional Intelligence and Self Efficacy as Predictors of Life Satisfaction among Doctors working in Emergency Department

¹ Arooj Sammer* ² Dr. Saima Majeed

1. Research Student Department of Psychology, Forman Christian College Lahore, Punjab, Pakistan
2. Associate Professor, Department of Psychology, Forman Christian College Lahore, Punjab, Pakistan

PAPER INFO	ABSTRACT
<p>Received: March 18, 2022</p> <p>Accepted: June 27, 2022</p> <p>Online: June 30, 2022</p> <p>Keywords: Emergency Department, Emotional Intelligence, General Self Efficacy, Life Satisfaction,</p> <p>*Corresponding Author: aroojsammer1000@gmail.com</p>	<p>The main aim of this is to study Emotional Intelligence (EI) and Self Efficacy (SE) as the determinant of Life Satisfaction (LS) in doctors working in emergency department (ED). It was a correlational study with cross-sectional research design. A purposive sample of 118 doctors working in emergency departments from the age range of (M=29.94, SD=5.98) were taken. Trait Emotional Intelligence (TEI) Questionnaire Short Form (Petrides, 2009), General Self-Efficacy Scale (GSF) (Schwarzer, 1995), and Satisfaction with Life Scale (SWL) (Diener, 1985) along with the demographic sheet as measurement tools. The outcomes revealed that Emotional Intelligence and Self Efficacy predict Life Satisfaction. There was a positive correlation found between EI and LS 0.16^* and GS and LS $.35^{**}$. Moreover, Emotional Intelligence and Self Efficacy proved predictors of Life Satisfaction in doctors. It was concluded that emotional intelligence and self-efficacy proved positive predictors of Life satisfaction in doctors who are working in ED.</p>

Introduction

Emotional Intelligence is an individual's perception of his/her emotional world, nature of emotions, and how efficient the person is in terms of perceiving, accepting, organizing, and using his own and others' emotions. It has four traits well-being, self-control, emotionality, and sociability (Petrides, 2018). Emotional intelligence is associated with doctors' work performance, work practice, work satisfaction, how they communicate, and their ability to deal with stress, burnout, and relation with patients. Higher emotional intelligence plays a positive role in work management, judgment, behavior, and social life whereas lower emotional intelligence is associated with a higher level of stress, burnout, poor health, behavior, and disturbed sleep pattern. Emotional intelligence improves doctors' ability to assess and understand patients' needs and issues. In present times patient satisfaction is very essential in the healthcare system, emotional intelligence of physicians performances an enormous part. It is important in doctors' professional life that they should be competent enough to manage their work and emotions side by side and use their perception and emotions smartly for a successful career. Emotionally intelligent doctors are found to be more intellectual, mentally and physically heather, better decision-maker, and more satisfied. Health care professionals are expected to perform several tasks in their workplace role the doctors' are expected to do leadership and management tasks. Doctors are under the burden of management and authority of their team. In this case, an emotionally intelligent doctor will efficiently head his team (Ravikumar et al., 2017).

According to a study in America, thousands of people die every year due to medical errors, stress, and burnout in doctors, which affect the doctors' wellbeing negatively. The doctors' psychological and physical condition and work pressure is the main concern. They often do not identify the signs and symptoms of burnout and depression and they rarely seek help for it. Doctors' who experience burnout experience irritability, dissatisfaction in their life, low work efficiency, decreased personal care, depression, and anxiety issues. Mental health issues are more common in doctors than in other professions (Yates, 2020).

Emotional intelligence in doctors is very important for doctors' physical and psychological well-being, people with high emotional intelligence perceive, understand, and control emotions more efficiently than people with less EI. Emotional intelligence leads the individual to wellbeing and healthiness. Doctors who work in emergency departments of hospitals have to witness a lot of mishaps, illness, deaths, and pain therefore they should be emotionally intelligent so they can better survive in their personal and professional life (Lin et al., 2016).

General self-efficacy is a person's trust in his capabilities and how efficiently he deals in different types of stressful situations and events (Schwarzer et al., 1995). Self-efficacy is positively associated with wellbeing; a high level of self-efficacy can make an individual feel competent and prepare for performing difficult tasks in different situations workplace stress is associated with medical errors and poor wellbeing of doctors and patients as well. The more an individual believes in his abilities the more confident and compatible he feels about himself. Doctors who have more self-efficacy have good mental and physical health and experience less burnout and stress in their professional life. Burnout can result in poor physical and psychological well-being in doctors'. Professional success can be determined by sound mental and physical health. It is very important to note down the factors which can improve an individual's mental health and physical well-being. This study indicated that self-efficacy has a positive relation with well-being. Studies have shown that self-efficacy is a flexible thing it can be enhanced and improved. Doctors' should work on their self-efficacy to deal with their professional and personal matters. It is beneficial for their well-being and career success as well (Milam et al., 2019).

Self-efficacy and good communication skills determine patient satisfaction. Presently in developing countries, health care systems and policymakers are facing challenges in dealing with the requirements of the people seeking medical help. Medical professionals are answerable for providing services to patients. It is a high responsibility of health care workers to communicate their message to satisfy the patients and to promote patients' health. Self-efficacy is associated with patient satisfaction. According to social cognitive theory, self-efficacy is a person's trust and confidence in his capacity and abilities in completing his tasks and duties. Self-efficacy is an essential element for individual performance to get successful outcomes (Shahnazi et al., 2021).

Diener, 1985 satisfaction with life is a person's positive observation of his wellbeing and life's quality in his standard. Satisfaction refers to an individual's positive experience in life. Burnout and stress are negatively associated with life satisfaction and well-being. The more a doctor would have burnout the less he would have satisfaction with life. Moreover, burnout is associated with poor physical and mental health side by side. One in three doctors is having burnout which further leads to dissatisfaction, mental health problems, physical damage, anxiety, sleep disturbance, and poor job performance. But if the individual has emotional intelligence he will deal with stressful life events and will be less prone to stress and burnout (Németh, 2016).

People with a high level of emotional intelligence are thought to recognize the process and manage emotions more efficiently; this increases the wellbeing and emotional stability of an individual. Emotional intelligence does not only benefit the doctors but also improves the quality of work and wellbeing of patients (Lin et al., 2016). That is why a doctor's emotional intelligence cannot be ignored. Lack of emotional intelligence can negatively influence doctors' mental and physical health as well as their relationships with family and friends. Further, it can negatively impact their work and their patients. Work-life balance is very essential in professionals' lives for their employment and satisfaction. It is important to maintain a balance between personal and professional life. Work-life balance fluctuates when changes occur in personal and professional lives commitments and responsibilities. This fluctuation significantly influences the life of doctors' working day and night in stressful situations. Self-efficacy is very important for doctors, the doctors in the emergency department often experience workplace violence from patients and their families, so if doctors will have self-efficacy they will deal with workplace violence and stress and this self-efficacy will increase their job satisfaction (Kaliannan et al., 2016).

Self-efficacy leads an individual to higher cognitive and social skills. It improves an individual's emotional state and behavior and as result, he competently attains his objectives. It helps in completing difficult tasks efficiently. Self-efficacy improves an individual's self-confidence to perform in stressful situations and helps avoid burnout. It plays an important role in an individual's well-being. Self-efficacy provides insight regarding an individual's potential; it increases stress coping skills and productivity. Self-efficacy and general health have a significantly positive relationship. Burnout and general health are negatively correlated to each other. Self-efficacy is associated with decreased burnout (Amiri et al., 2019).

In recent times no one is unaware of mental health problems at the same time mental health problems are underestimated. People do not bother about their mental health assessment and treatment. Sound mental health is very important for everyone. Mental health problems can negatively impact an individual's personal and work life. Most people do not pay attention to their mental health conditions as well as doctors'. Doctors are at high risk of mental health problems. Their long duty hours and situations they go through daily can affect their mental health but if they are emotionally intelligent they would be able to deal with stressful situations and their higher self-efficacy would help them feel more competent (Atif et al., 2016).

There is a limited number of literature found on the emotional intelligence of doctors in Pakistan and fewer to no study was conducted on emotional intelligence and self-efficacy and how it predicts life satisfaction of emergency department doctors in Pakistan. The Healthcare education system is focusing on doctors' knowledge about medicines and treatment. They least focus on doctors' interpersonal skills and their ability to deal with their patients. A high level of emotional intelligence determines good stress coping strategies, good social and communication skills, and good behavior of the doctors. A low level of emotional intelligence is associated with poor interpersonal skills, stress, drug and alcohol use, relationship problems, and errors in work (Imran et al., 2013).

According to the theory of Emotional intelligence by Salovey and Mayer (1997), Emotional Intelligence refers cognitive capacity of an individual which is independent but related to general intelligence. It consists of four abilities perception of emotion, emotional facilitation, understanding emotions, and management of emotions. Perception of emotion means to acknowledge your emotions and others' emotions, to distinguish those emotions, and to use this knowledge to direct thoughts and behavior. Emotional facilitation means to think in three ways, first to see environmental changes, second to alter your mood and guide others for different options in a situation, and third to help in different kinds of

reasoning (Salovey & Mayer, 1997). Emotional intelligence is the ability to recognize and manage one's own emotions, others' emotions, and the emotions of a group. An individual has five units of emotional intelligence such as empathy, self-awareness, self-regulation, motivation, and social skills. EI enhances efficiency, work relationships, problem-solving, effectiveness, and the ability to make strategies (Goleman, 1995). According to the theory of Bar on Emotional intelligence, emotional and social skills together creates a behavioral system called Emotional intelligence. These skills determine behavior, performance, self-understanding, understanding others, self-expression, and how we meet our daily lives demands (Bar-On, 2006). Trait Emotional intelligence describes Emotional intelligence as an individual's perception of his emotional world, what is the nature of his emotions, and how he perceives, recognizes, manages, and uses his and others' emotions (Petrides et al., 2018).

According to self-efficacy theory by Bandura, self-efficacy refers to a people's belief in their potential to perform and manage their action according to the situation and event successfully; it enhances motivation, personal accomplishment, well-being, and an individual's feeling of control over the situation. It develops confidence in the individual capacity to deal with stressful life events (Bandura, 1997). Self-efficacy changes the perspective of an individual's thinking, feeling, and actions. The feeling of low self-efficacy makes an individual helpless, depressed, and anxious. Thinking of a high level of self-efficacy is associated with efficient cognitive process, quality performance, and decision-making. The level of self-efficacy could be improved. People with a high level of self-efficacy efficiently work in challenging situations (Schwarzer & Scholz, 2000).

According to the bottom-up theory of life satisfaction, people have satisfaction in several domains of their life such as health, self-growth, family, friends, and job. These factors make the person satisfied with his life (Bradburn, 1969). The top-down theory of life satisfaction describes that our life satisfaction affects our life satisfaction in different areas (Headey & Wearing, 1990). Diener made a distinction between bottom-up and top-down theories. According to Diener's theory bottom-up is subjective well being which is caused by specific variables and top-down is subjective well being which gives positive outcomes (Diener, 1984). Satisfaction, family, and friends' support, opportunities, goals, sense of justice are the domains of subjective wellbeing. These factors could result in subjective well-being (Diener, 1984).

Hypotheses

H1: Emotional intelligence will likely be a positive connection with life satisfaction among doctors working in emergency departments.

H2: Emotional intelligence and self-efficacy are likely to be determinants of life satisfaction among doctors working in emergency departments.

Material and Methods

Research Design

A cross-sectional research design was used in this study, in this design data is collected from different participants at one point in time, and variables are observed without any kind of change. It was a correlational study in this study the researcher measures the relationship of two variables (independent and dependent) statically.

Participants

A nonprobability purposive sampling technique was used to select the participants. The sample was taken from the different hospitals in Lahore. One hundred and eighteen doctors working in emergency departments both men and women with all types of marital status and minimum work experience of 2 years in emergency departments of hospitals of Lahore.

Study Settings

The data was collected from the doctors working in emergency departments of public and private hospitals in Lahore, Pakistan.

Study Settings, Sample Size & Statistical Analysis

The data was collected from emergency departments of 16 hospitals in Lahore Pakistan. The sample size was decided by using G power factor analysis. Demographic Characteristics of the Sample (N= 118).

Cronbach alpha and sample distribution ranges were measured to see skewness and kurtosis. Correlation analysis was used to see the Relationship between Trait Emotional Intelligence, General Self Efficacy, and Satisfaction with Life among emergency department doctors. Hierarchical Regression Analysis was applied to determine the Predictors of Satisfaction with Life in Emergency Department Doctors.

Information Sheet for Research Participants. An information sheet was given to each participant to give them the necessary information regarding the research, the purpose of conducting the research, and their rights of taking part in the research.

Demographic Sheet. The demographic sheet is used to see whether the participants in the study are a representative sample of the target population or not. It was given to the doctors to check the age, gender, marital status, family system, no of children, work experience, work hours, their education, specialization, and their hospital sector whether the hospital was government or private.

Trait Emotional Intelligence Questionnaire Short Form (TEIQue-SF). This is a self-report tool. It measures emotional intelligence in four traits such as well-being, self-control, emotionality, and sociability. People who have high measures in this scale have high self-efficacy in emotion-related behaviors; they are likely to be proficient in managing and regulating themselves and others. Its test-retest reliability is .86 and its internal consistency score is .81. This scale measures behavior in different situations (Petrides, 2009).

General Self-Efficacy Scale (GSE). This scale is used to measure the optimistic beliefs of an individual how he copes with different types of difficult situations, and the person's actions which are responsible for successful results. It is a ten-item scale. Its internal reliability for Cronbach's alphas is between .76 and .90. It is a 4-point Likert scale. Total score can be calculated by summing up all items and it ranges from ten to forty, highest scores show high self-efficacy (Jerusalem, & Schwarzer, 1995).

Satisfaction with Life Scale (SWLS). This scale assesses a wide range of cognitive judgments of an individual's life satisfaction. It has a five-item scale. It has seven-point Likert scales one strongly disagree to seven strongly agree. It's a valid scale with high internal consistency and reliability. Its internal reliability is coefficient alpha 0.87 and test-retest stability is coefficient 0.82 (Diener et al., 1985).

Ethical Considerations

- Written informed consent was given to the doctors.
- Privacy of participants was maintained.
- Measures for confidentiality were taken.
- Participants were given the right to withdraw from research at anytime.

Sample Characteristics

**Table 1
Demographic Characteristics of the Sample (N= 118).**

Variables	M (SD)	f (%)
Age	29.94 (5.98)	
Gender		
• Male		51
• Female		67
Education		
• MBBS		83
• MDMS		24
• FCPS		11
Specialization		
• Internal Medicine		69
• Medical Officer		11
• Medicine		22
• ENT		5
• Medicine		5
• Surgery		6
Marital Status		
• Single		67
• Married		51
• Separated		-
• Divorced		-
• Widow		-
• Others		-
Family System		
• Nuclear		86
• Joint		32
Hospital Sector		
• Private		48
• Government		70
Work Experience	5.46 (4.82)	
Working Hours	8.33 (0.98)	
Number of Children	0.69 (1.08)	

The objective of doing this study research is to study emotional intelligence and self-efficacy as predictors of life satisfaction, the association between emotional intelligence and life satisfaction, and the relationship self-efficacy between life satisfaction among doctors working in emergency departments in Lahore, Pakistan.

Table 2
Psychometric Properties of Study Variables (N= 118)

Variables	K	M	SD	Range Min-Max	α	Skewness	Kurtosis
1. Trait Emotional Intelligence	30	133.57	21.37	79-205	.754	.625	.847
2. General Self Efficacy	10	31.32	4.58	16-40	.834	-.545	.557
3. Satisfaction with Life	5	25.72	4.74	11-35	.684	-.892	1.040

Note. K= No. of items, α = Cronbach alpha, M= Mean. SD= Standard Deviation

In table 2, results indicated that the sample distribution is significantly free from skewness and kurtosis as it ranges between -2 to +2, which showed that the data is approximately normally distributed. The Cronbach alpha represents the reliabilities of the scales used in the research that are good to excellent.

Table 3
Relationship between Trait Emotional Intelligence, General Self Efficacy and Satisfaction with Life among emergency department doctors (N= 118)

Measure	1	2	3	4	5	6
1. Emotionality	---					
2. Self Control	.25**	---				
3. Well Being	.15	.35**	---			
4. Sociability	.27**	.39**	.17	---		
5. General Self Efficacy	-.09	.26**	.15	.25**	---	
6. Satisfaction with Life	-.09	.10	-.03	.16*	.35**	---
M	34.08	28.39	27.85	28.27	31.32	25.72
SD	7.59	6.81	8.84	5.25	4.58	4.74

Note: **p<.01.

In table 3, the results show the relationship of TEI, GSF, and Satisfaction with Life in doctors working in the emergency department. The results indicate that there is a significantly positive relation between dimensions of Trait Emotional Intelligence and Satisfaction with Life, suggesting that emergency department doctors who are Emotionally Intelligent are more likely to have Satisfaction with their Life. Likewise, there is a significantly positive relation between General Self Efficacy and Satisfaction with Life, which indicates that emergency department doctors who have Self Efficacy have more Satisfaction with their Life.

Table 4
Hierarchical Regression Analysis Showing Predictors of Satisfaction with Life in Emergency Department Doctors (N= 118)

Predictors	Satisfaction with Life	
	ΔR^2	β
Model I	.07	
Age		-.39**
Gender		-.13
Education		-.16
Specialization		.01
Marital Status		.11
Family System		-.05

*Emotional Intelligence and Self Efficacy as Predictors
of Life Satisfaction among Doctors working in Emergency Department*

Hospital Sector		-.05
Work Experience		.38**
Working Hours		-.16
Number of Children		-.06
Model II	.13	
Emotionality		-.18
Self Control		.13
Well Being		-.11
Sociability		.15
Model III	.06	
General Self Efficacy		.31**
Total R	.20	

Note: * $p < .05$, ** $p < .01$, *** $p < .001$.

A hierarchical regression model was used to analyze the predictors of satisfaction with life in emergency department doctors. Durbin value was viewed to see the independence of any error and its value was 1.78 which was between 1 and 3 hence it was meeting the criteria. Moreover, multicollinearity values were assessed which was not less than .10 for each predictor hence meeting the assumption.

In the first model, the demographics variables were added and a significant regression value was found ($F(10,107) = .84, p < .001$) this shows that there is a significant 7% variance in the model. In the second model, the traits of emotional intelligence were added and a significant regression value was found ($F(4,103) = 1.15, p < .001$) this shows that there is a significant 13% variance in the model. Further, in the third model, general self-efficacy was added which showed a significant regression value ($F(15, 102) = 1.70, p < .001$) that shows 6% variance in the model.

After excluding the first and second models, the variance reduced to 20% but still, the model remained significant ($F(1, 102) = 8.30, p = .005$). Among the predictors, self-control and sociability appeared as a positive predictor, and self-efficacy and work experience as a strong positive predictor of satisfaction with life in doctors working in the emergency department.

The aim of conducting this research was to analyze emotional intelligence and self-efficacy as predictors of life satisfaction, the correlation between "EI and SE" with "LS" among doctors working in emergency departments. The results specified that all hypotheses proved to be true. Doctors' emotional intelligence and self-efficacy determine their life satisfaction.

Emotional intelligence has a positive correlation with life satisfaction among doctors working in emergency departments". Preliminary studies indicated that EI had a positive association with satisfaction in physicians. The more emotional intelligence a doctor has the more satisfaction he will have (Nwankwo et al., 2013). Doctors' emotional intelligence and satisfaction have a significantly positive correlation. (Srivastava et al., 2021). Bar on Emotional intelligence theory proposes that emotional and social skills both together construct behavioral coordination called Emotional intelligence. These abilities establish behavior, understanding, self-expression, performance, and capacity of dealing with daily life demands, meeting our daily life demands create a sense of satisfaction in an individual (Bar-On, 2006). Emotional intelligence has a negative correlation with burnout and positive relation with job satisfaction; doctors who scored higher on emotional intelligence scored less on the burnout scale and manifested more satisfaction (Weng et al., 2011). This study showed that emotional intelligence helps in dealing with burnout and

increases doctors' job satisfaction. Another study indicated that doctors' with a higher level of emotional intelligence experienced less workplace stress and more self-control and life satisfaction. They perform well than doctors with less emotional intelligence have better mental health and more control over stressful situations superior adaptive abilities and less depression, pessimism, and suicidality (Prasad, 2019). According to trait emotional intelligence, emotional intelligence helps an individual to manage his emotions (Petrides et al., 2018). It indicated that emotional intelligence helps in managing emotions, work stress, and leads emergency department doctors to life satisfaction.

Likewise, self-efficacy has also a positive relationship with life satisfaction among doctors working in emergency departments". A cross-sectional study revealed that workplace stress and violence had a negative relation with self-efficacy and doctors' satisfaction. Less workplace stress had a positive relationship with self-efficacy and doctor's satisfaction (Yao et al., 2014). General self-efficacy is someone's belief in his capabilities and how efficiently he deals with different types of stressful situations and events (Schwarzer et al., 2000). According to this definition people who have high levels of self-efficacy can deal with stress and unpleasant situations. As the study showed a positive correlation between less workplace violence/stress and self-efficacy, it means doctors with more self-efficacy are capable of dealing with workplace violence and stress and have more satisfaction in their life and work. Bandura's theory of self-efficacy explains individual's trust in his abilities to perform and manage his actions according to the circumstance increases his motivation, develops a feeling of achievement and a sense of control over the situation improves his well-being and confidence. These factors lead an individual to life satisfaction (Bandura, 1997). Results indicated that emotional intelligence and self-efficacy as a predictor of life satisfaction among doctors working in emergency departments". The results discovered that emotional intelligence and self-efficacy predict life satisfaction among doctors working in emergency departments as prior literature showed that emotional intelligence is a powerful determinant of life satisfaction in health care workers (Habib et al., 2012). Doctors with a high level of self-efficacy are more competent to manage their work and balance their personal and professional life side by side and have more satisfaction, this study showed that self-efficacy predicts life satisfaction among doctors' and both have a positive correlation (Kaliannan et al., 2016). Self-efficacy changes people's perception, thinking, actions and feeling. A low level of self-efficacy leads to helplessness, anxiousness, and depression. Self-efficacy is linked with better cognitive processes, efficient performance, and good decision-making. Self-efficacy could be enhanced. Self-efficacy helps in working efficiently in difficult situations (Schwarzer & Scholz, 2000). It results that "emotional intelligence" and "self-efficacy" determine the life satisfaction of doctors working in emergency departments.

The results of hierarchical regression analysis showed that age, gender and working hours had a significant relationship with life satisfaction. Age and working hours predict life satisfaction in doctors as the previous study also showed that work hours, sex, and age negatively predict life satisfaction (Shanafelt et al., 2015). Further the results revealed that work experience significantly predicts life satisfaction in doctors' prior study also indicated that the work experience of doctors strongly predicts satisfaction in their life (Gedam et al., 2018).

Results indicated that emotional intelligence and self-efficacy as a predictor of life satisfaction among doctors working in emergency departments". The results discovered that emotional intelligence and self-efficacy predict life satisfaction among doctors working in emergency departments as prior literature showed that emotional intelligence is a powerful determinant of life satisfaction in health care workers (Habib et al., 2012). Doctors with a high level of self-efficacy are more competent to manage their work and balance their personal and professional life side by side and have more satisfaction, this study showed

that self-efficacy predicts life satisfaction among doctors' and both have a positive correlation (Kaliannan et al., 2016). Self-efficacy changes people's perception, thinking, actions and feeling. A low level of self-efficacy leads to helplessness, anxiousness, and depression. Self-efficacy is linked with better cognitive processes, efficient performance, and good decision-making. Self-efficacy could be enhanced. Self-efficacy helps in working efficiently in difficult situations (Schwarzer & Scholz, 2000). It has resulted that "emotional intelligence" and "self-efficacy" determine the life satisfaction of doctors working in emergency departments.

There was limited literature present on emotional intelligence, self-efficacy, and life satisfaction of emergency department doctors in Pakistan so this research will fill the gap in the literature in emergency department doctors in Pakistan that how their emotional intelligence and self-efficacy facilitate them working in challenging and hectic places like emergency departments and lead them to their life satisfaction.

Conclusion

The reason for conducting this research was to explore TEI and GSF as predictors of SWL in doctors working in the emergency department and the relationship of life satisfaction with emotional intelligence and self-efficacy. The results indicated that emotional intelligence and self-efficacy were predictors of life satisfaction. There was a positive correlation found between emotional intelligence and life satisfaction among doctors and there was a positive correlation between self-efficacy and life satisfaction among doctors working in the emergency department.

Suggestions

This research has a few limitations; especially the subjective assessment method could lead to information bias. Another limitation was that purposive sampling was used which could lead to selection bias. These limitations could be minimized by changing the assessment method and the sampling technique.

Implications

This study would create insight into health care policymakers and doctors. It would help in designing the interventions for improving doctors' mental health. It will provide guidelines to the health care system to enhance doctors' emotional intelligence and self-efficacy, by providing education and instructions. This education would help in increasing doctors' life satisfaction by rising their emotional intelligence and self-efficacy and would be a great help in promoting doctors mental health. Enhancing their emotional intelligence and self-efficacy will not only increase their SWL but it would also help them in dealing with their stress, burnout, depression, anxiety, and errors in practice. Higher EI and SE would develop personal well-being, efficiency, self-management, professional competency, good decision-making skills, leadership qualities, empathy, and a better doctor-patient relationship. Further emotional intelligence would lead the doctors in understanding and control their emotions.

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