

Research Paper

## Correlational Study of Emotional Intelligence and Quality of Life among Working Male Patients with Chronic Kidney Disease (CKD)

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### ABSTRACT

This research paper investigates the correlation between emotional intelligence (EI) and the quality of life (QoL) among working male individuals diagnosed with Chronic Kidney Disease (CKD). As CKD poses significant challenges to both physical and psychological well-being, understanding the role of emotional intelligence in shaping the quality of life of working male CKD patients becomes imperative. A correlational research design was employed, using The Emotional Intelligence Scale (EIS), developed by Hyde, Pethe, and Dhar (2002), to assess the emotional intelligence levels of CKD patients across ten dimensions and the Quality-of-Life Scale (QLS), developed by Dubey and Dwivedi (2009) to evaluate various aspects of quality of life, including physical, mental, psychological, social, and spiritual well-being, as well as personal functioning and general limitations. The study finds significant associations between EI and QOL among working male CKD patients, with self-awareness, self-motivation, emotional stability, and altruistic behavior positively correlating with higher QOL scores. However, empathy, managing relations, integrity, self-development, value orientation, and commitment show no significant correlations with QOL in this population. These findings contribute to understanding the complex interaction between emotional intelligence and quality of life in CKD patients, potentially informing targeted interventions to enhance their overall well-being.

**Keywords:** *Emotional Intelligence, Quality of life, Chronic Kidney Disease*

Chronic Kidney Disease (CKD) is a global health challenge, affecting millions and straining healthcare systems. Its prevalence is rising due to aging populations and increasing diabetes/hypertension rates (WHO, 2021). CKD impacts physical and psychological well-being, necessitating attention to psychosocial dimensions of care.

Emotional Intelligence (EI) is recognized for influencing CKD patient outcomes and Quality of Life (QOL). EI, the ability to manage emotions effectively, aids in coping with chronic illness (Schutte et al., 2007). Higher EI correlates with resilience, adaptive coping, and improved psychological adjustment, enhancing QOL.

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Quality of Life is crucial, encompassing various well-being domains and shedding light on CKD's holistic impact. Patients face challenges beyond physical symptoms, including emotional distress and social isolation (Low et al., 2019). Understanding QOL informs holistic patient care approaches.

Understanding the link between emotional intelligence (EI) and quality of life (QOL) in CKD is crucial for suitable interventions and management (Al-Jumaili et al., 2014). This study aims to explore this relationship in employed male CKD patients. Using the Emotional Intelligence Scale (EIS) and Quality of Life Scale (QLS), it seeks correlations and insights for personalized interventions. These findings may inform holistic care models, emphasizing psychosocial support alongside medical treatment, thus enhancing patient outcomes (Miranda et al., 2017; Wu et al., 2015).

CKD profoundly affects quality of life (QOL), spanning physical, psychological, and social domains (Lopes et al., 2017; Chen et al., 2020). Emotional intelligence (EI) is recognized for its role in chronic illness adaptation (Mayer and Salovey, 1997; Brackett et al., 2006; Schutte et al., 2007), yet its connection with QOL in CKD remains underexplored. The Quality of Life Scale (QLS) by Dubey and Dwivedi (2009) comprehensively captures QOL variations in CKD (Singh et al., 2013; Patel et al., 2018).

Psychosocial and emotional factors significantly influence CKD patients' QOL (Low et al., 2019), as Wu et al. (2015) show in peritoneal dialysis patients. However, little is known about the EI-QOL relationship among working male CKD patients. This study aims to bridge this gap by correlating EI levels, measured by the Emotional Intelligence Scale (EIS), with various QOL dimensions using the QLS.

Despite valuable insights into emotional intelligence and quality of life in CKD, research lacks exploration of their interrelationship among working male CKD patients. This study aims to fill this gap by correlating the Emotional Intelligence Scale (EIS) and Quality of Life Scale (QLS) data to understand emotional intelligence's associations with quality of life dimensions in this population.

### ***Objectives:***

- To measure the level of Emotional Intelligence of working male patients with Chronic Kidney Disease (CKD).
- To measure the level of Quality of Life of working male patients with Chronic Kidney Disease (CKD).
- To study the relationship between Emotional Intelligence and Quality of Life among working male patients with Chronic Kidney Disease (CKD).

### ***Hypothesis***

There is a significant positive correlation between various aspects of emotional intelligence (such as self-awareness, empathy, self-motivation, emotional stability, managing relations, integrity, self-development, value orientation, commitment, and altruistic behavior) and quality of life.

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### METHODOLOGY

#### Sample

A sample of 30 was selected through the purposive sampling method on the following set of inclusion and exclusion criteria.

*Inclusion Criteria:* To meet the inclusion criteria for participation, subjects needed to:

1. Be male, working, and suffering from chronic kidney disease (CKD)
2. Be 30- 40 years of age
3. Have no psychiatric disorders
4. Have a satisfactory level of cooperation and perceptual ability.
5. Economic status be middle class
6. Geographical area- All the patients are residents of Nasik district.

*Exclusion Criteria:*

- Patients suffering from Acute Kidney disease

#### Statistical analysis:

In this study, Descriptive statistics like mean and standard deviation were computed for each component followed by correlation.

### RESULTS AND INTERPRETATION:

The data obtained is presented in the following tables,

*Table 1 Showing the Correlation between the ten dimensions of the Emotional Intelligence Scale and Quality of Life Scale:*

|                       | Self-awareness | Empathy        | Self-motivation | Emotional Stability | Managing Relations |
|-----------------------|----------------|----------------|-----------------|---------------------|--------------------|
| <b>Mean</b>           | 17.67          | 19.93          | 24.87           | 17                  | 17.33              |
| <b>Std. Deviation</b> | 1.81           | 3.29           | 3.01            | 1.38                | 2.70               |
| <b>Correlation</b>    | 0.67           | 0.09           | 0.55            | 0.52                | 0.02               |
| <b>Interpretation</b> | Correlation    | No-Correlation | Correlation     | Correlation         | No-Correlation     |

|                       | Integrity      | Self Development | Value Orientation | Commitment     | Altruistic Behaviour |
|-----------------------|----------------|------------------|-------------------|----------------|----------------------|
| <b>Mean</b>           | 12.07          | 8.63             | 8                 | 8.07           | 8.33                 |
| <b>Std. Deviation</b> | 2.08           | 1.24             | 1.34              | 1.60           | 1.56                 |
| <b>Correlation</b>    | 0.24           | 0.42             | 0.47              | 0.14           | 0.57                 |
| <b>Interpretation</b> | No-Correlation | No-Correlation   | No-Correlation    | No-Correlation | Correlation          |

*Table 2 Showing Correlation between Overall Emotional Intelligence Scale and Quality of Life Scale:*

|                       | Emotional Intelligence scale |
|-----------------------|------------------------------|
| <b>Mean</b>           | 141.7                        |
| <b>Std. Deviation</b> | 10.50                        |
| <b>Correlation</b>    | 0.51                         |
| <b>Interpretation</b> | Correlated                   |

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### DISCUSSION

The correlational analysis reveals key insights on how emotional intelligence (EI) dimensions relate to the studied population's quality of life (QOL). Self-awareness strongly correlates with QOL ( $r = 0.67$ ), indicating higher self-awareness links to better QOL. Conversely, empathy, managing relations, integrity, self-development, value orientation, and commitment show no significant correlations with QOL indicating that these EI dimensions may not directly impact individuals' perceived quality of life in this context. However, self-motivation ( $r = 0.55$ ), emotional stability ( $r = 0.52$ ), and altruistic behavior ( $r = 0.57$ ) positively correlate with QOL, suggesting individuals with these traits tend to report higher QOL. These findings emphasize the importance of self-awareness, self-motivation, emotional stability, and altruism for QOL. Further research is needed to understand these relationships better and develop targeted interventions to enhance QOL.

### SUMMARY AND CONCLUSION

The study on Emotional Intelligence (EI) and Quality of Life (QOL) among working male Chronic Kidney Disease (CKD) patients finds significant associations. Self-awareness, self-motivation, emotional stability, and altruistic behavior positively correlate with higher QOL scores. However, empathy, managing relations, integrity, self-development, value orientation, and commitment show no significant correlations with QOL in this population.

Further research is needed to explore these relationships and their implications for patient care and management strategies. Integrating psychosocial support into CKD management can improve health outcomes, while workplace accommodations for CKD patients can promote vocational rehabilitation and work-life balance. Longitudinal research is needed to explore EI's long-term effects on QOL trajectories, offering significant implications for research, clinical practice, and healthcare policy to enhance patient outcomes and QOL in CKD populations.

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### ***Conflict of Interest***

The author(s) declared no conflict of interest.

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