Full Length Research Paper

The influence of the emotional intelligence on self monitoring

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Self monitoring is an ability to consciously observe and regulate one’s own behaviour. Incorporating self monitoring in today’s research and practice is beginning to yield a better understanding of how organizational processes are substantially affected by individual issues of how they are seen by others. Especially in service industries, the effect of outcome of interactions of the employees with the clients is an inevitable part of portraying their identity. Most of the actions in the service industry having a legal importance, it is highly essential that controlled image presentation should not cause any deceptions. Hence, it is essential that the employees should know how they present themselves and be able to use self monitoring in the best way possible by them. There are two approaches to the measurement of emotional intelligence: as a mental ability or as a personality trait. Emotional intelligence is the capacity for recognizing our own feelings and those of others, for motivating ourselves, and for managing emotions effectively in ourselves and others. The findings of this study confirm that emotional intelligence is related to self monitoring behaviour. This understanding can contribute to practitioners in the areas of recruitment and in assessing the training needs of healthcare professionals.

Key words: Self monitoring, emotional intelligence, healthcare industry.

INTRODUCTION

As in the stage play, our actors in real life, the managers, need to be well versed in the art of stage acting and also be good critics of their peers too. In other words, the managers need to skillfully manage the impression they create on others in a wide range of situations ranging from such simple ones as meeting a colleague in the lobby to more complex and delicate ones like dealing with a troubled customer. This phenomenon of willfully managing impressions is referred to as impression management. It is the process through which individuals attempt to influence the impressions others form of them. Skill in this process - both to manage one’s impressions and identifying the impression management techniques of others - has become more significant to employees in current organizational settings. Strategic attempts by people to control images projected in real or imagined social interactions have become to be known as impression management or self monitoring (SM) (Snyder, 1979). Individuals high in self monitoring are used to monitor self presentations. They seem inconsistent in their responses across relevant situations, modifying behaviour as a function of who is present, what situation requires and what the results of such behaviour may be. High self monitors thus adhere to a hedonistic principle: they isolate pertinent social cues and mold their behaviour so as to maximize their personals gains (Danheiser and Graziano, 1982). It is not surprising that when the tables are turned, that is, when high self monitors are perceivers: they are skilled in detecting the

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impression management tactics by others. This paper attempts to understand how emotional intelligence affects the self monitoring behaviour of healthcare professionals.

Meaning of self monitoring

Self monitoring is an ability to consciously observe and regulate behaviour (Snyder, 1974). This ability to control self presentational behaviour varies considerably among individuals (known as high self monitors) with some able to change their attitudes and behaviours according to the environment they find themselves in. Others who are less attentive to situational cues and who behave more consistently, with their actual feelings and beliefs, are known as low self monitors (Montigiani and Giacalone, 1999).

Factor affecting self monitoring

A variety of environmental, actor, and audience characteristics serve as stimuli that shape actor and audience definitions of the situation (Schlenker, 1980). The environmental factors could be the work place itself, organizational culture, the work itself, etc. and the actor characteristics could be gender, age, race, personality traits, etc (Gardner and Martinko, 1988). One of the two approaches to emotional intelligence (EI) views emotional intelligence as a personality trait. This research intends to investigate the effects of personality factors like emotional intelligence on self monitoring on organizational settings.

Meaning of emotional intelligence

From the time human beings have been conscious, we have been trying to reckon how to feel better and to get along with each other. The words of wisdom on these topics have been documented over time. The disciplines of philosophy (such as that supported by Aristotle, Sir Thomas More and William James), religion, science, fiction, and nonfiction are examples of humanity's continued efforts to improve upon civilization. Thus, the fundamental societal drive regarding the knowledge of the intelligence of our emotions can be traced back a long way. Emotional intelligence is the ability to monitor one's own and others' feelings and emotions, to discriminate among them, and to use that information to guide one's thinking and actions. (Mayer et al., 1990) In one of the earliest conceptualizations, Gardner (1983) viewed emotional intelligence as consisting of adaptive skills, whereby an emotionally intelligent person has a deep awareness of his or her emotions and the ability to label and draw upon those emotions as a resource to guide behaviour.

Emotional intelligence as a personality trait

There are basically two approaches to the measurement of emotional intelligence: as a mental ability or as a personality trait. Mayer, Salovey and Caruso were instrumental in initiating current interest in the concept by their work in the beginning of the 1990’s (Mayer et al., 1990). They devised tasks in which people were instructed to judge, among other things, the emotional content expressed in art or music.

Emotional intelligence as a personality trait is measured by personality test items of a fairly traditional kind, and is close to many other questionnaire methods for measuring various traits. The best-known example has been devised by Bar-On (Bar-On, 2000; Bar-On et al., 2000). Schutte et al. (1998) developed a framework to explain emotional intelligence based on the model of EI developed by Mayer et al. (1990). Petrides and Furnham (2000) claim the self report emotional intelligence test (SREIT) has a clear four factor structure comprising ‘self management of emotions’, ‘self aware-ness of emotions’, ‘social skills and ‘social competence’.

Objective of the study

This paper seeks to understand the effect of emotional intelligence as a personality trait over self monitoring behaviour in healthcare professionals.

Research hypothesis

The research hypothesis formed is as follows:

\[ H_1 \]: There is no significant relationship between emotional intelligence and self monitoring.

Monitoring

In 1999, Abraham raised the question whether emotionally intelligent employees engage in organizationally functional behaviour from a genuine desire to promote organizational goals or whether they are social chameleons capable of organizationally dysfunctional behaviour. In her work on developing a conceptual framework of emotional intelligence, Abraham directed that the future researchers should examine the motives underlying impression management by clearly distinguishing between positive organization-promoting and negative self-serving motives. It was indicated that the self monitoring aspect of the impression management could be a motive for emotionally intelligent people. Self monitoring is a form of impression management in its ability to control expressive behaviour to match the expression and self-presentation of others in social activities.
situations (Snyder, 1974). Hence, in this research, the research seeks to understand if highly emotionally intelligent people are capable of better self monitoring skills.

**METHODOLOGY**

Three hundred and thirty four healthcare professionals including doctors, nurses and para-medicals from eight hospitals across Tamil Nadu have participated in this study. Sampling frame is as follows:

i. A to B2 cities in Tamil Nadu
ii. Private hospitals which are listed in Indian Medical Association
iii. Hospitals with more than 400 beds
iv. Hospitals which are multi specialty units including medical colleges

The questionnaire used to measure self monitoring is Snyder’s self monitoring scale developed by Mark Snyder. It is a 25 item self administered questionnaire. Emotional intelligence was measured using Scutte et al. Emotional intelligence scale. It is a 33 item questionnaire called self report emotional intelligence test (SREIT).

The study uses partial least square path modeling technique. This method does not make any assumptions about the distribution of the data and is non parametric in nature (Wold, 1989; Wold and Joreskog, 1982). After the data is collected, the scales are analysed to achieve the following objectives: purification of scales, reliability of scales, uni-dimensionality of scales and validity of the scales. Purification is done using corrected item total correlation (CITC), reliability is tested using Cronbach’s alpha, validity and uni-dimensionality are tested using PLS Path modeling. Figure 1 depicts the casual model between emotional intelligence and self monitoring.

**FINDINGS**

The relation was found to be highly significant (beta = 0.924, t = 31.344). The $R^2$ value is also sufficiently high (0.854). This reinforces the theory that emotionally intelligent people are also good in self monitoring. People who are more aware of self and other’s emotions and have the ability to manage the same, are more attentive to situational clues. This also makes them more and better equipped to change their feelings and beliefs according to the situational demand. This in turn helps them blend with the people and situations more effectively. Figure 2 shows the PLS model and the results of the relationship between emotional intelligence and self monitoring.

**DISCUSSION OF FINDINGS**

Graziano and Bryant (1998) suggested that it is possible that a small, stable set of motives or emotional processes underlie individual differences in self monitoring. Individuals with higher self monitoring ability use social cues to monitor how they present their self image. They are also more likely to understand the self monitoring behaviour of others. They also show inconsistencies in their behaviour depending on the situation they are in. Low self monitors on the other hand shows more consistent behaviour. This study confirms the finding by Venkatapathy and Sudhakar (2002) that individuals with high self monitoring have higher emotional intelligence. However, Bono and Vey (2007) had supported a non-association between self monitoring and emotional intelligence stating that it is possible, given sufficient practice on the job, even individuals low in self monitoring might learn to produce genuine, effective emotional displays. The healthcare professionals work in an environment where they come across a variety of
emotions by their patients and family. It is an advantage if they are more emotionally intelligent and thereby have better self monitoring abilities.

Conclusions

People, who are better social chameleons, have less stress related problems and are better in interpersonal relations. This being a desirable ability for managers in the current globalized scenario, if institutions select and develop people with higher emotional intelligence, they will be more effective at work. Today’s organizations work in highly varied and demanding people environment and hence emotional intelligence is vital to effective working environment. Future researchers should look into how various measures of emotional intelligence are related to self monitoring. This will provide further clues as to how exactly, emotional intelligence helps self monitoring. A further investigation of the same relationship, especially in service oriented industries is also required to clarify the role emotional intelligence on self monitoring in other industries.

This research contributes to the understanding of the relationship between emotional intelligence and self monitoring. In service industry, ‘moment of truth’ is all the more vital and is tied to survival. Employees who are better in self monitoring become more desired in such scenarios. This study provides key areas for organizations to concentrate while recruiting people and while deciding training needs especially for organizations in healthcare industry.

REFERENCES