Impact Of Emotional Intelligence On Facets Of Organizational Commitment Among Medical Employees Amid Covid-19 Pandemic

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Abstract
This study investigates the impact of Emotional Intelligence on three facets of Organizational commitment i.e., affective, continuance and normative commitment among medical employees amid COVID 19 Pandemic. Moreover, this research also checked the moderating role of gender in this relationship. Survey instrument was used for data collection. Convenience sampling was used as a sampling technique. Population was medical employees (MBBS, BDS, physiotherapists, pharmacists, psychologists, nurses) working in the large public and private hospitals of Pakistan, United Kingdom and United States of America. 400 questionnaires were distributed and out of those 354 were usable for the analysis purpose. This research used Smart PLS to assess the data through partial least square equation modeling (PLS-SEM). Findings of this study showed that there was significant and direct impact of Emotional Intelligence on affective, continuance and normative commitment of medical employees. Gender moderates the influence of Emotional Intelligence on Continuance Commitment. However, gender does not moderate the influence of Emotional Intelligence on Affective and normative commitment of medical employees.

Keywords: Emotional Intelligence, Affective commitment, Continuance commitment, Normative commitment, Covid 19 pandemic

1. Introduction
Emotions are vital part of life and have a substantial role in professional and social culture of people. (Alsughayir, 2020). Emotions have gained popularity with the growth of service sector organizations. (Shukla & Pandey, 2019) Emotions are being explained by Cooper and Sawaf (1999) as the flow of energy that influences a person’s actions, propagate around, and have an effect on others. Emotional intelligence (EI) has drawn considerable attention since last two
decades. (Meisler et al., 2014). Although not indicated as an essential part of the health service infrastructure, Emotional Intelligence is in fact interconnected into everything that is provided as part of service delivery. (Birks & Watt, 2007). According to Birks & watt (2007), Emotional intelligence (EI) is progressively described to as having a prospective role in nursing, medicine and other professions related to healthcare. Organizational commitment (OC) is a crucial determining factor of effectiveness in an organization. Employees who are committed to their organization highly driven to provide their time and vitality to the quest of organizational objectives are progressively recognized as the essential resource for an organization (Pfeffer, 1998).

Sony & Mekoth (2016) mentioned that human resources with remarkable Emotional Intelligence are more flexible to situations and show the propensity to react in a more regulated and mature way in a crisis condition than individuals with low level of Emotional Intelligence. They can perform better and able to do the task in a better way as compared to other individuals. This inspire the researcher to investigate the influence of Emotional Intelligence in the hospital services.

Raudenská et al. (2020) mentioned that the coronavirus disease 2019 (COVID-19) experienced in 2019/2020 made a devastating influence on hospital systems and its employees. During a pandemic, health care professionals confront numerous health perils that impact their personal as well as professional life. (Alonazi, 2020). It may also influence their level of commitment to their jobs. During crisis, practices are chaotic, and an individual’s interest might be different than the collective interest (Sommer, M.Howell, & Hadley, 2015).

Some researchers (Dhungana & Kautish, 2020; Ramli & Novariani, 2020; Alsughayir, 2020) have studied the relationship between EI and OC and found that EI has a positive and significant influence on OC. Goswami & mahanta (2018) found the variables to be positively correlated; but could not establish significant relationship between the two variables. Aghdasi, Kiamanesh, & Ebrahim (2011) identified that Emotional Intelligence did not have any direct or indirect impact on organizational commitment among personnel working in Iranian Organizations. Johar, Ibrahim & Isa (2020) have studied the impact of dimensions of EI on NC (Normative commitment). Thus, there are conflicting results about the relationship between EI and OC.

Research have been done on the Banking sector regarding Emotional Intelligence and Organizational Commitment (Rahiman, Kodikal, Biswas, & Hariharasudan, 2020; Alsughayir, 2020; Dhungana & Kautish, 2020). But few research have been done in the medical field (Alonazi, 2020; Ramli & Novariani, 2020). Alonazi (2020) mentioned that to assist the implications of Emotional Intelligence in health organizations, it may be supportive to include other health care providers in the study. Alsughayir (2020), stated that future studies can incorporate samples through various geographic areas and can assess all the three dimensions of OC (affective, continuance and normative) with respect to Emotional Intelligence. This research study addresses this research gap.
This study investigates the impact of Emotional Intelligence on three facets of Organizational commitment i.e., affective, continuance and normative commitment among medical employees amid COVID 19 Pandemic. Moreover, this research also checked the moderating role of gender in this relationship.

First section of this research article explains the introduction of study. Second section reviews the previous literature regarding variables of interest. Third section mentions the conceptual framework and hypothesis based on literature. Fourth section describes the methodology of study. Fifth section is regarding the analysis, results, and discussion. In the last section conclusions, limitations and future dimensions has been mentioned.

2. Literature Review

2.1. Emotional intelligence
Emotional intelligence was defined by Salovey and Mayer (1990, p.189) as “the subset of social intelligence that involves the ability to monitor one’s own and others’ feelings and emotions, to discriminate among them and to use this information to guide one’s thinking and actions.” Later on, they extended the definition as “the ability to perceive emotions, to access and generate emotions so as to assist thought, to understand emotions and emotional knowledge, and to reflectively regulate emotions so as to promote emotional and intellectual growth” (Mayer & Salovey 1997, p. 5). A definition which is more recent consider EI as “the ability to carry out accurate reasoning about emotions and the ability to use emotions and emotional knowledge to enhance thought” (Mayer et al. 2008, p. 507).

Another definition of Emotional Intelligence which was accepted generally and leading definition in the field of Management is Goleman’s (Joseph et al., 2015), whereby it is “the capacity for recognizing our own feelings and those of others, for motivating ourselves, and for managing emotions well in ourselves and in our relationships” (Goleman, 1998, p. 317). Australian researchers are advancing the field of EI in their investigation of the underlying mechanisms that lead emotionally intelligent individuals to positive life outcomes. (Bucich & MacCann, 2018)

Goleman (1998) stated four aspects of Emotional Intelligence i.e. Self-awareness, social awareness, self management and last is relationship management.

2.1.1. Self-awareness
Self-awareness is the first dimension of EI. It is the skill to understand the emotions and acknowledge their influence whilst utilizing the gut feelings that guide him/her in making the choices (Goleman, 1998)

2.1.2. Self-Management
Self- Management is the second dimension of EI. It entails regulating emotions of oneself and inclinations, adjusting to the varying situations (Goleman, 1998). It involves putting your
temporary needs on hold to carry out more significant goals (Garner, 2009). It is the capacity to control disturbing effects like rage and nervousness (Goleman, 1995).

2.1.3. Social awareness
Third dimension of EI is the social awareness. It involves the skill to feel, comprehend, and respond to other people emotions whilst understanding the social associations. (Goleman, 1998)

2.1.4. Relationship Management
Fourth dimension of EI is relationship management. It involves the capability to encourage, impact and improve others whilst managing disputes (Goleman, 1998). It involves the skills used to manage and enhance others’ performance, utilize the strengths of team members and handling the conflicts (Garner, 2009)

2.2. Organizational Commitment
Meyer and Allen (1990) described Organizational commitment (OC) as a cerebral position that associates personnel to the organization in which they are employed. It has been defined by Mathieu and Hamel (1989) as "a state in which an individual identifies with a particular organization and its goals and wishes to maintain membership in order to facilitate these goals" (p. 225). Nyhan (2000) mentioned that employees firmly believe and accept the goals and values of the organization. OC was construed by Meyer and Allen (1991) as “psychological state which consists of three factors, and this is called the three-component model (TCM) of organizational commitment”. TCM enlightens three states that are psychological and pronounce the association of personnel with the organization in which they are employed and will impact the choice of personnel about staying or leaving the organization (Solinger, van Olffen, & Roe, 2008; Meyer et al., 2002). The strength of three facets varies over time depending on the circumstances at the workplace. Meyer and Allen (1997) proposed three components of commitment i.e. affective, continuance and normative commitment.

2.2.1. Affective commitment
Affective commitment is explained by Meyer & Allen (1991) as “emotional attachment and involvement of employee with organization”. It was determined that persons having strong affective commitment have strong desire to work for their organization because they have meaningful interaction with their organization.

2.2.2. Continuance commitment
Continuance commitment narrates the consciousness of cost suffered when the employee will leave the company. It is inclination to stay in the company because personnel have devoted in the company in the form of associations, retirement and the aspects that are exclusive to that company (Riezchers, 1985).
2.2.3. **Normative commitment**

Normative commitment is a responsibility sensed by personnel to stay in the service (Meyer and Allen, 1991). The aspects of normative commitment are organizational investments, personal characteristics of employee and socialization practices (Allen & Meyer, 1990).

**Emotional Intelligence and facets of Organizational commitment**

In an earlier study, Abraham (2000) analyzed the association between Emotional Intelligence and organizational commitment. He investigated the idea that people having more emotional intelligence were having more commitment towards their organizations in which they are employed. It was also posited by Abraham (2000) that the dimension of social skills of EI may have an impact on organizational commitment by making good relationships at work with the colleagues, which may heighten the affective connection of the workers who are emotionally intelligent to their organization in which they are employed. This form of commitment i.e., affective commitment is found to be linked with emotional intelligence and valued by employers the most.

It was found in research by Nikolaou & Tsaousis (2002) that Emotional Intelligence (EI) and the organizational commitment (OC) are strongly associated. While exploring the relationship between EI and OC, it was concluded that employees having high EI felt revered and appreciated in their ranks in the firm, which results in enhanced feelings of devotion to their organization. Nikolaou & Tsaousis (2002) investigated the positive relationship between EI and OC of employees, and it was found that EI and OC are strongly associated with each other.

Jordan, Ashkanasy and Hartel (2002) observed that individuals having high level of EI show high levels of affective commitment. Salami (2008) explored the relationship between Nigerian industrial workers’ Emotional Intelligence and OC. Findings depicted that EI significantly predicted organizational commitment. Conclusions suggested that academics and managers should consider emotional intelligence when planning the development programs to improve the OC of personnel.

According to a study by Shafiq & Rana (2016), Emotional Intelligence had positive and significant relationship with three components of OC (affective, continuance and normative commitment). EI may shield the adverse impact of job stress on Emotional exhaustion and increase the affective commitment by managing the stress. (Washburn, Simonton, & Lee, 2021). Emotional intelligence was found to be directly associated with affective commitment in a study by Carmeli (2003). Spiritual Intelligence and Emotional intelligence had positive and significant impact on continuance commitment and organizational citizenship behavior. (Hakim & Sultan, 2020)

Navas, Sharfras & Vijayakumar (2018) have determined significant and positive association between Emotional Intelligence and the three facets of OC (Affective, continuance and normative commitment). It was found that individual with high EI will recognize and handle his own emotions and others’ emotions as well that will impact the productivity positively and lead to high organizational commitment.
Competencies of Emotional Intelligence (dimensions of EI) impact was studied on normative commitment by Johar, Ibrahim & Isa (2020) and only two dimensions impact was found to be significant. Iskandar et al. (2009) and Ashkan (2011) had the similar findings. Karkoulian, Harake, & Messarra (2010), proposed that EI is positively related to affective commitment. Those with high EI level will display high affective commitment and those with low EI will have low affective commitment. However, it was found that EI had no significant association with normative commitment. (Karkoulian, Harake, & Messarra, 2010)

3. Conceptual framework
To develop the conceptual framework, earlier literature was utilized as foundation. This section mentions the hypothesized relationships between the variables. In the conceptual model, Emotional Intelligence is the independent variable (IV). Dependent variables (DV) are Affective commitment, Continuance commitment and normative commitment. Gender is hypothesized as a moderator between the Emotional Intelligence impact on the three facets of Organizational commitment.

Figure 1: The Conceptual framework
3.1. Research hypothesis
H1: Emotional Intelligence has a direct and significant impact on Affective commitment of medical employees
H2: Emotional Intelligence has a direct and significant impact on Continuance commitment of medical employees
H3: Emotional Intelligence has a direct and significant impact on Normative commitment of medical employees
H4: Gender moderates the impact of Emotional Intelligence on Affective commitment
H5: Gender moderates the impact of Emotional Intelligence on Continuance commitment
H6: Gender moderates the impact of Emotional Intelligence on Normative commitment

4. Methodology
This research has been conducted to assess the relationship between Emotional Intelligence and the three facets of organizational commitment amid the challenging period of Covid-19 pandemic among the medical employees working in the public and private hospitals. This research will also test the moderating impact of gender in the relationship of EI and the three facets of Organizational commitment.

The survey instrument has been used for data collection and validation of the hypothesized relationships in the conceptual framework. Survey instrument has been adopted from previous studies (Petrides, 2009; Meyer and Allen, 1990; Jaros, 2007). Emotional Intelligence was measured by using the 30 items Trait Emotional Intelligence Questionnaire by Petrides, (2009). Organizational commitment was measured by using the 20 item questionnaire by Jaros (2007). It was the revised version of 24 item questionnaire developed by Meyer and Allen (1990).

Pilot study was conducted to check the reliability of research instrument. Items for demographics were also included in the research instrument. Likert scale (Completely disagree (1) to completely agree (5)) was used in the questionnaire. Convenience sampling was used as a sampling technique because the medical employees have very tough schedules. Whoever was available at the time of data collection were given the questionnaires. Population was medical employees (MBBS, BDS, physiotherapists, pharmacists, psychologists, nurses) working in the large public and private hospitals of Pakistan, United Kingdom and United States of America. Sample size is 354. 400 questionnaires were distributed and out of those 354 were usable for the analysis purpose.

5. Analysis, result, and discussion
This research used Smart PLS to assess the data through partial least square equation modeling (PLS-SEM). Davari and Rezazadeh (2013) recommended that this method is suitable when analyzing simultaneously many relationships. First, the descriptive analysis was conducted. Table
5.1 shows the descriptive statistics of the sample showing the frequency and percentage of demographic characteristics.

Table 5.1: Demographic characteristics (sample size=354)

<table>
<thead>
<tr>
<th>Characteristics</th>
<th>Range</th>
<th>Frequency</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gender</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Male</td>
<td>104</td>
<td>29.4</td>
<td></td>
</tr>
<tr>
<td>Female</td>
<td>250</td>
<td>70.6</td>
<td></td>
</tr>
<tr>
<td>Age</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>20-25</td>
<td>99</td>
<td>28.0</td>
<td></td>
</tr>
<tr>
<td>26-30</td>
<td>121</td>
<td>34.2</td>
<td></td>
</tr>
<tr>
<td>31-35</td>
<td>68</td>
<td>19.2</td>
<td></td>
</tr>
<tr>
<td>36-40</td>
<td>34</td>
<td>9.6</td>
<td></td>
</tr>
<tr>
<td>41-45</td>
<td>12</td>
<td>3.4</td>
<td></td>
</tr>
<tr>
<td>46 &amp; above</td>
<td>20</td>
<td>5.6</td>
<td></td>
</tr>
<tr>
<td>Experience</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1-5 years</td>
<td>216</td>
<td>61.0</td>
<td></td>
</tr>
<tr>
<td>6-10 years</td>
<td>66</td>
<td>18.6</td>
<td></td>
</tr>
<tr>
<td>11-15 years</td>
<td>32</td>
<td>9.0</td>
<td></td>
</tr>
<tr>
<td>16-20 years</td>
<td>24</td>
<td>6.8</td>
<td></td>
</tr>
<tr>
<td>21 &amp; above</td>
<td>16</td>
<td>4.5</td>
<td></td>
</tr>
<tr>
<td>Occupation</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Doctor (MBBS)</td>
<td>116</td>
<td>32.8</td>
<td></td>
</tr>
<tr>
<td>Dentist</td>
<td>58</td>
<td>16.4</td>
<td></td>
</tr>
<tr>
<td>Pharmacist</td>
<td>74</td>
<td>20.9</td>
<td></td>
</tr>
<tr>
<td>Physiotherapist</td>
<td>34</td>
<td>9.6</td>
<td></td>
</tr>
<tr>
<td>Psychologist</td>
<td>14</td>
<td>4.0</td>
<td></td>
</tr>
<tr>
<td>nurse</td>
<td>38</td>
<td>10.7</td>
<td></td>
</tr>
<tr>
<td>Others</td>
<td>20</td>
<td>5.6</td>
<td></td>
</tr>
<tr>
<td>Country</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pakistan</td>
<td>332</td>
<td>93.8</td>
<td></td>
</tr>
<tr>
<td>UK</td>
<td>10</td>
<td>2.8</td>
<td></td>
</tr>
<tr>
<td>America</td>
<td>8</td>
<td>2.3</td>
<td></td>
</tr>
<tr>
<td>Others</td>
<td>4</td>
<td>1.1</td>
<td></td>
</tr>
</tbody>
</table>

Table 5.2. below shows the factor loadings. Strong Loading variables are those having loadings of 0.5 or higher, however, the variables with the loading less than 0.5 has been removed. In case of exploratory research. Value of 0.4 or higher can be considered (Hulland, 1999)

Table 5.2: Factor loadings

<table>
<thead>
<tr>
<th>Constructs and indicators</th>
<th>Item loadings</th>
</tr>
</thead>
</table>
Reliability has been checked using the composite reliability and Cronbach alpha values. Table 5.3 shows that Cronbach’s alpha and composite reliability for Emotional Intelligence (EI) is 0.835 and 0.876 respectively. Cronbach’s alpha and composite reliability for Affective commitment is 0.757 and 0.845 respectively. Cronbach’s alpha and composite reliability for Continuance commitment is 0.757 and 0.845 respectively. Cronbach’s alpha and composite reliability for Normative commitment is 0.818 and 0.871 respectively. According to Hair et al., (2011), Cronbach’s alpha and Composite reliability values should be higher than 0.70 and, in this research, values are found to be greater than 0.7.

Table 5.3: Construct reliability and validity

<table>
<thead>
<tr>
<th>Construct</th>
<th>Cronbach’s Alpha (CA)</th>
<th>Composite reliability (CR)</th>
<th>Average variance explained (AVE)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Intelligence (EI)</td>
<td>0.835</td>
<td>0.876</td>
<td>0.502</td>
</tr>
</tbody>
</table>
Validity is checked via convergent validity (AVE) and discriminant validity. AVE values for EI, AC, CC and NC are 0.502, 0.577, 0.646 and 0.576 respectively. According to Bagozzy and Yi (1988), AVE values should be greater than 0.5. Table 5.3 shows that the values are greater than 0.5 and acceptable. Discriminant validity is checked via Heterotrait Monotrait (HTMT) ratios. According to Hair et al. (2011), HTMT values should be less than 0.90 and Table 5.4 shows that all the values are less than 0.90 so they are acceptable.

### Table 5.4: Heterotrait Monotrait (HTMT) ratios

<table>
<thead>
<tr>
<th></th>
<th>AC</th>
<th>CC</th>
<th>EI</th>
<th>NC</th>
</tr>
</thead>
<tbody>
<tr>
<td>AC</td>
<td>0.389</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>CC</td>
<td></td>
<td>0.561</td>
<td>0.252</td>
<td></td>
</tr>
<tr>
<td>EI</td>
<td>0.561</td>
<td>0.252</td>
<td></td>
<td></td>
</tr>
<tr>
<td>NC</td>
<td>0.766</td>
<td>0.652</td>
<td>0.457</td>
<td></td>
</tr>
</tbody>
</table>

Further, Variance inflation factor (VIF) was also checked for assessing the multicollinearity problem in the data. According to Hair et al. (2011), VIF value of 5 or lower is acceptable to avoid the problem of multicollinearity. VIF values were found to be less than 5. To evaluate the structural equation model, Smart PLS software was used. Figure 2 shows the model in Smart PLS.
First Hypothesis tested was that Emotional Intelligence (EI) has a direct and significant impact on Affective commitment (AC) of medical employees during Covid 19 pandemic. Table 5.5 shows that value of R square is 0.218; that means 21.8 percent variation in AC is explained by EI. Table 5.6 of the path coefficients shows that P value is 0.000 which is less than 0.05, t statistics value is 12.224 which is greater than 1.96. Sign of beta coefficient is positive; this implies that first hypothesis is accepted. There is direct and significant impact of Emotional Intelligence on affective commitment. The results are in line with the findings of research by Abraham (2000); Jordan, Ashkanasy and Hartel (2002); Shafiq & Rana (2016); Carmeli (2003); Navas, Sharfras & Vijayakumar (2018) and Karkoulian, Harake, & Messarra (2010).

Second hypothesis tested was that Emotional Intelligence has a direct and significant impact on Continuance commitment of medical employees during Covid 19 pandemic. Table 5.5 shows that value of R square is 0.047; that means that 4.7 percent variation in CC is explained by EI. Table 5.6 of the path coefficients shows that P value is 0.000 which is less than 0.05, t statistics value is 3.864 which is greater than 1.96. Sign of beta coefficient is positive; this implies that second hypothesis is accepted. There is direct and significant impact of Emotional Intelligence on continuance commitment. The results are in line with the findings of Shafiq & Rana (2016); Hakim & Sultan, (2020) and Navas, Sharfras & Vijayakumar (2018).

Third hypothesis tested was that Emotional Intelligence has a direct and significant impact on Normative commitment of medical employees during Covid 19 pandemic. Table 5.5 shows that
value of R square is 0.170; that means that 17 percent of the variation in NC is explained by EI. Table 5.6 of the path coefficients shows that P value is 0.000 which is less than 0.05, t statistics value is 10.287 which is greater than 1.96. Sign of beta coefficient is positive; this implies that third hypothesis is accepted. There is direct and significant impact of Emotional Intelligence on normative commitment. The results are in line with the findings of Shafiq & Rana (2016); Navas, Sharfras & Vijayakumar (2018). However, the findings contradict with the result of Karkoulian, Harake, & Messarra (2010)

Table 5.5. R square (coefficient of determination)

<table>
<thead>
<tr>
<th></th>
<th>R square</th>
<th>R square adjusted</th>
</tr>
</thead>
<tbody>
<tr>
<td>AC</td>
<td>0.218</td>
<td>0.215</td>
</tr>
<tr>
<td>CC</td>
<td>0.047</td>
<td>0.045</td>
</tr>
<tr>
<td>NC</td>
<td>0.170</td>
<td>0.168</td>
</tr>
</tbody>
</table>

Table 5.6: Path Coefficients

<table>
<thead>
<tr>
<th></th>
<th>Original Sample (O)</th>
<th>Standard Deviation (STDEV)</th>
<th>T Statistics ([O/STDEV])</th>
<th>P Values</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotional Intelligence -&gt; Affective commitment</td>
<td>0.467</td>
<td>0.038</td>
<td>12.224</td>
<td>0.000</td>
</tr>
<tr>
<td>Emotional Intelligence -&gt; Continuance commitment</td>
<td>0.218</td>
<td>0.056</td>
<td>3.864</td>
<td>0.000</td>
</tr>
<tr>
<td>Emotional Intelligence -&gt; Normative commitment</td>
<td>0.412</td>
<td>0.04</td>
<td>10.287</td>
<td>0.000</td>
</tr>
</tbody>
</table>

Fourth hypothesis tested if gender moderates the impact of Emotional Intelligence on Affective commitment of medical employees during Covid 19 pandemic. Table 5.7 of path coefficients shows that P value is 0.723 which is greater than 0.05 and t statistics value is 0.355 which is less than 1.96. This shows that this hypothesis is rejected, and gender does not moderate the impact of EI on AC.

Fifth hypothesis tested if gender moderates the impact of Emotional Intelligence on Continuance commitment of medical employees during Covid 19 pandemic. Table 5.7 of path coefficients shows that P value is 0.025 which is less than 0.05, t statistics value is 2.247 which is greater than 1.96. This implies that this hypothesis is accepted, and gender moderates the impact of EI on CC. The more positive EI is, the more negative the effect of gender on CC becomes.
Sixth hypothesis tested if gender moderates the impact of Emotional Intelligence on Normative commitment of medical employees during Covid 19 pandemic. Table 5.7 of path coefficients shows that $P$ value is 0.146 which is greater than 0.05 and $t$ statistics value is 1.456 which is less than 1.96. This shows that this hypothesis is rejected, and gender does not moderate the impact of EI on NC

Table 5.7: Path Coefficients for moderation

|                     | Original Sample (O) | Standard Deviation (STDEV) | T Statistics (|O/STDEV|) | P Values |
|---------------------|---------------------|-----------------------------|-----------------|----------|
| Gender*EI -> AC     | -0.014              | 0.04                        | 0.355           | 0.723    |
| Gender*EI -> CC     | -0.117              | 0.052                       | 2.247           | 0.025    |
| Gender*EI -> NC     | -0.063              | 0.043                       | 1.456           | 0.146    |

6. Conclusion, limitations & future directions
This research findings depict that there is direct and significant impact of Emotional Intelligence on affective commitment of medical employees. This implies that individuals who are emotionally intelligent tend to be more attached and involved with the organization in which they are employed. Findings also shows that there is direct and significant impact of Emotional Intelligence on continuance commitment. This implies that employees who are emotionally intelligent are willing to stay in an organization because they think that they have invested in the form of relationships in the organization, and they are aware of the cost incurred in case they will leave the organization. Moreover, Findings depict that emotional intelligence had direct and significant impact on the normative commitment of medical employees. This implies that emotionally intelligent employees felt an obligation to remain part of the organization. Results indicates that gender moderates the impact of Emotional intelligence on Continuance commitment, but it does not moderate the impact of Emotional Intelligence on Affective Commitment and Normative Commitment.

This research is a cross sectional study; so conclusions of the study are also bound to the time in which data was gathered from medical employees. Future researchers might conduct a longitudinal study. Convenience sampling is utilized by investigator in this investigation which is a kind of non-probability sampling. This study has incorporated one moderating variable. Future researchers might consider more moderating variables.

The research conclusions can be utilized as a reference material by the academicians, practitioners and corporate experts involved in further exploring the association between Emotional Intelligence and organizational consequences of employees belonging to service sector. The findings would also help the health care providers in introducing valuable training programs of emotional management for their personnel. Moreover, the recommendations and conclusions would be helpful to employers and human resource managers in appraising their policies related
to recruitment. This will aid in recognizing and selecting the people having suitable emotional aptitude to manage and deal with the patients in the crisis like COVID 19 pandemic.

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