

# The Role of Social Competencies of Emotional Intelligence in Mitigating Stress and Enhancing Self-Motivation among Medical Students

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**Abstract:** *This study examines the role of social competencies within emotional intelligence, particularly social awareness and relationship management, in shaping stress resilience and self-motivation among medical students. Set against the demanding context of medical education, the work considers how interpersonal emotional skills support academic adjustment, emotional balance, and professional growth. Using a cross-sectional analytical design, data collected from undergraduate medical students were analyzed through established emotional intelligence, perceived stress, and self-motivation measures. The study explores associations between social competencies, reduced stress levels, and stronger intrinsic motivation, while also reflecting on their relevance to empathy, teamwork, communication, conflict management, and leadership in medical training. The findings highlight social competency as a vital support system in preparing students not only for academic and clinical demands, but also for responsible and compassionate professional practice. The study also offers practical directions for strengthening emotional and social skills within medical education.*

**Keywords:** Emotional intelligence, social awareness, relationship management, stress resilience, self-motivation

## 1. Introduction

Emotional intelligence refers to the ability to perceive, understand, regulate and utilize emotions with in oneself and with others to guide thinking and behavior process effectively (Mayor, Salovey and Caruso 2000). Especially among professionals, unlike cognitive intelligence, which emphasizes analytical and logical intra-personal reasoning, emotional intelligence focuses on the integration of emotions with decision-making, interpersonal communication, conflict resolving and team building. Emotional intelligence has gained traction as a significant determinant of professional efficacy, particularly in the medical realm as they face immense academic pressure, long and untimely working hours and emotional challenges, leading to heightened stress and reduced self-motivation.

Within educational and professional contexts, emotional intelligence is increasingly considered as a critical determination of performance, resilience and well-being, as it enables the students to manage stress, build constructive relationships and sustain motivation (Bar On 2006, Shuttle et al.,2007).

### Rationale for the Study

Medical education is widely recognized as one of the most stressful academic pathways, with students experiencing elevated levels of psychological distress, burn out and reduced motivation compared to peers in other disciplines (Dyrbye et al., 2006). While cognitive skills and technical expertise remain central to medical training, the role of emotional competencies have gained attention for their potential to buffer stress and improve their level of intrinsic motivation. It is well understood that medical students with

stronger emotional intelligence are better equipped to handle stress, maintain empathy towards patient and stay emotionally balanced in crises and get motivated in demanding academic and clinical environments (Arora et al.,2010; Bricks & Watt 2007). Goleman (1998) conceptualized emotional intelligence as a frame work of personal and social competencies. This model has two key domains in each dimension, namely,

- I Personal competencies
  - ✓ Self-Awareness
  - ✓ Self-Management
- II Social Competencies
  - ✓ Social Awareness
  - ✓ Social Management

While Goleman's personal competencies enable self-mastery (reflection, regulation and drive) Social competencies enhances relationship mastery (understanding, influencing and collaborating).

Among the two, social dimension (social awareness and relationship management) of emotional intelligence is very crucial in the context of medical education where students constantly interact with patients, peers and faculty. Prior research studies indicate that strong social awareness fosters empathy and reduces stress (Weng et al., 2011), while cordial relationship management enhances team capabilities, collaboration and intrinsic motivation (Chew, Zain and Hassan 2013). However limited empirical study had focused on how these two domains of social competencies jointly helps in reducing stress and boosting self-motivation among medical students. Addressing this gap, the present study intends to narrate how far the enhanced social awareness and relationship management could serve as protective factors

against stress and facilitators of sustained motivation during their medical course stream.

## 2. Review of Literature

- Shanafelt et al., (2005), through their study on “Burnout and satisfaction with work-life balance among US physicians” claims that higher emotional intelligence is linked with lower academic stress and burnout.
- Stepien et al., (2006) in their article on “Educating for Empathy – A Review,” states that empathy and service orientation always foster positive patient-doctor interactions and concludes that these influencing interactions reduces emotional exhaustion.
- Salas et al., (2008) had raised a big question as “Is there a “big five” in team work and concluded that competencies such as communication, teamwork and conflict resolution improve peer support system by buffering stress.
- A study by Arora et al., (2010) on emotional intelligence and communication skills in medical students revealed the fact that students with higher emotional intelligent scores performed significantly better in OSCE communication, empathy expression and patient-centered behavior.
- As per the study by Chew, Zain and Hassan (2013), students with higher emotional intelligence demonstrated lower stress levels, better peer interactions and healthier coping strategies.
- Guraya et al., (2016), in their study concluded that high level of social-emotional competencies is well correlated with better team work, respect, empathy, communication and ethical behavior in the field of medicine.
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### Objectives:

This study intends to:

- Assess the level of social awareness and relationship management among medical students.
- Determine the relationship between social competencies, stress and self-motivation.
- Offer suitable solutions to enhance the level of social awareness and social skills among medical students.

### Research Question:

- Does social awareness reduce perceived stress among medical students?
- Does relationship management improves self-motivation among medical students?
- Do social competencies jointly influence stress resilience and intrinsic motivation?

### Hypothesis:

- Higher social competencies of medical students are significantly associated with lower stress level.
- Higher social competencies of medical students are positively associated with higher self-motivation.

- Social competencies are positively associated with emotional intelligence level of medical students.

## 3. Methodology

This study is a cross-sectional analytical study based on the sample survey method. Required data for the study was collected from 175 undergraduate medical students, using Emotional Intelligence Scale (Goleman’s model), Perceived Stress (Cohen et al; 1983) and Self-Motivation Scale (Ryan and Deci; 2000), apart from demographic details. The SPSS software was used to process the data and analysis had been carried out using suitable statistical test, such as chi-square test and Pearson’s correlation and inferences were drawn and summarized.

### Role of social competency in the professional career of medical students:

Medical education is not only about acquiring knowledge and skill on health care, but mainly about developing interpersonal social competencies. The modern health care system requires, doctors who can communicate effectively, work in teams, manage conflicts and empathize with patients and their relatives. Social competency, a dimension of emotional intelligence, refers to the ability to perceive, understand and manage interpersonal relationships very effectively (Goleman 1998). For medical students, developing such skills is as crucial as mastering medical sciences, since their careers involve continuous interactions with patients, colleagues and communities.

### Dimensions of Social Competency:

As per Goleman’s emotional intelligence model, social competency is broadly categorized into two domains namely, Social Awareness and Social (Relationship) Management (Boyatzis & Goleman, 2007).

#### Social Awareness:

It is the ability to recognize and understand the emotions, needs and concerns of others. It includes:

- **Empathy** which enables medical students to connect with the emotions and feelings of patients and their relatives leading to improved doctor-patient trust and adherence to treatment (Stepien and Baernstein,2006)
- **Leveraging Diversity** which includes recognizing and respecting different background, culture, perspectives and experiences in treatment, diet, health beliefs during patient care, there by students become culturally sensitive physicians and more adaptable leaders in multicultural health care system.
- **Service Orientation** which cultivates a commitment to patient-centered care, an essential core value for medical profession.
- Socially aware medical students are more effective in clinical rotations, better at understanding patients’ diversity and more adaptable to the multi-disciplinary demands of health care.

#### Social Management:

It is otherwise referred as relationship management which indicate the ability to influence, inspire and initiate others. It encompasses,

- **Influence**, the skill or the ability to persuade and encourage patients to follow treatment plans and motivate peers and team members in project and clinical routines.
- **Developing Others** which reflects the process of recognizing and mentoring the strength of others, especially juniors in their academic and clinical issues by providing constructive and positive feedback.
- **Effective Communication** through simple, clear, persuasive and empathetic exchange of ideas during the academic discussions and presentations as well as in the process of explaining medical conditions and treatment procedures to patients in a simple and understandable manner and in documenting patient history accurately.
- **Leadership**, the skill of inspiring and guiding individual or group towards a common goal, leading a medical camp with proper co-ordination, professionalism, integrity and compassion.
- **Change Catalyst**, the skill of recognizing the need for change while advocating problem-based new learning methods, evidence-based updates and also encouraging peer team to adopt them.
- **Conflict Management** that involves the process of negotiating and resolving disagreement by meditating disputes between peers in stressful rotations, diplomatically handling dissatisfied patients and family members and ensuring smooth teamwork during highly stressful situations.
- **Building Bonds** that insist and ensure nurturing long-term relationships by developing trust with patients and their family members building professional networks with faculty, peers and healthcare team and there by maintaining cordial, harmonious and supportive friendly relationship that reduce stress prevent burnouts and enhances intrinsic motivation.
- **Team capabilities** that involve creating group synergy in pursuit of shared goals by enhancing inter-professional collaboration with health care team members, peers and patients.

Social awareness equips medical students to recognize patient and organizational needs. This awareness leads to manifest and maintain harmonious and cordial social relationship. By establishing relationship management, students are encouraged to use their skills such as, empathy, communication, influence, leadership, conflict resolutions and team work to act effectively. Together these competencies lead to better stress management, self-motivation and overall career success. All these competencies act like the soft-skill foundation for the hard skills of medical training. It surely ensures a transformation and makes medical students not only just a competent doctor, but also empathetic leader, effective communicator as well as a change agent in the society.

**Descriptive Analysis:**

A detailed demographic, socio-economic profile of the respondents is narrated in Table 1.1

**Table 1.1:** Demographic, Social and Economic Profile of the Respondents (in %)

Demographic Profile		
Parameters	Criteria	%
Age	18-20	29.6
	21-23	49.3
	24-26	19.9
	Above 26	1.2
Gender	Male	39.9
	Female	60.1
Marital Status	Married	5.1
	Unmarried	94.9
Family Type	Nuclear	78.3
	Joint	21.7
No. of family members	3	34.3
	4	49.1
	5	11.4
	>5	5.1
Community	OC	32.1
	BC	29.1
	MBC	30.6
	SC/ST	8.2
Parent's Occupation	Government	28.4
	Private	14.1
	Business	26.3
	Professional	16.1
	Others	15.1
Family Monthly Income	Up to 50,000	6.2
	50,001-1,00,000	10.4
	1,00,001-1,50,000	22.6
	1,50,001-2,00,000	43.9
	Above 2,00,000	16.9
Locality	Rural	14.3
	Urban	24.0
	Semi Urban	61.7

It is observed from the above Table that nearly, one-half of the students (49.3%) were young adults in the age group of 21-23 and 60.1% of the respondents were female. Getting married is immaterial for the students at this age and 94.9% are goal-oriented and unmarried and two-third of the respondents (78.3%) live in nuclear family set up and hence the more or less, equal number of families have only 3-4 members in their families. Not much discriminations were noticed between community (around 30% each) except in SC/ST category (8%). 61.7% of the respondent's hail from semi-urban background. Around 28.4% of the parents of the students hold government job followed by business men (26.3%). 16.1% were professionals. Nearly 60% of the respondents' family falls under high income group earning monthly Rs.1,50,000 and above.

The following Table enlightens the perception of respondents about self under various domains of social –awareness.

**Table 1.2:** Mean and SD of Social– Awareness Dimension of Social Competencies of Medical Students

Domains	Social - Awareness	Mean	SD
Empathy	I am able to understand the emotions of my peers and patients.	4.766	0.717
	I am able to understand the emotional trauma of the patients’ relatives	4.731	0.729
	I actively listen to patients and respond empathetically to their concerns	3.349	1.493
	I always put myself into the shoes of others (Patient) to understand their physical and mental problems.	3.794	1.387
Leveraging Diversity	I always feel comfortable to interact with peers who come from different cultural and ethnic backgrounds	3.697	1.510
	I always ensure uniform treatment to all my patients irrespective of their socio- economic background	3.606	1.466
	I always incorporate diverse prospective into my approach to problem solving	4.366	1.090
	Among my team I find it convenient to leverage each other’s strength and skills to achieve shared goals	4.726	0.738
Service Orientation	I always ensure the patients receive the possible care and will go above and beyond to help them and their family members	3.617	1.303
	I am always concerned with providing more care and comfort to all the patients from various backgrounds	3.954	1.044
	I am always concerned with providing full and true information about their medical conditions and treatment to the patients and their family members.	3.937	1.204
	My orientation towards the society is service and not the money	3.469	1.342

Based on the mean score, it is noticed from the above Table that, majority of the medical students are very empathetical in nature and are able to understand, not only the simple emotions of their patients and peers (Mean=4.768; SD=0.717), but also the emotional trauma and pain of the patients and their relatives (Mean=4.731; SD=0.729). While working with team, most of the students find it convenient to leverage each other’s strength and skills to achieve common goal. They are also very much concerned towards all the patients and render equal care and comfort to all the patients from various backgrounds (Mean=3.937; SD=1.204).

**Inferential Analysis:**

**Hypothesis 1**

**H<sub>0</sub>: There is no significant difference between Mean Rank towards various domains of Social Awareness dimension of Social Competency**

**Table 1.3:** Friedman Test – Domains of Social- Awareness

Domain	Mean Rank	Chi-Square Value	P Value
Empathy	2.33	44.017	<0.001**
Leveraging Diversity	1.99		
Service Orientation	1.68		

Since the P Value is less than 0.01 at 1% level of significance, the Null hypothesis is rejected which indicates that there exists significant difference between mean ranks towards the various domains of social awareness among medical students. Among the three domains, empathy forms the foundation of effective doctor-patient relationships and positively influence clinical outcomes and professional development. Without empathy, medical students find it difficult to burn out their stress and their profession becomes mechanical and detached, whereas with empathy, it becomes humanistic practices and becomes healing in truest sense, in turn enhances their level of self – motivation. Based on the Mean Rank, the fact is substantiated, as empathy ranks first in the list.

On the other hand, relationship management is the ability of a person to build, maintain and strengthen healthy professional and personal connections with others. For medical students, it means developing trust-based relationship with patients, peers, faculty, health care staff and in fact, society at large. The table below exhibits the perception among medical students on their social management skills.

**Table 1.4:** Mean and SD of Social – Management Dimension of Social Competencies of Medical Students

Domain	Social -Management	Mean	SD
Influence	I am able to persuade someone who has differing opinion.	3.651	1.330
	I am able to influence and convince peers to make lifestyle changes that could improve their academic and clinical outcomes	3.257	1.368
	I always use persuasive language or technique to convince a patient to follow the medical treatment plan	3.246	1.547
	I am able to persuade a team of health care professionals to modify their approach to a patient’s care.	2.823	1.325
Developing Others	I always help my peer or juniors to understand complex medical concepts	3.189	1.468
	I always provide constructive feedback to my peers to help them improve their theoretical and clinical skills	3.669	1.332
	My fellow students feel comfortable and feel free to ask any help or advice	3.731	1.292
	I always encourage and motivate my peers to continue learning and developing their skills beyond medical sector.	2.971	1.491
Communication	I foster open communication and always stay receptive in all situations.	3.440	1.421
	I can adapt my communication skill to effectively communicate with my peers and patients from different cultural background.	3.377	1.358
	I am able to communicate sensitive information in a convincing way to the patients and their family members.	3.309	1.480
	I am able to explain a complex medical concept in simple terms to peers and patients	3.971	1.362
Inspirational Leadership	I step forward to lead, as and when needed regardless of position	3.623	1.329
	I always adapt my leadership style to better suit the overall needs of the team	3.583	1.419

	Given a chance I always lead a group of my peers towards a common goal.	3.640	1.374
	I always encourage feedback from my peers and incorporate their opinions and ideas into my leadership approach.	3.840	1.321
Change Catalyst	I always encourage incorporation of new ideas in my life and career to promote positive change.	3.966	1.222
	While implementing the change, I effectively manage my career-life balance	3.286	1.473
	To initiate positive changes, I never forget to balance my emotions	2.920	1.448
	I confidently overcome the barriers to changes in the life as well as in healthcare system	3.309	1.465
Conflict Management	I handle difficult people and tense situations with diplomacy and tact.	3.583	1.431
	I can easily mend the relationship with my team and tackle the conflict.	3.366	1.491
	I can articulate my emotions during the conflict and move past any negative emotions and work towards a resolution.	3.217	1.535
	I orchestrate win-win solutions.	4.137	1.126
Building Bonds	I cultivate and maintain extensive informal networks.	3.897	1.218
	I seek out relationships that are mutually beneficial.	4.274	1.069
	I build rapport and keep others in the loop	3.949	1.270
	I make and maintain personal friendships among work associates.	3.674	1.331
Team Capabilities and Collaboration	I am flexible and successfully could collaborate with my team to achieve a common goal	3.714	1.326
	I always encourage team work among my peer group in group activities.	3.269	1.439
	I feel comfortable in sharing my views as all my team members contribute equally to achieve collective goals	3.320	1.435
	I am sure that all my team members are aware of their responsibilities and have a shared understanding of what we are trying to accomplish together.	3.206	1.374

As far as relationship management is concerned, most of the medical students are able to persuade someone who differ in their opinion (Mean=3.651; SD=1.330) and are capable of maintaining rapport by keeping all fellow team members, peers more comfortable (Mean=3.731; SD=1.292). They possess very good communication skill as they are able to explain even very complicated and complex medical concepts in simple and understandable way to patients and peers (Mean=3.971; SD=1.382).

Their leadership approach is found to be highly commendable and inspirational as, most of the respondents, not only step forward voluntarily for the common goal, regardless of the position, but are always encourage feedback from the peers and team members and incorporate their opinion and ideas (Mean=3.840; SD=1.321). The medical students are found to be change catalyst as they always encourage incorporation of new ideas in life and career to promote positive changes in the society (Mean=3.966; SD=1.222).

Regarding conflict management is concerned, they can articulate their emotions and orchestrate win-win solutions (Mean=4.137; SD=1.126). They always want to build strong bondage and seek out relationships that are mutually beneficial (Mean=4.274; SD=1.069). Most of the medical students are found to be more flexible and successful while collaborating with team members to enhance team capabilities to achieve the team’s common goal (Mean=3.714; SD=1.326).

**Hypothesis 2**

**H<sub>0</sub>: There is no significant difference between Mean Rank towards various domains of Social (Relationship) Management dimension of Social Competency**

**Table 1.5: Friedman Test – Domains of Social- Management**

Domain	Mean Rank	Chi-Square Value	P Value
Influence	3.57	99.707	<0.001**
Developing Others	3.99		
Communication	4.34		
Inspirational Leadership	5.15		
Change Catalyst	4.54		
Conflict Management	4.52		
Building Bonds	5.72		
Team Capabilities and Collaboration	4.18		

Similarly, significant difference between mean ranks towards the various domains of Social Management among medical students is noticed. The Null hypothesis is rejected at 1% level of significance since the P Value is less than 0.01. Based on the Mean Rank, the score of Building Bonds is found to be highest (5.72), followed by Inspirational Leadership (5.15). It indicates the fact that, being empathetical in nature, medical students can easily step into the shoes of patients and their family members and can understand their emotions, feelings, fears, struggles and expectations. This emotional connection creates a therapeutic bond, which makes patients feel cared rather than treated. Since they understand the emotions of patients in a better way, they can influence and inspire not only the patients, but also peers, team members, juniors by showcasing that leadership also matters as much as care, compassion and clinical knowledge.

Medical education is emotionally demanding, requiring not only academic excellence but also emotional and social intelligence. Social competencies- such as empathy, communication, teamwork, and relationship management—play a crucial role in shaping how students handle stress and stay motivated throughout their training.

**Conceptual Frame work:**

**Social Competencies** is the ability to understand, communicate, and interact effectively with others (includes empathy, cooperation, leadership, and conflict resolution). It

helps in building supportive relationships and positive learning environments.

**Stress** is a psychological response to academic load, clinical pressure, and emotional exposure to illness and suffering. High stress can cause burnout, anxiety, and loss of motivation.

**Self-Motivation** is the internal drive that pushes individuals to achieve goals even under pressure. It always keeps students engaged, resilient, and goal-oriented.

**Conceptual Link:**

**High Social Competencies → Lower Stress**

Students with strong social skills communicate better, seek help when needed, and share emotions constructively. They experience less isolation and anxiety, reducing overall stress levels.

**High Social Competencies → Higher Self-Motivation**

The social skills like empathy, teamwork, and inspirational leadership foster a sense of belonging and purpose among medics. When medical students feel connected and valued,

the level of their intrinsic motivation rises, helping them to continue their sustained efforts even under pressure.

**Stress → Negative Impact on Motivation**

Chronic stress drains energy and focus, leading to emotional exhaustion. Medical students under prolonged stress often lose interest and enthusiasm, affecting performance and compassion.

**Mediating Role of Social Competence**

Social competence acts as a buffer between stress and motivation. Medical students with high social skills can manage interpersonal issues, find emotional support, and stay motivated despite challenges.

**Inferential Analysis:**

The following part of the study clearly portrays the relationship between social competencies, stress and self-motivation among medical students.

**Hypothesis 3:**

**H<sub>0</sub>: There is no association between the Level of Social Competencies and Self-Motivation among Medical College Students**

**Table 1.6:** Level of Social Competencies \* Level of Self-Motivation

Level of Social Competency	Level of Self-Motivation			Total	Chi-square Value	P Value
	Low	Moderate	High			
Low	41 (74.5%) [67.2%]	8 (14.5%) [12.1%]	6 (10.9%) [12.5%]	55 (100.0%) [31.4%]	72.272	<0.001**
Moderate	17 (22.4%) [27.9%]	42 (55.3%) [63.6%]	17 (22.4%) [35.4%]	76 (100.0%) [43.4%]		
High	3 (6.8%) [4.9%]	16 (36.4%) [24.2%]	25 (56.8%) [52.1%]	44 (100.0%) [25.1%]		
Total	61 (34.9%) [100.0%]	66 (37.7%) [100.0%]	48 (27.4%) [100.0%]	175 (100.0%) [100.0%]		

From the above Table, it is evident that P value is less than 0.001 and thus the null hypothesis is rejected at 1% level of significance. It is, hence concluded that there exist significant association between the level of social competency and self-motivation among medical college students. Based on the row and column percentage, it is noticed that students with higher

level of social competencies are highly self-motivated than those with low and moderate level of social skills.

**Hypothesis 4:**

**H<sub>0</sub>: There is no association between the Level of Social Competencies and Stress among Medical College Students**

**Table 1.7:** Level of Social Competencies \* Level of Stress

Level of Social Competency	Level of Stress			Total	Chi-square Value	P Value
	Low	Moderate	High			
Low	4 (7.3%) [11.1%]	13 (23.6%) [18.6%]	38 (69.1%) [55.1%]	55 (100.0%) [31.4%]	69.086	<0.001**
Moderate	7 (9.2%) [19.4%]	44 (57.9%) [62.9%]	25 (32.9%) [36.2%]	76 (100.0%) [43.4%]		
High	25 (56.8%) [69.4%]	13 (29.5%) [18.6%]	6 (13.6%) [8.7%]	44 (100.0%) [25.1%]		
Total	36 (20.6%) [100.0%]	70 (40.0%) [100.0%]	69 (39.4%) [100.0%]	175 (100.0%) [100.0%]		

The present survey also brought to light about the significant association between the level of social competencies and stress among medical college students. The null hypothesis is rejected at 1% level of significance as the computed P value is (0.001) less than 0.010. The row and column percentage clearly portrays that, the medical students with high social competencies have a low level of stress and vice versa.

#### Hypothesis 5:

H<sub>0</sub>: There is no association between the Level of Social Competencies and Emotional Balance among Medical College Students

**Table 1.8:** Level of Social Competencies \* Level of Emotional Balance

Level of Social Competencies	Level of Emotional Balance			Total	Chi-square Value	P Value
	Low	Moderate	High			
Low	42 (76.4%) [72.4%]	9 (16.4%) [11.8%]	4 (7.3%) [9.8%]	55 (100.0%) [31.4%]	94.045	<0.001**
Moderate	14 (18.4%) [24.1%]	50 (65.8%) [65.8%]	12 (15.8%) [29.3%]	76 (100.0%) [43.4%]		
High	2 (4.5%) [3.4%]	17 (38.6%) [22.4%]	25 (56.8%) [61.0%]	44 (100.0%) [25.1%]		
Total	58 (33.1%) [100.0%]	76 (43.4%) [100.0%]	41 (23.4%) [100.0%]	175 (100.0%) [100.0%]		

As the P value is less than 0.001, the null hypothesis is rejected at 1% level of significance. It is, thus concluded that there exist significant association between the level of social competency and emotional intelligence among medical college students. Based on the row and column percentage, it is noticed that students with higher level of social competencies are emotionally well balanced than those with low and moderate level of social skills.

Thus, it is evident that, medical students who develop strong social competencies are highly self-motivated and are able to burn out stress that arise out of lack of self-confidence, academic pressure, patient interactions, clinical responsibilities and social and ethical commitments. It enables them to better equipped to understand and manage their own emotions and that of others.

#### 4. Implications

- Medical students with stronger social skills
- Understand their own emotions and that of others and regulate their emotional responses effectively.
- Prevent impulsive reactions and maintaining composure in stressful clinical situations.
- Being empathetical towards patients and their relatives which is the core component of social skills.
- Cope with academic and clinical stress, by reducing burn out and emotional exhaustion and maintain psychological well-being.
- Foster harmonious relationships with peers and patients in academic and clinical environments.
- Often exhibit higher self-motivation and resilience.
- Face challenges constructively, maintain optimism, and recover quickly from setbacks which are the key signs of emotional balance.
- Emotionally matured by indulging in positive social interactions that contribute to a stable and emotionally balanced mind set.

#### 5. Strategic Suggestions

- Training in social and emotional competencies (self-awareness, empathy and emotional regulation) through role-play, case discussions etc. should be part of medical curricula.
- Include structured training on active listening, assertive communication and patient counselling. Can use simulated patient interactions and feedback sessions to develop communication and leadership skills.
- Institutions can organize stress-management workshops, mentoring systems, and peer-support programs.
- Encourage peer group discussions, by pairing junior students with senior mentors and faculty members.
- Incorporate Team-Building Learning (TBL) and group projects.
- Encouraging reflective practice and emotional awareness can enhance resilience and motivation.

#### 6. Conclusion

Social competency is not a supplementary skill but a core component of medical professionalism. It transforms medical students into companionate clinicians, effective collaborators, ethical pretensioners and visionary leaders. By cultivating social awareness and social management skills, medical education can produce holistic physicians who balance academic and clinical expertise with humanistic care.

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