

Research Paper

## An Analysis of the Relation between Emotional Intelligence and Therapeutic Self-Efficacy during Online Psychotherapy

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### ABSTRACT

This paper aims to look at the effect of Emotional Intelligence on Therapeutic Self-Efficacy of therapists providing psychotherapy through non-physical/online platforms. The paper reviews literature on the topic through various peer reviewed sources to get acquired understanding of prior research done on the area of study. The study conducted includes data collected from 30 therapists; their emotional intelligence scores as well as their therapeutic self- efficacy scores. Control variables such as number of years of experience, number of years providing online therapy and number of clients taken, are also taken in the study. Statistical analysis in the form of regression analysis is done to understand whether there is significant reason to believe emotional intelligence has an effect on therapeutic self-efficacy and trends in the data are noted and discussed. Furthermore, the paper looks at the limitations of the study as well as provides and insights and recommendations on future research to be done in the same area.

**Keywords:** *Emotional Intelligence, Therapeutic Self-Efficacy, Online Psychotherapy, Regression Analysis*

With technological advancements taking place on massive scales, along with the spread of awareness for mental health concerns, it is almost a given that the practise of psychotherapy would not remain in its traditional physical form but be conducted on online platforms as well. We also see a large rise the online platforms that provide psychotherapy and counselling in many formats.

Another important factor that led to rise of the importance of this topic is the current global situation of the covid-19 pandemic, owing to which physical movement as well as meeting individuals become a health risk. At a time like this, especially given the rise of stress individuals experience with the pandemic and adapting to the same, online platforms for psychotherapy becomes much more prevalent.

Efficacy can be understood as an individual's "perception of his or her own capability to execute a specific task and is a key contributor to behaviour change and psychotherapy outcome (Bandura, 1976). Self-efficacy relates to a variety of human aspects, including self-regulation, motivation, academics, behavior change, self-identity, gender roles, and more

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(Bandura, 1976; Caprara, Barbaranelli, Borgogni, & Steca, 2003; Gushue & Whitson, 2006). People with higher self-efficacy regarding a specific challenge, task, or action will try harder and persist longer to successfully overcome the challenge compared to those with lower self-efficacy (Lee & Bobko, 1994).

There is empirical research to support that self-efficacy has a causal relationship with behaviour in which higher self-efficacy leads to better performance (Bandura, 1977b; Bandura & Adams, 1977; Barkhoff & Heiby, 2010; Lent et al., 2009; Rotberg, Brown, & Ware, 1987). Self-efficacy is an important influencer of human achievement in various areas of life, including health, sports, development, employment, education, and business (Bandura, 1997; Joët, Usher, & Bressoux, 2011; Klassen & Chiu, 2010; Peng)“(Kouimelis.F, 2019)

Emotional Intelligence can be defined as the ability to perceive and express emotion, assimilate emotion in thought, understand and reason with emotion, and regulate emotion in the self and others. (Mayer et al. 2000)

This study helps us understand the relationship between Emotional intelligence and Therapeutic efficacy in the contemporary setting of online psychotherapy platforms while also looking at coefficients such as the number of years the therapist has been practising online therapy for, the average number of clients they take on as well as the number of years of experience in the field.

### **REVIEW OF LITERATURE**

In the article of “Ethical Issues in Online Counselling”, Kraus. R (2011) begins by stating that there are certain conditions that apply in the work of online counseling that could range from up to maintaining the quality of service, avoid potential complications, and also serve the community safely. The author even states that professionals practicing using online means must be aware of the limits set for the online consults and must also understand the ethical as well as legal considerations that entails it. The article focuses on explaining the current ethical standards that relate to the delivery of mental health care online. Examining the ethical framework for professional online counseling, it can be pointed out that the counselors taking online sessions must remember the fact that not all of their clients or situations can or must be dealt with online. There are certain circumstances or situation that may require in-office treatment and cannot be done online. Adapting to the idea of anonymity wherein the clients may create fictional names and take appointments for sessions may not always work especially in the case of clinicians who do not engage with clients that do not provide with their identity. There are two main reasons why clinicians insist on knowing the identity of the client first is the client’s safety. A client’s safety is necessary so that the clinician may offer concrete intervention to the client if and when it is needed. The second consideration that the clinician must keep in mind is that knowing the identity of the client for the online sessions could avoid dual relationships. Clinicians that practice and provide services online must respect the limitations of their licenses and malpractice insurance policies. Therefore, to conclude, the clinicians are allowed to provide professional care online to the clients that reside in the state(s) or province(s) in which the professional practitioner is licensed or certified.

Fairburn.C and Patel.V (2017) in their paper “The impact of digital technology on psychological treatments and their dissemination” takes a look into digital methods currently

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available for delivering psychotherapy over online media. The paper performs a comprehensive analysis of the different methods of delivery of online psychological therapy and elaborates on the process of derivation of these therapeutic methods from traditional physical forms of mediating therapy.

The paper outlines the rise of the role of Digital technology in administering mental health over online media and emphasizes on the merits of digital technology in increasing access to mental health services, flexibility, enhanced communication, convenience, economic advantages and increased demand. The paper further looks into the development of Digital versions of Physical psychotherapeutic treatment by deriving from existing conventional techniques such as cognitive behaviour therapy and Acceptance and commitment therapy.

The paper also illustrates the use of mobile based applications and digital self help guides in aiding mental health rehabilitation and treatment while shining light on more complex and novel problems such as the treatment of depression through cognitive bias modification. The authors also expand on the possibility of using gaming to address reconsolidation of intrusive traumatic memories, autism and anxiety disorders. The paper argues that existing digital treatments differ based on the psychopathology and can range between extremely specific cases such as that of suicide prone patients to transdiagnostic cases that have a great clinical range thereby opening up avenues to new forms of psychotherapeutic treatment online. The format of such intervention further varies largely based on the digital infrastructure and accessibility and training available to the patients. It is also demonstrated that digitization of online mental health treatment presents an immense opportunity for data accumulation which can help in gaining deeper insights to developing robust solutions to addressing the challenges of delivering online psychotherapeutic treatment. The author concludes that while psychotherapy is undergoing a digital transformation, the rate of adoption and accessibility among large demographics still poses a major challenge when it comes to Global dissemination of online mental health services.

Safran. J and Muran. C (2011) emphasizes the importance of Emotional Intelligence as an effective measure while understanding stress and personality traits. Emotional Intelligence has been defined as: the competence to identify, monitor, and express emotions; to label, differentiate, and understand the complex nature, antecedents, and consequences of emotions; to assimilate emotions in thought and strategically use emotions to achieve one's adaptive goals; and to effectively regulate positive and negative emotions, both in self and others. He goes on to state that by measuring the EI of an individual, it reveals insights into the adaptive nature of the subject in being able to handle various external factors in their environment competently. Through measuring the EI of a person, therapist would be able to trace the likelihood of the coping nature of their patients as "coping refers to the process of managing various demands that are appraised as personally threatening, challenging, or otherwise demanding." And points towards the capacity for adaptive coping or the lack of it thereof. It is seen that emotionally intelligent individuals exhibit lesser stress due to their ability to adaptively cope as well as not exposing themselves to stress inducing environments by making intelligent decisions through maintaining a strong and composed inner conduct. Through analyzing the Emotional Intelligence of a person, Mental Health professionals may then develop effective strategies to identify key areas that require attention while addressing and making the patient understand them as well which can then act as a foundation in treatment and therapy. Emotionally intelligent people are further seen to exhibit more constructive thought patterns and possess better clarity and are capable of

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repairing emotions more effectively due to their high awareness of their emotional states of being. Upon identifying the key areas that partition the emotional capacity of an individual, EI measures help track the progress of patients in developing effective methods in order to cope with their multi-variate environment. However, the author also cautions that more study into the field of EI is required in order determine the role measures of EI play in developing effective strategies and enriching adaptive coping in patients.

Lewis. J (2019) analyses the relationship between Emotional Intelligence and the Self-Efficacy of counseling students in Group Counseling. It is widely accepted that professionals with higher EI are capable of delivering better counseling to their clients as they imbibe qualities such as empathy, reflection on feelings and building inter-personal relationships required to respond effectively to patient needs. In doing so, it is also noted that EI as a measure of counselling efficacy works differently when applied to the setting of group counseling as opposed to individual counseling as effective group facilitation requires very different skill sets such as establishing group rules, enforcing these rules so as to ensure it is followed by all the constituent members, assisting with client engagement and managing challenging behaviors within the group. The needs presented in the case of group counseling can be especially overwhelming for Novice practitioners and the paper suggests that Novice counselors with higher Emotional Intelligence may be more effective in group counseling than ones exhibiting lower levels of EI. Self-Efficacy has been shown to be an important measure for Counsellor performance and has been shown to have a positive correlation with Client outcomes. Thus, it is reasonable to posit that with an increase in EI, Novice counsellors should report higher levels of Self-Efficacy. Although the study shows that higher Emotional Intelligence leads to higher self-efficacy levels in individual counseling, it indicates that EI scores do not play a role in moderating Self Efficacy within the realm of Group Counseling. The participants in the study showed an increase in Group self-efficacy due to field work and leading Group Counseling sessions but EI did not establish a relationship that could predict the Self Efficacy of the students involved in Group Counseling.

Malkoc. A and Sunbul. Z (2019) investigates the relationship between Emotional Literacy, cognitive flexibility and its influence on the self-efficacy among senior students of psychology and psychological counseling. As counseling requires the practitioner to possess the ability to empathize, understand and offer sound solutions and strategies to countering the mental blockades that exist among their clients, it requires them to correlate with a measure of their Emotional integrity. In modern literature on psychological practice, one such emergent measure is Emotional Intelligence and self-efficacy in treatment. It is seen that Self-Efficacy being a metric that can be used to measure the perceived effectiveness of the individual in delivering psychological advice to their clients has a strong correlation with the emotional intelligence of the practitioner. Emotional Intelligence or literacy measures the ability of an individual to understand and become aware of one's own emotions in relation with their environment thus being able to function effectively for themselves as well as others and in doing so better their own experience of life. Along with Emotional Literacy, cognitive flexibility Is also seen as an important factor in being able to adapt and be aware of alternative options to given situations and in doing so ease the burden of being leashed to a single solution that can lead to dissatisfaction and stress in individuals. Psychological counseling can be extremely stress inducing to novice practitioners and students as it requires them to confront difficult emotional states as well as a spectrum of client problems and expectations and thus Emotional literacy supplemented with Cognitive Flexibility can

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be used in order to measure the efficacy of the counseling delivered and estimating the growth of therapists towards improving their competency in delivering psychological advice. The study further uses the 34-item Emotional Literacy Scale, 12-item Cognitive Flexibility Scale and 41-item Counseling Self-Efficacy Scale to conclude that emotional literacy has positively direct correlations with helping skills self-efficacy and session management self-efficacy while cognitive flexibility has positively direct correlations with helping skills self-efficacy, session management self-efficacy and counseling challenges self-efficacy.

In the article of “Emotional Intelligence: Does it Influence Decision Making and Role Efficacy”, Chauhan S. and Chauhan D. elaborates on the study they conducted to assess the impact of Emotional Intelligence on Decision Making Role Efficacy of managers.

The study shows that managers that belong at the top level of management have a substantially higher level of emotional intelligence and thereby being on a higher level at decision making. The role of efficacy of the managers sitting at the top level of management was also found to be higher when compared to the managers at the middle and lower levels. It was also concluded from the results of the study that a high level of emotional intelligence can positively contribute towards effective decision making and therefore the role efficacy of managers, since there was a positive correlation between emotional intelligence and decision making along with role efficacy. Research has proven that emotional intelligence is also linked to successful performance in the workplace.

The authors further mention about a psychological literature wherein Mayer, Salovey, and Caruso found a way to divide the abilities and skills of Emotional Intelligence to four different areas being the ability to perceive emotion, the ability to use emotion to facilitate thought, the ability to understand emotions, and the ability to manage emotion. These four areas are known as the four-branch ability model. The order of the branch that is from perception to management, shows the degree to which the ability is integrated within an individual's major psychological subsystems.

The authors also discuss on the relevance of emotional intelligence in the workplace in reference to the four-branch theory of emotional intelligence includes flexible planning, balancing thoughts and feelings, motivation, decision making, team effectiveness, creative thinking, and social effectiveness. It is also stated that emotional intelligence and people skills enhances your success. The study conducted by the authors affirm the research and theories done on emotional intelligence point towards the interdependence of emotion and cognition in the process of decision making. Neuroscience has also confirmed that emotions play a crucial role in decision making and more generally on the behavior of an individual. While on one hand logic and reason are considered to be objective, on the other hand, emotions are considered to be subjective. Therefore, there are times when being emotional is confused with being irrational. Emotions at the end of the day cannot be separated from human decisions and actions and they can be quite productive. On the other hand, emotions, when they are biased, can result in decision errors. It is most generally believed that negative emotions are unproductive and need to be avoided but, in some cases, negative emotions can bring our positive results if they are channeled constructively.

In the article of “School Counselor's Emotional Intelligence and Its Relationship to Leadership” by Mullen P, Gutierrez D, and Newhart S. conducted an observational study on

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the relationship between Emotional Intelligence (EI), Leadership Self-Efficacy (LSE), Self-Leadership, and leadership experiences in the School Counselors and the work they do. The results of the study shows that school counselors who reported higher levels of emotional intelligence also reported greater LSE, self-leadership, and leadership experience.

School counselors often use leadership skills to advocate with students and also to lead the management of their counseling program. School counselors are expected to sustain their ethical responsibility to use their leadership skills to enhance the school by bringing systematic changes. It is observed that leadership plays an important role in school counseling and hence school counselors are expected to incur that quality. Therefore, the reason for the study becomes clearer. The authors quote Dollarhide who suggested that school counselors become effective leaders work within structural, human resource, political, and symbolic leadership contexts including emotional intelligence might help them navigate those settings. They also quoted Mayer and Salovey that suggested emotional intelligence to be a set of affective processing capabilities when there exists greater emotional intelligence leading to improved ability to interact with others in social situations.

The authors also discuss about self-efficacy that was popularized through the works of Bandura. It was also stated from a research that school counsellors with self-efficacy was related to the rate for which they executed school counseling services. It was also found that a person with higher degree of perceived LSE are more likely to showcase leadership activities. Therefore, school counsellors that have higher degrees of LSE are more likely to engage in leadership activities.

In the article of “Mental Health and e-Therapy”, how psychotherapy and information technology has been combined in today’s world and how it has its advantages and disadvantages in helping with each individual’s mental health condition. Psychotherapy is known for its private sessions in an office with a one-on-one conversation with a trained professional, addressing mental health issues and treating them.

Although, e-Therapy is a distant approach to psychotherapy wherein it is an online session with the trained professional rather than a face-to-face conversation that is conducted over the internet. E-therapy is mostly conducted using real-time messaging, chat rooms, or emails.

The author further states the numerous advantages to e-therapy. To begin with a few, the internet allows anonymity and provides the individual a greater willingness to open up to the therapist. It also helps the individual to avoid seeing the therapist’s reactions. It is also a very convenient form of psychotherapy wherein people do not need to go into a therapist’s office with the risk of being seen by others. Additionally, e-therapy tends to be less expensive than office sessions.

Even though communicating using emails, online messaging, or instant messaging, used for communication has been adopted in our daily lives, it still has its drawbacks of not allowing two parties communicating to receive important cues about what the other person might be trying to communicate. It could include tone of voice, facial expressions, body language, etc. Therefore, this could also lead to miscommunication and misdiagnosis of the individual and his mental health issues. Additionally, psychotherapists use proprietary clinical assessment instruments to help them diagnose a client. Many of these tests and instruments that are used

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for diagnosis tend to be not ethically but legally required to be given credential professional in a controlled situation. Such things cannot be done over the internet since there will be no control over who will supervise the test, how long the client would take to answer the questions, or if it was even the same individual who took the test.

Author concludes by stating that although e-therapy is becoming increasingly popular, there must be more research done to determine the efficacy in this type of therapy, the situations under which it works best, and also the type of clients for whom it is best suited.

In the article of “Client Satisfaction and Outcome Comparisons of Online and Face-to-Face Counselling Methods” by Murphy L, Parnass P, Mitchell D, Hallett R, Cayley P, and Seagram S. compare the Global Assessment Function (GAF) and Client Satisfaction Survey scored for clients receiving either face-to-face or online counselling. Cyber-counselling is a field that has become tremendously popular with the growth and advances in technology and widespread use of the internet. With the emergence of cyber-counseling and clients turning to cyber-counseling for their mental health issues prompted the authors of this article to compare its effectiveness to face-to-face counselling.

The authors further discuss how cyber-counseling has been the subject of many non-quantitative studies and qualitative review analysis. The authors quoted the analysis made by Barak who conducted an extensive meta-analysis studying online psychotherapeutic interventions. The analysis resulted in a medium effect wherein the effect of online interventions were similar to the effects received in face-to-face interactions. The authors hence concluded that online therapy on an average is as effective as or nearly as effective as face-to-face therapy. But researching into a lot of theories and studies conducted by various other researchers, the authors also concluded that client satisfaction with online counselling is influenced by the client's comfort and familiarity. They also found that depending on the time spent online for therapy sessions the clients may be satisfied with online therapy sessions. But people who have undergone face-to-face sessions at first may not gain the same satisfaction from online therapy sessions.

The authors concluded that counsellors can establish a comfortable environment, help clients develop plans and effectively communicate their skills to help their clients. The research conducted confirms the results of reviewed research and ensures that online counseling can provide client satisfaction and the outcomes of such counseling are as good as those procured through face-to-face counseling.

In the article of “The Promise of e-Therapy” by Benderly B. focuses on e-therapy and how well do such therapists work along with the clients that prefer e-therapy. The author starts off by explaining a case study wherein a Sheriff's deputy pulls up to the emergency room with a disoriented passenger who seems to need immediate psychiatric assistance but was turned down due to long waiting lines at the emergency room. Therefore, comes the idea of telemedicine wherein solutions can be brought right into a patient's homes and could help revolutionize the model health care. This being a relatively old case study does not consist of the terms that are used in today's world. Today the term is psychotherapy and that being online can be termed as e-therapy. It has been claimed that e-therapists can work and do most things that psychiatrists and mental health providers do in person. And the work they put up has in most cases been satisfactory and successful. Although it is suggested that

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therapists using the internet medium for their sessions must change their approach to compensate for the loss of cues that they procure during a face-to-face session.

The author also mentions the hurdles faced in setting up an e-therapy session. It could start from the funding that takes in for a start-up that can be often a major challenge and till date most projects rely on the research grants that they are allowed. Insurance coverage can be very difficult to procure. Videoconference connection and the internet cross state lines including national boundaries, etc. can also be a hassle. Establishing identity and confidentiality in cyberspace needs to be done very carefully. Long-distance or online therapy sessions requires careful emergency plans that includes resources available in the patient's area of issues. Sometimes it can be risky for patients to do tech- assisted sessions especially those at risk of self-harm or patients that acquire supervision. In the article of "Emotional Intelligence and Implications for Counseling Self-Efficacy: Phase II" by Easton C, Martin Jr. W, and Wilson S. present the second phase of their nine-month study on the relationship between emotional intelligence and counseling self- efficacy.

The Phase II study revolved around 118 counselors that are undergoing training and another set of professional counselors completed the Counseling Self-Estimate Inventory (COSE) and also the Emotional Judgment Inventory (EJI). The results showed a significant correlation between two of the EJI scales that includes "Identifying Own Emotions" and "Identifying Other's Emotions". The results also showed four of the five COSE scales. The study also involved students wherein students perceived counseling self-efficacy and showed a significant gain when compared to the study made on professional counselors over the nine-month period.

The Phase I study conducted by Martin W, Easton C, Wilson S, Takemoto M, and Sullivan S. in 2004 supports Phase II results. The results of Phase I indicated that emotional intelligence can be a unique construct that is inherent in individuals that are preparing for careers as professional counselors.

In the article of "Salience of Emotional Intelligence as a Core Characteristic of Being a Counselor" by Martin W, Easton C, Wilson S, they investigated the relationship between the emotional intelligence and counseling self-efficacy.

The participants for the study included 140 counseling students and practicing counselors who had finished up with the Emotional Judgment Inventory and the Counseling Self-Estimate Inventory. Emotional Intelligence differentiated counselors from the non-counselors category but it provided mixed results while differentiating counseling students and practicing counselors. The factors of emotional intelligence such as Identifying Own Emotions, Expressing Emotions Adaptively, and Using Emotions in Problem Solving successfully predicted counseling self-efficacy in both the counseling students and the practicing counselors. Therefore, the authors concluded that Emotional Intelligence may be another marker for individuals exploring professional counseling as a career and for improving student's counseling self-efficacy.



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### ON DATA – COLLECTION AND MODEL ELABORATION

#### *Data Collection*

Data for the study is collected through online questionnaires that consisted of an E.Q test as well as a test for Therapeutic Self-Efficacy. Sample set of 30 participants, all practicing online therapy were taken under study through convenient sampling. The participants were contacted through online websites, social media and emails. The participants were briefed about the study and the aim of the study and it's contemporary relevance were explained to them after which Informed Consent was taken from all participants.

The Emotional Intelligence test conducted was developed by Dalip Singh and Dr.NK Chadha. The said test also measures sub aspects of Emotional Intelligence such as emotional sensitivity, emotional maturity and motional competency. The test holds an test-retest reliability of 0.94 and split-half reliability of 0.86. The validity of the test if 0.89.

The questionnaire consists of 22 situations with four options as the response. Each response is graded for the total E.Q score to be calculated.

The Therapeutic Self-Efficacy is being calculated through CASES, Counselor Activity Self-Efficacy Scales, developed by R. W. Lent, C. E. Hill and M. A. Hoffman. The questions are divided into three parts, consisting of a total of (15+10+16) 41 questions answered on a 10 point Likert Scale.

Additionally, the data for control variables were also collected, such as the number of years they have been practicing online therapy, the approximate number of clients they have treated online and the number of years of experience they have in the field of psychotherapy. After which a table containing all scores were collated for analysis.

**Table 1: Data Set**

Therapist No.	y axis (D.V= Therapeutic Self-Efficacy)	x axis (IV=EQ)	Emotional Sensitivity	Emotional Maturity	Emotional Competency	C.V (Years of Exp)	C.V (No. of years providing online therapy)	C.V (Approx No. of Clients)
Therapist 1	6.5	320	90	115	160	2.5	1	30
Therapist 2	6.9	340	95	95	180	7	4	100
Therapist 3	7	340	90	105	185	10	0.25	10
Therapist 4	6.9	345	95	120	165	2	0.5	5
Therapist 5	7.2	345	100	110	180	6	1	800
Therapist 6	7.3	345	95	115	160	7	4	800
Therapist 7	7.6	350	85	115	170	30	25	500
Therapist 8	7.1	350	100	105	165	15	2	50
Therapist 9	7.4	360	95	100	170	2	2	500
Therapist 10	7.5	360	100	110	170	4	1.5	50
Therapist 11	7.5	365	80	100	160	5	2	500
Therapist 12	7	365	95	110	145	2	1	25
Therapist 13	8	365	90	115	145	8	1	12
Therapist 14	8.1	365	70	95	180	5	1	10
Therapist 15	7.4	370	90	110	170	4	4	50
Therapist 16	6.8	370	95	130	165	5	1	20
Therapist 17	7	370	100	105	170	3	2	12
Therapist 18	7.1	370	100	100	165	2	1	15
Therapist 19	8.3	370	100	105	180	5	1	500
Therapist 20	7.5	375	95	115	170	1	1	10

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Therapist No.	y axis (D.V= Therapeutic Self-Efficacy)	x axis (IV=EQ)	Emotional Sensitivity	Emotional Maturity	Emotional Competency	C.V (Years of Exp)	C.V (No. of years providing online therapy)	C.V (Approx No. of Clients)
Therapist 21	7.6	380	85	115	160	6	3	50
Therapist 22	6.8	380	95	95	130	7	5	200
Therapist 23	7.7	380	85	105	155	10	5	100
Therapist 24	8.7	380	100	110	150	4	1.6	100
Therapist 25	8.9	380	90	110	190	6	4	250
Therapist 26	8.3	385	90	110	145	11	4	1200
Therapist 27	7.4	390	95	115	185	4	1	150
Therapist 28	8.4	390	100	100	165	5	2	100
Therapist 29	8.6	390	100	115	165	6	3	1000
Therapist 30	7.6	395	95	85	160	7	2	400

### Model Elaboration

The study uses the Linear regression line-fit test model to determine the relation between Emotional intelligence, Years of experience in therapy, years of experience in online counseling and Number of Clients as the independent variables and respective self-Efficacy scores as the Dependent variable. The subscales of Emotional Intelligence are Sensitivity, Maturity and Competence. It also uses a correlative- descriptive study in order to understand the correlation between Self-Efficacy V/S (Sensitivity, Maturity and Competence) as well as the correlation between Emotional intelligence and its subscales namely Sensitivity, Maturity and Competence.

The passing criteria for the data models is as follows:

- Model Effectiveness:  $R^2 > 0.4$  (indicating Moderate to Strong effectiveness)
- Variable effectiveness: p value  $< 0.01$  at 90% confidence
- Cronbach's Alpha  $> 0.7$  (indicating that the model is a good fit)
- Correlation  $> 0.3$  (indicating moderate or above correlation)

## RESULTS, ANALYSIS, AND DISCUSSION

### Results:

**Table 2: Inter-Correlation between Self-Efficacy, EQ and Subscales**

Variable	Self-Efficacy	EQ	Sensitivity	Maturity	Competence
Self-Efficacy	1				
EQ	0.6	1			
Sensitivity	-0.082	0.074	1		
Maturity	-0.055	-0.171	0.098	1	
Competence	0.084	-0.205	-0.029	0.013	1

**Table 3: Regression Model fit indices for the proposed model**

Parameters	Coefficients	Std Error	P-Value	R <sup>2</sup>	Cronbach's alpha
Intercept	0.032	1.973	0.987	0.5	0.96
C.V (Years of Exp)	0.021	0.033	0.528		
C.V (No. of years providing online therapy)	-0.013	0.040	0.737		
C.V (Approx no of Clients)	0.0004	0.0002	0.127		
x axis (IV=EQ)	0.019	0.005	0.0009		

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**Table 4: Inter-Correlation among Emotional Quotient Subscale variables and model variables**

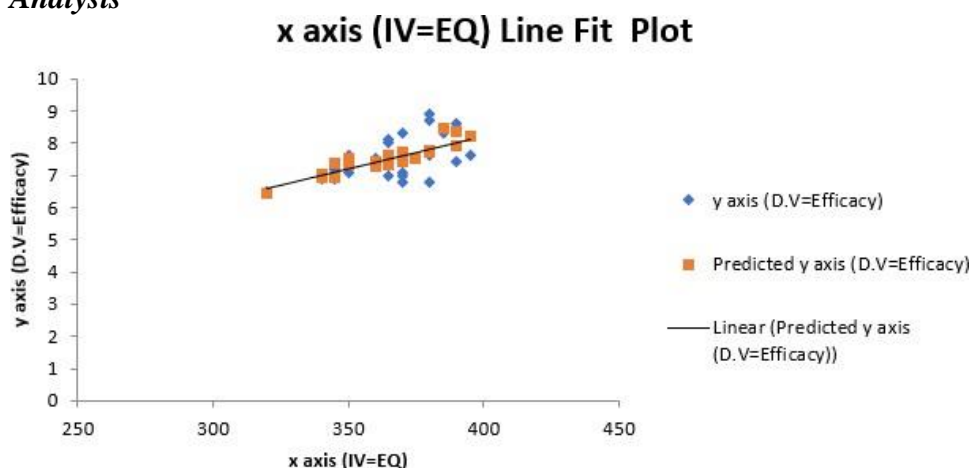
Variables	Sensitivity	Maturity	Competence	Years of Exp	No. of years providing online therapy	Approx no of Clients
Sensitivity	1					
Maturity	0.098	1				
Competence	-0.029	0.013071	1			
Years of Exp	-0.242	0.029816	0.01471	1		
No. of years providing online therapy	-0.247	0.075182	0.02914	0.85	1	
Approx no of Clients	0.074	0.004681	0.07269	0.25	0.233	1

The data model was subject to linear regression with the Regression equation being:  
 $Y(\text{Efficacy}) = B0 + B1(EQ) + B2(\text{Years of exp.}) + B3(\text{Years of providing online therapy}) + B4(\text{No. of clients}) + u0$

**Efficacy = 0.02\*(EQ) + 0.008\*(Years of Exp) - 0.0023\*(No. of years of online exp) + 0.0005\*(Approximate No. of clients)**

with an R<sup>2</sup> of 0.5 and Cronbach’s alpha being 0.96. The p-value for Emotional Intelligence being 0.0009, Years of experience p-value (0.528), No. of years providing online therapy p-value (0.737) and Approximate no of Clients p-value(0.127). Further the descriptive statistics on the inter-correlation among the model variables yielded the results as published in Table 1 and 3 respectively. Two components of the model variables are analyzed through the data wherein the correlation of the subscales with Emotional Intelligence and efficacy is examined along with the correlation of the said subscales with the control variables of the study.

### Analysis



**Figure 1:**

Figure 1 present the Line Fit Plot for Counseling Self Efficacy vs Emotional Intelligence generated from the developed Regression model with an R<sup>2</sup> value of 0.5 and Multiple R of

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0.66 showing a moderate fit as per the passing criteria ( $R^2 > 0.4$ ). Further, applying the Cronbach's Alpha test yields a result of  $\alpha = 0.96$  suggesting a strong fit for the data presented with respect to Emotional Intelligence having an influence on the Self-Efficacy scores of online therapists and counsellors. Upon inspecting the p-values of the independent variables of the study from Table 2, we see that EQ is a highly significant metric in predicting the Self-Efficacy values of psychotherapeutic professional online while the years of experience in delivering psychological advice and the number of clients find extremely weak relations with the Self-Efficacy of the counsellor suggesting that self-efficacy in the observed sample is least modified by these factors. It is also to be noted that linearity of the model is better preserved among counsellors with lower levels of efficacy within the sample population collected while trends of divergence emerge with an increase in efficacy levels greater than 8.

The study also looks into the relationship among the emotional quotient scores of participating counsellors and the subscales of Emotional Intelligence. From table 1, We see that while there is a significant correlation between Self-Efficacy and the total EQ scores of the counsellors, we see weak correlations among Emotional Intelligence scores and the subsequent subscale scores. Sensitivity when measured against EQ yields  $r = 0.074$  while Maturity has a negative correlation of  $r = -0.171$  and Competency exhibiting similar trends with  $r = -0.205$  indicating that there is a significant trend of high competency leading to lower Total EQ scores. Thus, it can be inferred that the emotional subscales do not play a significant role in predicting the EQ or Self Efficacy of counsellors while the total EQ score is a significant measure in predicting Self-Efficacy of practicing counsellors.

From Table 4, it can also be seen that the sensitivity of the counsellors is seen to decrease with increase in the number of years of experience in providing online counselling ( $r = -0.247$ ) while from Table 2, it can be seen that it has no significant effect on the Self Efficacy levels of the counsellors.

### **DISCUSSION**

It is widely accepted that professionals with higher EI are capable of delivering better counseling to their clients as they imbibe qualities such as empathy, reflection on feelings and building inter- personal relationships required to respond effectively to patient needs. This has led to numerous studies on the correlation between EI and counsellor self-efficacy. However, with the emergence of modern online platforms of psychotherapy, we see a growing trend of clients shifting to these online platforms seeking psychotherapeutic help. This study looks into the fundamental question as to if Emotional intelligence has any effect on the self-efficacy of online professionals providing psychological counselling. Data collected from 30 participants where treated using the Regression Line fit model with Self-Efficacy being the dependent variable and Emotional Quotient, No of years of experience as an online therapist and No of clients as the independent variables. Upon examination of the results, we find that among the control variables employed, emotional quotient holds the highest significance in predicting the self-efficacy of the respective participating counsellors with a p-value of 0.009 suggesting that there is a 99% confidence in there being a significant relationship between the respective variables. It is also noted that the linearity of the trend is better preserved among lower efficacy scores as opposed to higher scores as it requires a larger sample size to make a confident determination while still not affecting the overall effectivity of the model demonstrating an  $R^2$  value of 0.5. While significant relations are observed between the Total EQ scores and Self-Efficacy of counselling, no strong relations

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could be found between EQ and its subscales, namely Sensitivity, Maturity and Competence. While it is largely expected that the number of years of providing therapy should have a significant influence in the EQ and thus on Self-Efficacy, no such significant trend could be identified in this analysis.

### **LIMITATIONS OF THE STUDY AND FURTHER RESEARCH**

#### *Limitations of the Study*

- One of the major limitations of the study is the very limited data set (n=30)
- The bigger the data sample, the better results you can receive especially in a topic that requires a generalization of any sort.
- We also witness that the even though the study was controlled, we do not find any significant relation between the control variables and the dependent variables, which indicates the study has to be controlled better by more variables or be researched again through the same variables with a bigger data size.
- We have looked at Emotional Intelligence through its sub scales but have not looked at efficacy through its possible sub division, which again could provide better data.
- Pre-clean up of data before analysis could help with the statistical analysis being more conclusive.
- The questionnaires provided to the samples consisted of tests that should have ideally been performed in the same physical space rather than an online platform without the administrator present.
- The Literature found to be reviewed was limited considering the contemporary nature of the research.

#### *Further Research*

- As mentioned through the study, this is a topic of much contemporary importance and holds much value for future research, beginning with the fact that there is very limited research on the topic in any form.
- Looking at this topic through a cultural lens, that is to say, look at sub groups of ethnicity would be one.
- Looking at other forms of efficacy rather than just self-Efficacy would provide more significant data.
- Looking into Disembodiment due to lack of physical presence could be another important area of study in this topic.

### **CONCLUSION**

It is widely accepted that professionals with higher EI are capable of delivering better counseling to their clients as they imbibe qualities such as empathy, reflection on feelings and building inter-personal relationships required to respond effectively to patient needs. This has led to numerous studies on the correlation between EI and counsellor self-efficacy. However, with the emergence of modern online platforms of psychotherapy, we see a growing trend of clients shifting to these online platforms seeking psychotherapeutic help. This study looks into the fundamental question as to if Emotional intelligence has any effect on the self-efficacy of online professionals providing psychological counselling. Data collected from 30 participants were treated using the Regression Line fit model with Self-Efficacy being the dependent variable and Emotional Quotient, No of years of experience as an online therapist and No of clients as the independent variables. Upon examination of the results, we find that among the control variables employed, emotional quotient holds the

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highest significance in predicting the self-efficacy of the respective participating counsellors with a p-value of 0.009 suggesting that there is a 99% confidence in there being a significant relationship between the respective variables. It is also noted that the linearity of the trend is better preserved among lower efficacy scores as opposed to higher scores as it requires a larger sample size to make a confident determination while still not affecting the overall effectivity of the model demonstrating an R<sup>2</sup> value of 0.5. While significant relations are observed between the Total EQ scores and Self-Efficacy of counselling, no strong relations could be found between EQ and its subscales, namely Sensitivity, Maturity and Competence. While it is largely expected that the number of years of providing therapy should have a significant influence in the EQ and thus on Self-Efficacy, no such significant trend could be identified in this analysis.

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

The author(s) declared no conflict of interest.

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