

## Relationship among Mental Health, Emotional Intelligence and Spiritual Intelligence in Male and Female Adults

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### Abstract

The present study examined the relationship among mental health, emotional intelligence and spiritual intelligence from a gender perspective. A sample of 150 adults within the age bracket of 30 to 40 years, with equal number of males and females, administered the Spiritual Intelligence Self-Report Inventory (King, 2008). On the basis of their scores on the inventory, high and low spiritual intelligence (SI) groups were formed. Persons scoring above the median and those having a score equal to or less than the median constituted the high (N=73; 37 males, 36 females) and low (N=77; 38 males, 39 females) SI groups respectively. All the subjects were administered the Emotional Intelligence Scale (Hyde, Pathe and Dhar, 1971) and the Mental Health Inventory (Jagdish and Srivastava, 1983). Statistical analysis of the data with 2(gender) X 2(SI) ANOVA revealed a significant main effect of gender only for emotional intelligence, not for mental health. Thus, while males and females were comparable in terms of mental health, a significant gender difference favouring the males was evident. Significant main effect of spiritual intelligence for both emotional intelligence and mental health suggests that persons who are higher in spiritual intelligence are emotionally more intelligent with better mental health. Regression analyses revealed that mental health in males is predicted by emotional intelligence variables while in females spiritual intelligence contributes more to their mental health. Results are discussed in the context of Indian cultural values.

**Keywords:** Emotion, Emotional intelligence, Mental health, Spiritual intelligence

During recent years, our understanding of the concept of intelligence, which traditionally was largely understood as linguistic and logical abilities, has been broadened to include personal and social competence which once upon a time were considered as having nothing with intelligence (Gardener, 1983, 2000). Influenced by the theories of multiple intelligences, psychologists are talking of emotional, creative, social, practical, existential, and spiritual intelligences (Bar-On, 2000; Gardener, 1983, 2000; Emmons, 1999; Goleman, 2001; Mayer & Salovey, 1993; Sternberg, 1997, 2005). It is due to the research findings by Goleman (1998) and Hedlund and Sternberg (2000) that traditional IQ, a measure of cognitive intelligence abilities, accounts for only about 20 to 30 percent of professional success, the concept of emotional intelligence (EI) gained emphasis.

Goleman (1995, 1998, 2001) has conceptualized emotional intelligence (EI) as a set of abilities that draw on the emotional resources of the individual which contribute more to success in life than do traditional intelligence. EI has been defined as the ability to know and manage ones own as well as others' emotions. Golman (1995) suggests five major domains of emotional intelligence, such as self awareness, Self regulation, Motivation, Empathy, and Social skills. Mayor and Salovey (1995), on the other hand, provides a cognitive model of EI. Emotions aroused in a particular situation do not depend on the situation itself, but on how it is appraised. Since the meaning of the term intelligence is the cognitive capacity for abstract thought, understanding, reasoning, and problem solving, EI, according to Mayer & Salovey (1993), is the ability to understand, appraise, monitor and use the emotions or feelings of one's own as well as that of others. Emotions define the quality of relationship, a person has with his environment. For example, a person is happy means he has harmonious and positive relations with others in the environment. Individuals who are emotionally stable tend to be less aggressive and hostile to others, hence posit good interpersonal relations. Emotionally intelligent people, due to their ability to understand the needs and desires of others, are better at negotiation and conflict management.

In most cultures, including Indian, women and men have distinctly different gender roles. In a family set-up, the wife, whether working or not, is assigned the role of a home maker. She has to take care of each member's feelings and emotions in order to run her family smoothly. A female brain, as Goleman (2011) suggests, sense other's emotions easily and stay with that feeling. But males, being the bread winner of the family, have to tune out the emotions of others and switch to other brain areas, mainly to those areas responsible for cognitive activities. Due to the differential social roles of males and females, EI expects to witness gender differences, though research findings do not reveal unanimity (Das, 2014; Patnaik, 2015; Sreeja, 2005).

It is known that emotions are complex states of feeling that result in physiological changes which influence the thought and behavior of the individual. Positive emotions such as love, motivation, appreciation, self control, satisfaction, a sense of fulfillment, autonomy, peace, awareness and happiness are associated with positive state of mind and good health. Similarly, negative emotions like anger, failure, fear, disappointment, frustration, guilt, resentment, dependence, depression, loneliness are associated with negative state of mind and

unhealthy physiological functioning (Herbert & Choen, 1993).

In the context of the above mentioned facts, researchers have tried to relate emotional intelligence with mental as well as physical health. Salovey, Mayer, and Caruso (1999) claim that individuals who can regulate their emotional states are healthier because they accurately perceive and appraise their emotional states, know how and when to express their feelings and can effectively regulate their mood states. Failure of emotional self-management leads to significant negative influences on physical health and mental health (Salovey, 2001).

A good number of research provide empirical support to Salovey and others' claim. Emotional intelligence has been empirically found to be related to physical and mental health (Ciarrochi, Deane, & Anderson, 2002; Esmaeili & Jamkhaneh, 2013; Gohm, Corser & Dalsky, 2005; Ramdas, 2014; Salovey, 2001; Salovey et. al, 1999; Singh & Saini, 2007; Taylor, 2001;). Two recent Meta analyses also indicate that the higher the emotional intelligence, the better the mental health (Martins, Ramalho, & Morin, 2010; Schutte, Malouff, Thorsteinsson, Bhullar, & Rooke, 2007). This relationship holds good for both the males and females. Emotional Intelligence has been found to correlate negatively with depression proneness, and positively with subjective happiness and life satisfaction (Saklafske, Austein, & Minski, 2003). Taylor (2001) has observed that people low on the dimension of emotional intelligence, resort to smoking, drinking and eating fatty foods as a way of coping to emotional stress.

Conceptually emotional intelligence (EI) can be thought of as being similar to Gardener's interpersonal intelligence. In a similar way, Gardener's recent conceptualization of existential intelligence which refers to the individual's awareness of her/his existence in the cosmos and the ability to find meaning in life has led psychologists to think of spiritual intelligence (Emmons, 2000a, 2000b; Gardener, 2000; Zohar & Marshall, 2000). Zohar and Marshall (2000) define spiritual intelligence (SI) as "the ability to find meaning, purpose and values in our life, connecting our actions and lives to a wider, richer, meaning-giving context". According to King (2008), "Spiritual intelligence denotes a set of adaptive mental capacities which are based on nonmaterial and transcendent aspects of reality, specifically those which are related to the nature of one's existence, personal meaning, transcendence, and expanded states of consciousness". **To put in simpler words, SI refers to the person's awareness of his existence beyond immediate space and time.**

**Thus,** just as emotional intelligence draws on emotional resources, spiritual intelligence (SI) can be conceived as the ability to use the spiritual resources of the individual (such as existential thinking, consciousness **beyond immediate space and time, perception of an interconnectedness among events, meaning of life etc.**) which help him in adapting to the environment, solving problems, and attaining goals. Usually, we tend to attribute our feelings and emotions to external events and other people's actions, while the fact is that all emotions are caused by the self. Being able to understand their actual origin is the territory of spiritual intelligence. Thus, spiritual and emotional intelligence seem to be positively correlated with each other which has been empirically supported (Farhangi et. al, 2009).

The correlation between emotional and spiritual intelligence is of special significance in Indian context. Indian culture is a collectivistic culture where social relations imply lifelong intimate relationship with many obligations (Misra, 2001). Hence, for Indians, fulfillment of duties towards others is the priority over the fulfillment of their own personal achievement goals. The pattern of socialization as well as cultural traditions help them develop such a frame of emotional competencies that they harness their emotions in line with that of others. This emotional framework of the Indian people provides a basis for transcendence-consideration of other people and things beyond oneself; and transcendence is an important component of spiritual intelligence.

The Indian views on spirituality emphasizes on detachment, impulse control and transcendence as ways of dealing with stress and suffering, minimizing the psychological effects of failure, and achieving emotional stability. Emotional stability has been recognized by eastern as well as western psychologist as a basic requirement for mental health. But, with regard to the empirical support for a relationship between spiritual intelligence and mental health, literature suggests no consensus among the researchers. Burke (1999) obtained significant correlation between mental health and spiritual intelligence suggesting that spirituality was an important component in chronically ill elders' coping with disease, and pain. Findings of McIntosh, Paulin, Silver, and Holman (2011) suggest that religiosity and spirituality independently predict health after a collective trauma. Mental health could also be predicted by spiritual intelligence in the study by Singh, Kaur, and Singh (2010). But Kaur, Sambasivan, and Kumar (2013) in their study found that burn-out in the care-giving nurses was influenced by emotional intelligence, not by spiritual intelligence, though spiritual intelligence influences emotional intelligence.

However, Hassan, Shabani, Ahmad and Baba (2010) suggest indirect effect of spiritual intelligence on mental health problems via emotional intelligence. Since mental health is valued by almost all of us, the exact nature of relationship among mental health vis-à-vis emotional and spiritual intelligence needs to be examined.

In the backdrop of such contradicting findings, the present study attempts to ascertain the relationship among spiritual intelligence, emotional intelligence, and mental health in male and female adults. To put in other words, emotional intelligence, and mental health are studied as a function of gender and spiritual intelligence.

Another objective of the present study is to examine the extent to which emotional and spiritual intelligence variables contribute to the mental health of male and female adults.

## Method

### Design of the Study

The present study adopted a 2 (Gender) X 2 (SI) factorial design in which male and female adults with high and low spiritual intelligence were studied with respect to their emotional intelligence and mental health.

### Sample

A total of 150 adults within the age bracket of 30 to 40 years, with equal number of males and females, selected purposively from different areas of Cuttack city, Odisha, were administered the Spiritual Intelligence Self-Report Inventory (King, 2008). The high and low SI groups were formed on the basis of the median of their total scores on the inventory. As the median of the entire group was calculated to be 63.0, persons scoring above 63 constituted the high spiritual intelligence (SI) group and those scoring 63 or less than this were in the low SI group. Thus, there were 73 high SI (37 males, 36 females) and 77 low SI (38 males, 39 females) persons. All the subjects were from middle socio-economic status and have education at least up to higher secondary level.

### Instruments

**Spiritual Intelligence Self Report Inventory.** The Inventory was developed by D. King (2008). It consists of 24 items, each with five options starting from 'not at all true of me' to 'completely true of me'. The respondent has to indicate the option depending on the degree to which the statement describes her/him. All the 24 statements are positively scored except Item 6 which is scored in the reverse direction. Total Score of Spiritual intelligence self report inventory can range from 0-96. Its four components include critical existential thinking, personal meaning production, transcendental awareness, and conscious state expansion. The test was suitably modified and translated into Odia for using it in Odia culture.

**Emotional Intelligence Scale.** The emotional intelligence scale (EIS) was developed by Hyde, Pathe and Dhar (1971). The questionnaire consists of 34 items which are to be scored on a five point scale for the options starting from 'strongly agree' to 'strongly disagree'. The respondent has to indicate the option depending on the degree of her/his agreement to each of the statements. The inventory measures 10 dimensions of emotional intelligence such as self awareness, empathy, self-motivation, emotional stability, meaning relation, integrity, self- development, value orientation, commitment and altruistic behavior.

**Mental Health Inventory.** This Inventory was developed by Jagdish and Srivastava (1983). The questionnaire consists of 54 statements. For each statement the respondent has to indicate his response on a four point scale starting from 'always' to 'never' depending upon the extent to which it is true for him. Some of the items are positively scored where as the others are negatively scored. The test measures six components of mental health, such as Positive self evaluation, Perception of reality, Integration of personality, Autonomy, Group Oriented Attitude, Environmental mastery.

### Procedure

A total of 150 adults within the age range of 30 – 40 years including equal number of males and females from different areas of Cuttack city were contacted. A good rapport was established between the investigator and respondent. They were administered the Spiritual Intelligence Self- Report Inventory (King,2008). On the basis of their performance on the inventory, persons scoring on and above the median and those scoring below the median constituted the high (N=79: males=42, females=37) and low (N=71: males=33, females=38) spiritual intelligence (SI) groups respectively. All the subjects were then administered the measures of emotional intelligence as well as mental health.

### Results and Discussion

As the objective of the present investigation was to study emotional intelligence and mental health in adult subjects as a function of gender and spiritual intelligence, 2(gender) X 2 (spiritual intelligence) analyses of variance were conducted on the scores obtained by the male and female adults with high and low spiritual intelligence (SI) groups on the measures of emotional intelligence and mental health. The group means and standard deviations for the total scores of emotional intelligence as well as mental health scores are presented in Table 1. Table 2 presents the summary of ANOVA for the two dependent variables.

**Table 1. Means, Standard Deviations of the male and female High and Low SI Groups with respect to Emotional Intelligence and Mental Health**

Variables		Males		Females	
		High SI (N=37)	Low SI (N=38)	High SI (N=36)	Low SI (N=39)
Emotional Intelligence	Mean	145.78	105.08	138.00	98.97
	SD	16.46	24.35	17.43	22.90
Mental Health	Mean	149.54	126.00	148.69	119.36
	SD	14.86	20.84	12.90	19.24

**Table 2. Summary of 2X2 ANOVA for Emotional Intelligence and Mental Health**

Variables	Source	Ss	df	Ms	F	p
Emotional Intelligence	Gender	1806.706	1	1806.706	4.238	.041
	SI	59543.392	1	59543.392	139.656	.000
	Gender X SI	26.411	1	26.411	.062	.804
	Error	62248.008	146	426.356		
	Total	123902.833	149			
Mental Health	Gender	525.067	1	525.067	1.746	.188
	SI	26187.992	1	26187.992	87.079	.000
	Gender X SI	314.544	1	314.544	1.046	.308
	Error	43907.802	146	300.738		
	Total	71059.393	149			

It can be noticed in Table 2 that the main effect of spiritual intelligence (SI) is significant for both emotional intelligence and mental health. But the main effect of gender is significant only for emotional intelligence, but not for mental health. The gender X SI interaction effect was found to be significant for neither of the dependent variables. Thus, it can be said that the males and females do not differ significantly from each other so far as mental health is concerned. But with regard to emotional intelligence, a significant gender difference favouring men is evident. The present study documents higher emotional intelligence in males than the females.

When the question arises regarding who are emotionally more intelligent, men or women, research does not reveal consensus. While some researchers (King, 1999; Singh, 2002; Sutarso, 1999; Wing and Love, 2001) are of the opinion that females are emotionally more intelligent than males, others favour men (Ahmad, Bangash, & Khan, 2009; Chu, 2002). The findings of the present study supports the latter camp. Goleman (2011) makes it clear that though women score higher on self-awareness, empathy, and have better social skills, when it comes to managing negative emotions, men are better.

Significant effect of SI suggest that those who are higher in spiritual intelligence are also emotionally more intelligent. The findings are consistent with that of Farhangi et. al (2012) who also have shown that spiritual intelligence and emotional intelligence are positively correlated. According to the definition given by Amram and Dryer (2007) emotional intelligence as a set of abilities that draw not only on emotional resources, but also on spiritual resources. Particularly in Indian cultural context, emotional intelligence without moral values like non-violence, kindness, benevolence, concern for others etc. are meaningless. Because these values form the very basis of emotional responsiveness. So it is quite natural to observe that EI and SI go hand in hand.

Another dependent variable that was considered in this research was mental health. It can be noted from Table 1 and 2 that the persons with high SI were having significantly better mental health than those with low SI. The present study supports the findings of Burke (1999), Dash & Patnaik (In Press), and Singh, Kaur, and Singh (2010). Emmons (2000a, 2000b) is of the opinion that spiritual intelligence predicts optimum functioning and adaptation, thus contributing to health and well-being of the individual. According to Abdullah (2012), SI integrates all aspects of human life and helps in leading a meaningful life. A number of studies have shown positive relationship among spiritual intelligence, emotional intelligence and mental health (Hassan et al, 2011; McIntosh et al, 2011).

With regard to the second objective of the study, i.e., in order to examine the contribution of emotional and spiritual intelligence variables to mental health, stepwise multiple regression analyses were conducted separately for male and female subjects. While Mental Health score was the criterion variable, all the 14 dimension scores of spiritual as well as emotional intelligence variables (Four SI and ten EI dimensions) were taken as predictor variables. The results of the multiple regression analyses are separately present for males and females in Tables 3 and 4 respectively.

**Table 3. Results of Stepwise Multiple Regression Showing significant Predictors of Mental Health in Males (N=75)**

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Adjusted R <sup>2</sup>
		B	Std. Error	Beta			
1	(Constant)	75.199	6.247		12.037	.000	.588
	Emotional Stability	4.252	.411	.771	10.334	.000	
2	(Constant)	67.240	6.166		10.904	.000	.649
	Emotional Stability	2.466	.617	.447	3.996	.000	
	Managing relation	2.345	.638	.411	3.673	.000	
3	(Constant)	64.625	6.167		10.480	.000	.664
	Emotional Stability	1.615	.733	.293	2.204	.031	
	Managing relation	1.810	.677	.317	2.674	.009	
	Empathy	1.258	.613	.273	2.051	.044	

**Table 4. Results of Stepwise Multiple Regression Showing significant Predictors of Mental Health in Females (N=75)**

Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Adjusted R <sup>2</sup>
		B	Std. Error	Beta			
1	(Constant)	74.285	5.636		13.181	.000	.616
	Critical Existential Thinking	3.284	.300	.788	10.934	.000	
2	(Constant)	64.049	5.660		11.315	.000	.686
	Critical Existential Thinking	1.994	.412	.478	4.834	.000	
	Self motivation	1.657	.399	.411	4.156	.000	
3	(Constant)	59.950	5.624		10.659	.000	.712
	Critical Existential Thinking	1.420	.447	.341	3.174	.002	
	Self motivation	1.246	.410	.309	3.037	.003	
	Personal meaning production	1.793	.655	.282	2.737	.008	

Table 3 suggests that mental health in males is best predicted by emotional stability with 58.8% of variance in the former being explained by the latter alone. Two other emotional intelligence variables, namely, managing relations and empathy, also emerged as significant predictors. None of the SI variables were found to be contributing significantly to mental health. But, on the other hand, in females the most significant predictor of mental health was found to be critical existential thinking, an SI variable, which alone explained 61.6% of variance of the criterion variable. Table 4 reveals that self-motivation and personal meaning production also contribute significantly to mental health. Thus the present study suggests that emotionally intelligent males, particularly those with higher emotional stability, are having better mental health. It is well known that emotional stability is an indicator of mental health. But women in general and Indian women, in particular, are observed to be poor managers of negative emotions. Goleman (2011) suggests that males and females have their differences in their brains. When a male is upset, they sense the emotion; but tune out emotionally within a short period. This tuning out helps him to stay calm and maintain emotional stability. On the other hand, when a woman is experiencing emotional disturbances, her brain tends to stay with those feelings. Probably, in the face of stress and anxiety provoking situations, being unable to get out of their negative emotions, they use their spiritual intelligence to restore their mental health. They might be contemplating over their negative experiences and deriving a personal meaning and purpose of these experiences from their very existence point of view. Their search for purpose of life helps them achieve mental wellbeing.

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