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Modelling public health care personnel's emotional intelligence  
and societal orientation / Nor Azman Mat Ali@Salim.

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Lihat sebelah

**MODELLING PUBLIC HEALTH CARE PERSONNEL'S EMOTIONAL  
INTELLIGENCE AND SOCIETAL ORIENTATION**

**NOR AZMAN BIN MAT ALI @ SALIM**

**Thesis Submitted in Fulfillment of the Requirement for the Degree of Philosophy in  
the Faculty of Management and Economics  
University Malaysia Terengganu**

**June 2009**

Abstract of thesis presented to the Senate of University Malaysia Terengganu in fulfillment of the requirement for the degree of Doctor of Philosophy

**MODELLING PUBLIC HEALTH CARE PERSONNEL'S EMOTIONAL INTELLIGENCE AND SOCIETAL ORIENTATION**

Nor Azman Bin Mat Ali @ Salim

June 2009

Chairperson: Associate Professor Mahazirah Mohammad, Ph.D.

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Faculty: Management and Economics

The ultimate objective of this research is to develop a model to explain the relationship between emotional intelligence and societal orientation, as well as to identify specific emotional intelligence and societal orientation factors, which are possibly relevant for application and further research to create superior public health care service. Data were collected from 307 health personnel who worked at three different hospitals in the East Coast of Peninsular Malaysia.

The participating health personnel completed the Emotional Competence Inventory (ECI 2.0) and Societal Orientation questionnaires. The data were analyzed using both SPSS 13 and AMOS 6. The SPSS 13 was used to create a preliminary data for further structural equation modeling (SEM) analysis using AMOS 6. The SEM analysis was used to identify specific factors of the emotional intelligence and societal orientation

constructs, where both Exploratory Factor Analysis (EFA) and Confirmatory Factor Analysis (CFA) were carried out.

The research has identified four emotional intelligence factors (self-concerns, developing others, emotional self-control, and visionary), and three societal orientation factors (collaboration focus, government and organizational focus, and customer focus). Based on these identified factors, the research has developed a model, which explained a significant and positive relationship between emotional intelligence and societal orientation. In addition, the research also identified eight demographic factors (age, gender, race, marital status, education level, designation, specific job function, and work experience) that were significantly related with the respondents' emotional intelligence levels. The research also identified eight demographic factors (age, gender, race, education level, designation, holding administrative post, specific job function, and work experience) that were significantly related with the respondents' societal orientation levels. The research also descriptively explained that both emotional intelligence and societal orientation constructs were not significantly related with public health care service performance from patients' perceptions.

Finally, the research has met its ultimate objective to develop a model to explain the relationship between emotional intelligence and societal orientation constructs, specifically for the public health care organizations in Malaysia. Perhaps this research could provide useful implications to the Ministry of Health, particularly to public health care organizations concerning their aspiration to deliver superior public health care service.

**Abstrak tesis yang dikemukakan kepada Senat Universiti Malaysia Terengganu  
sebagai memenuhi keperluan untuk Ijazah Doktor Falsafah**

**PERMODELAN KEPINTARAN EMOSI KAKITANGAN KESIHATAN AWAM  
DAN ORIENTASI SOSIAL**

**NOR AZMAN BIN MAT ALI @ SALIM**

**Jun 2009**

**Pengerusi: Prof. Madya Mahadzirah Mohammad, Ph.D**

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**Fakulti: Pengurusan dan Ekonomi**

Tujuan utama kajian ini adalah untuk membina model dalam menjelaskan hubungan antara kepintaran emosi dan orientasi sosial, serta untuk mengenalpasti faktor kepintaran emosi dan orientasi sosial yang sesuai untuk diaplikasi bagi kajian lanjut dalam menyediakan perkhidmatan kesihatan yang terbaik. Maklumat kajian dikumpulkan melalui sampel 307 kakitangan kesihatan daripada tiga buah hospital di tiga negeri di pantai timur semenanjung Malaysia.

Semua kakitangan kesihatan telah mengisi soal selidik *Emotional Competence Inventory* (ECI 2.0) dan orientasi sosial. Semua maklumat kajian telah diproses menggunakan SPSS 13 dan AMOS 6. SPSS 13 telah diguna untuk menyediakan data asas untuk kajian lanjut menggunakan analisa permodelan persamaan berstruktur menggunakan AMOS 6.

Analisa permodelan persamaan berstruktur digunakan untuk mengenal faktor kepintaran emosi dan orientasi sosial yang spesifik, di mana analisa penerokaan faktor dan analisa pengesahan faktor telah dilaksanakan.

Kajian telah mengenalpasti empat faktor kepintaran emosi (kesedaran diri, membangunkan orang lain, kawalan emosi sendiri, dan berpandangan jauh) dan tiga faktor orientasi sosial (fokus kerjasama, fokus kerajaan dan organisasi, dan fokus pengguna). Berdasarkan kepada faktor-faktor yang dikenalpasti ini, satu model kajian telah dibina yang menjelaskan terdapatnya hubungan yang signifikan dan positif di antara kepintaran emosi dan orientasi sosial. Kajian ini juga telah mengenalpasti lapan faktor demografik (umur, jantina, bangsa, taraf perkahwinan, tahap pendidikan, jawatan, jawatan khusus, dan pengalaman kerja) yang mempunyai hubungan yang signifikan dengan kepintaran emosi. Manakala, lapan faktor demografik (umur, jantina, bangsa, tahap pendidikan, jawatan, jawatan pentadbiran, jawatan khusus, dan pengalaman kerja) mempunyai hubungan yang signifikan dengan orientasi sosial. Kajian juga menjelaskan secara diskriptif bahawa tiada hubungan yang signifikan di antara kepintaran emosi dan orientasi sosial dengan prestasi perkhidmatan organisasi dari pandangan pesakit.

Akhirnya, kajian ini telah memenuhi objektif utamanya iaitu membina satu model yang menjelaskan hubungan yang signifikan di antara kepintaran emosi dan orientasi sosial untuk perkhidmatan kesihatan awam, Malaysia. Mungkin, kajian ini boleh membantu Kementerian Kesihatan, terutamanya dalam mempertingkatkan sistem menyampaikan perkhidmatan kesihatan yang terbaik.