Relationship Between Emotional Intelligence and Academic Performance

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Evaluating the Effect of Online Research Methodology Course on Undergraduate Research Skills

Cumulative Identity-Based Stress in Medical Education: The Trauma of Microaggressions

Iraqi Medical Students' Perceptions Towards Undergraduate Breast Curricula During the COVID-19 Pandemic

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Introduction

The World Journal of Medical Education and Research (WJMER) (ISSN 2052-1715) is an online publication of the Doctors Academy Group of Educational Establishments. Published on a quarterly basis, the aim of the journal is to promote academia and research amongst members of the multi-disciplinary healthcare team including doctors, dentists, scientists, and students of these specialties from around the world. The principal objective of this journal is to encourage the aforementioned, from developing countries in particular, to publish their work. The journal intends to promote the healthy transfer of knowledge, opinions and expertise between those who have the benefit of cutting edge technology and those who need to innovate within their resource constraints. It is our hope that this will help to develop medical knowledge and to provide optimal clinical care in different settings. We envisage an incessant stream of information flowing along the channels that WJMER will create and that a surfeit of ideas will be gleaned from this process. We look forward to sharing these experiences with our readers in our editions. We are honoured to welcome you to WJMER.

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A WELCOME MESSAGE FROM THE EDITORS

Dear Reader,

It is our great pleasure to present the thirty-second edition of the World Journal of Medical Education and Research (WJMER). This issue brings together a diverse collection of scholarly articles that reflect current innovations, challenges, and opportunities in medical education, health sciences, and public health across global contexts. The contributions highlight the evolving nature of healthcare education, with a particular emphasis on learner development, equity, pedagogy, and improvement at a systems level.

The opening article by Alarar et al. evaluates the effectiveness of an online scientific research methodology course for undergraduate students at Syrian universities. Using pre- and post-course assessments, the authors demonstrate significant improvements in students' research knowledge and skills, underscoring the value of structured e-learning approaches in strengthening research capacity, particularly in crisis-affected and resource-limited settings.

In the following article, Ponce-Garcia et al. explore microaggressions in medical education and reframe them as cumulative, identity-based trauma rather than isolated interpersonal incidents. Drawing on interdisciplinary evidence, the paper highlights the biological, psychological, and educational consequences of chronic identity-based stress and calls for trauma-informed institutional reforms to foster inclusive and supportive learning environments.

The next study by Nojoum et al. examines Iraqi medical students' perceptions of undergraduate breast curricula during the COVID-19 pandemic. Through qualitative interviews, the authors identify key themes related to e-learning, gaps in breast disease education, and barriers to clinical examination. The findings reveal widespread dissatisfaction with current teaching approaches while highlighting structural challenges that were exacerbated by the pandemic.

Farooq et al. investigate the relationship between emotional intelligence and academic performance amongst undergraduate medical students in Pakistan. The study demonstrates a significant positive correlation between emotional intelligence and academic success, suggesting that emotional competencies may play an important role in student performance, stress management, and motivation within demanding medical programmes.

This issue also includes a narrative review by Pratham and Bhalekar on the therapeutic potential of natural compounds in neurotransmitter-related diseases such as Parkinson's and Alzheimer's disease. The authors discuss emerging evidence on compounds such as curcumin and flavonoids, highlighting their neuroprotective and anti-inflammatory properties while emphasising the need for further research to translate these findings into effective clinical applications.

Singha and Majumder focus on medical education for community health workers. The paper synthesises evidence on educational strategies that enhance competencies, motivation, and public health outcomes, advocating for competency-based, digitally-supported, and rights-based approaches to professional development as a foundation for equitable health systems.

The effectiveness of integrative case-based learning and case seminar approaches in teaching pathology laboratory concepts to PharmD students is examined by Garalla and Burgeia in the next study. The findings indicate that active learning strategies significantly improve knowledge acquisition, critical thinking, and clinical preparedness compared to traditional teaching methods, reinforcing the value of learner-centred pedagogies.

In the subsequent article, Ayub Khan et al. assess alumni perceptions of a Master in Health Professions Education (MHPE) program in Pakistan. Using the RE-AIM framework, the study highlights perceived gains in teaching capacity, curriculum development, and leadership skills, while identifying areas for improvement in educational evaluation and mentorship to maximise programme impact across career stages.

The final article by John et al. explores the use of data analytics in improving health education outcomes, presenting a human-centred framework that integrates technology, pedagogy, ethics, and organisational capability. The paper offers practical recommendations for education leaders, demonstrating how analytics can enhance learner engagement, institutional decision-making, and community health literacy when implemented responsibly.

We sincerely hope that you find the articles in this edition educational, thought-provoking, and relevant to your academic and professional interests. Together, these contributions reflect WJMER's ongoing commitment to advancing scholarship that informs practice, promotes equity, and strengthens health education globally.

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Relationship Between Emotional Intelligence and Academic Performance

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Abstract:

Background: Emotional intelligence promotes adaptive thinking, awareness of emotions' significance, and intellectual growth. Higher EI leads to better academic performance, as students manage stress, stay motivated, and learn effectively.

Objective: Our study intended to determine the relationship between emotional intelligence and academic performance in undergraduate medical students and correlate it with gender and academic year.

Methodology: A descriptive cross-sectional study was conducted at Rahbar Medical and Dental College, Lahore, Pakistan. 230 medical students from 1st year to final year were selected by convenient sampling and surveyed using already verified scales. Data examination included descriptive statistics. Ethical considerations such as informed consent and IRB approval were followed.

Results and Discussion: A study found that 33.9% of participants scored below average in emotional intelligence, while 64.8% fell within the average range. The Academic Performance Scale (APS) showed a distribution of students as failing, 2.2% as poor, 43% as moderate, 49% as good, and 4.8% as excellent. A Spearman's rank-order correlation analysis showed a significant positive correlation between emotional intelligence and academic performance (APS) ρ (230) = .361, p < .001. An ordinal logistic regression showed that students with below-average emotional intelligence had lower chances of achieving higher academic performance compared to those with above-average EI. The results indicated that students with below-average emotional intelligence (EI) had significantly lower chances of achieving higher academic performance compared to those with above-average EI, with a coefficient of β = -5.91, a standard error of SE = 1.02, and a p-value of p < .001, yielding an odds ratio (OR) of 0.0027.

Conclusion: The study reveals a significant and moderately positive correlation between emotional intelligence (EI) and academic performance, with higher EI scores indicating a potential strategy for enhancing academic success.

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Introduction

Perceiving, controlling, and regulating emotions encourages adaptive thinking and an awareness of the significance and ramifications of emotions. This type of behavior is known as emotional intelligence. A person can grow intellectually, socially, and emotionally through this process of control, regulation, and adaptation.[1] The ability to accurately reason about emotions and to use emotions and emotional knowledge to improve thinking are both components of emotional intelligence (EI).[2] Since emotions are essential to human cognition, there is a substantial correlation between academic achievement and emotional intelligence.[3] As an essential defense against academic failure, these skills should therefore be linked to academic success in line with the theories of educational psychology and learning.[4] This relationship is sturdy,

according to learning and teaching psychology, evolutionary development, and the school of positive psychology, since emotional intelligence (EI) promotes mental processes, focus, and self-control under pressure.[5] There is disagreement among educators over the relative importance of emotional intelligence (EI) and intelligence quotient (IQ) in influencing academic achievement. Since working memory makes up a percentage of IQ.[6] High-quality projects have been linked to improved academic achievement by developing students' emotional intelligence skills.[7] Emotional intelligence might be important as Higher EQ is found in persistent students.[8] In a study of Malaysian students, it was discovered that students with high emotional intelligence performed better academically and had superior emotional awareness, management, and relational skills.[9] According to an Ethiopian study,

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several variables, including age, family educational attainment, substance usage, and career development goals, are linked to emotional intelligence.[10] A study among Saudi students revealed that higher emotional intelligence improves academic performance.[11] According to a study conducted at KUST, Pakistan, undergraduate students showed emotional intelligence in several subdimensions, such as empathy, integrity, self-awareness, and self-development. Academic achievement was satisfactory, and there was a significant positive correlation between academic success and emotional intelligence, especially when it came to cumulative grade point averages.[12] Parker et al. concluded that students who received 80% or higher on their coursework were deemed academically successful, while those who received 59% or lower were deemed academically poor. They observed that students with higher emotional intelligence also performed better academically. They observed the groups' differences and concluded that the primary one was stress management. Students who excelled academically had more focus, which is a crucial component of stress management. Additionally, they discovered that intrapersonal and adaptability skills differed less.[13]

According to the literature, emotional intelligence has a significant role in better academic achievement. There isn't much research on this association among medical students. We set out to find out if any beneficial relationships among medical students would support the idea that their program should include emotional intelligence sessions to assist them in doing better academically.

Objective
The objective is to explore the connection between emotional intelligence and academic performance and to examine how these factors may vary by gender and academic year.

Methodology
Study Location and Period: The study was conducted at Rahbar Medical and Dental College in Lahore, a private medical institution, over a period of months, from to 2025.

Study Type and Sampling Process: A descriptive cross-sectional study utilizing data gathered through a random sampling method.

Sample Size: Sample size is calculated based on the following assumptions.
- Finite Sample Size =   SS/ [1 + {(SS − 1)/Pop}]
- Confidence interval: 95%
- The margin of error: 5%
- Total population: 507
- Population size: 207

- Sample size calculated: 219
- Targeted 230 to account for incomplete forms.

Study Tool:
(1) Wong and Law Emotional Intelligence Scale (WLEIS)14
    Cronbach alpha = 0.9014
(2) Academic Performance scale15
    Cronbach alpha = 0.8515

Inclusion Criteria: Participants included both male and female undergraduate medical students from all academic years.
Exclusion Criteria: Participants who refused to provide consent, were absent, or had a chronic disease were excluded.
Details of Questionnaire: The questionnaire consisted of three parts:

Part 1: Demographic Information. This section captured the demographic details of the participants.

Part 2: Wong and Law Emotional Intelligence Scale (WLEIS). This part includes a 16-item measure of emotional intelligence rated on a 7-point Likert scale, ranging from "Strongly Disagree" to "Strongly Agree."

It assesses four dimensions:
1. Self-Emotion Appraisal
2. Regulation of Emotions
3. Use of Emotion
4. Others' Emotion Appraisal

Part 3: Academic Performance Scale (APS). This section contains eight items rated on a 5-point Likert scale, also ranging from "Strongly Disagree" to "Strongly Agree."

Ethical Issues: Anonymity of participants was maintained. Informed consent was implied through the consent form. Participants were informed of their right to refuse participation.

Results
Out of a total of 230 participants, 108 (47%) were female, while 122 (53%) were male. The distribution by year of study was as follows: 41 participants from the first year, 50 from the second year, 40 from the third year, 37 from the fourth year, and 62 from the fifth year.

In terms of emotional intelligence, 33.9% of participants scored below average, 64.8% fell within the average range, and only 1.3% demonstrated above-average emotional intelligence. Regarding academic performance, as measured by the Academic Performance Scale (APS), the distribution was as follows: 0.4% of students were classified as

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failing, 2.2% as poor, 43% as moderate, 49% as good, and 4.8% as excellent.

A Spearman's rank-order correlation analysis was conducted to examine the relationship between emotional intelligence, measured using the Wong and Law Emotional Intelligence Scale (WLEIS), and academic performance scores (APS).

A statistically significant positive correlation was found between emotional intelligence (EI) and academic performance (APS), ρ (230) = .361, p <.001. This suggests that higher emotional intelligence is associated with better academic performance.

To explore this relationship further, we conducted an ordinal logistic regression by categorizing academic performance into three levels: Low, Moderate, and High. We also categorized emotional intelligence into Below Average, Average, and Above Average.

Analysis Type	Test/Metric	Value	Interpretation
Correlation Analysis	Spearman's rho	0.361**	Moderate positive correlation between EI and academic performance
	Significance (2-tailed)	p = 0.0001*	Statistically significant at the 0.01 level
	Sample Size (N)	230	

Table 1: Spearman's rank-order correlation linking Emotional Intelligence (WLEIS) and Academic Performance (APS)

Predictor (EI Level)	Coefficient (β)	Standard Error	p-value	Odds Ratio (e^{β})	95% CI for OR	Interpretation
Below Average EI	-5.909	1.021	< .001	0.0027	[0.0004, 0.017]	Strongly reduced odds of higher APS
Average EI	-5.212	0.984	< .001	0.0054	[0.0009, 0.031]	Moderately reduced odds of higher APS
Above Average EI	Reference	—	—	1.00	—	Baseline category

Model Fit & Assumptions	Value	Interpretation
Model Type Model Chi-Square (df = 2)	Partial Proportional Odds Model 77.92	Used due to violation of proportional odds assumption Model significantly predicts APS (p<.001)
Nagelkerke Pseudo R²	0.336	Model explains ~34% of variance in APS
Proportional Odds Assumption (Brant Test) Zero Cell Adjustment Sample Size (N)	Violated (p<.05) Categories merged 230	Justified use of flexible modeling approach Addressed sparse data in contingency table Adequate for ordinal logistic regression.

Table 2: Ordinal Logistic Regression Results Linking Emotional Intelligence (WLEIS) to Academic Performance

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The partial proportional odds model was employed because the proportional odds assumption was violated (Brant Test p < .05). The model was found to be statistically significant, with $\chi^2(2) = 77.92$, p < .001, and it accounted for approximately 34% of the variance in academic performance, as indicated by a Nagelkerke R^2 of 0.336.

The results indicated that students with below-average emotional intelligence (EI) had significantly lower chances of achieving higher academic performance compared to those with above-average EI, with a coefficient of $\beta = -5.91$, a standard error of SE = 1.02, and a p-value of p < .001, yielding an odds ratio (OR) of 0.0027. Similarly, students with average EI also faced reduced odds of attaining higher academic performance, as shown by a coefficient of $\beta = -5.21$, SE = 0.98, p < .001, and an odds ratio of OR = 0.0054. The reference group for this analysis consisted of students with above-average EI.

It is important to note that approximately 11.1% of the data cells had zero frequencies, which may affect the reliability of the interpretation.

Discussion

The Academic Performance Scale (APS) was utilized to evaluate students' academic performance in educational settings, with variations depending on the institution. This study explored the relationship between scores on the Weighted Learning Emotional Intelligence Scale (WLEIS) and the APS, suggesting that emotional intelligence may influence academic performance. The APS evaluates student performance through various components, including grades, standardized test scores, attendance, behavior, participation, assignments, and projects. The quality and completion of homework and research projects were also assessed.
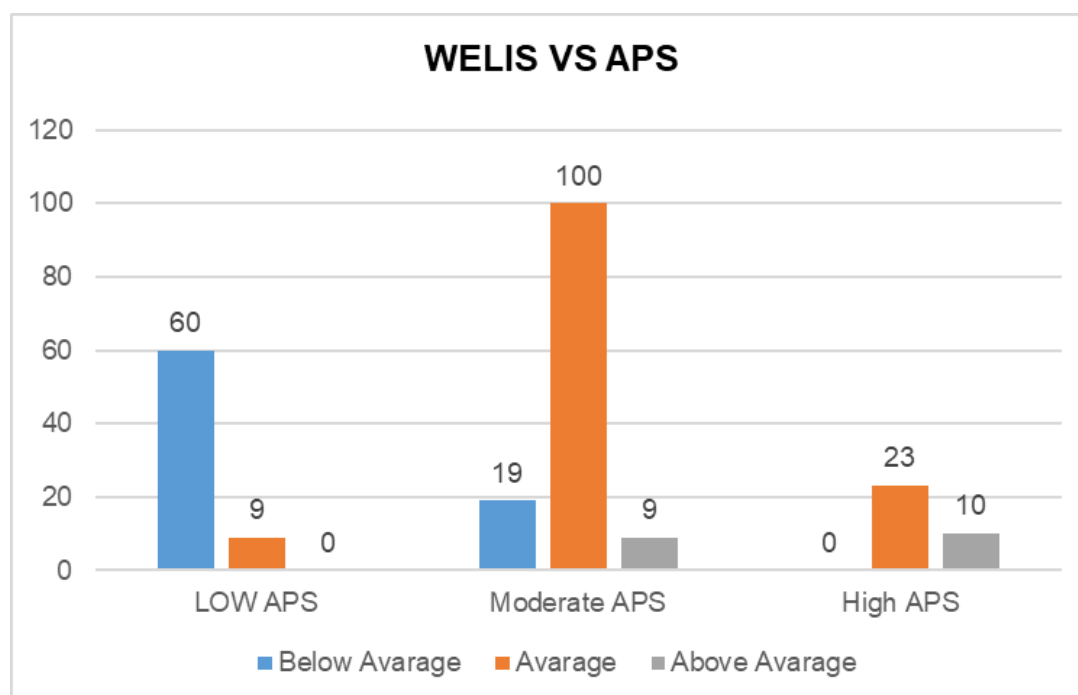
In our study, we had a total of 230 participants, consisting of 122 males (53%) and 108 females (47%). The participants were distributed across different academic years as follows: 41 from the 1st year, 50 from the 2nd year, 40 from the 3rd year, 37 from the 4th year, and 62 from the 5th year.

A Spearman's rank-order correlation was used to assess the relationship between emotional intelligence (EI), measured by the Wong and Law Emotional Intelligence Scale (WLEIS), and academic performance scores (APS). The analysis revealed a significant moderate positive correlation, $\rho(230) = .361$, p < .001, indicating that higher EI is associated with better academic outcomes.

An ordinal logistic regression further examined this relationship, categorizing academic performance as Low, Moderate, and High, and emotional intelligence as Below Average, Average, and Above Average. The model was statistically significant, suggesting that EI accounts for approximately 34% of the variance in academic performance.

Results indicated that students with below-average EI had significantly lower odds of achieving higher academic performance compared to those with above-average EI ($\beta = -5.91$, SE = 1.02, p < .001, OR = 0.0027). Similarly, students with average EI also exhibited reduced odds of higher performance ($\beta = -5.21$, SE = 0.98, p < .001, OR = 0.0054).

The connection between the Academic

WELIS VS APS

Chart showing counts for Below Average, Average, and Above Average EI across LOW APS, Moderate APS, and High APS:
- LOW APS: Below Average = 60, Average = 9, Above Average = 0
- Moderate APS: Below Average = 19, Average = 100, Above Average = 9
- High APS: Below Average = 0, Average = 23, Above Average = 10

■ Below Avarage ■ Avarage ■ Above Avarage

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Performance Scale (APS) and Emotional Intelligence (EI) is significant, particularly in how students assess and enhance their academic performance. Emotional intelligence - encompassing the ability to recognize, understand, and manage emotions - has a strong influence on academic success. Research suggests that skills such as emotion perception and regulation are key predictors of academic self-efficacy.[16] Academic performance is influenced by factors such as cognitive abilities, study habits, motivation, and external circumstances like socioeconomic status and family support. Emotional intelligence (EI), which, includes emotional awareness and social skills, can impact performance differently depending on the context. For instance, ability-based EI predicts performance in the humanities better than in the sciences, while self-rated EI is a stronger indicator of grades compared to standardized test scores.[17] Emotional intelligence (EI) may influence academic success indirectly. While it might not directly improve grades, EI can help students manage stress, build relationships, and persist through challenges—factors that contribute to long-term success, even if they aren't immediately reflected in grades. Understanding the link between trait emotional intelligence (EI) and academic performance is complex. The relationship is likely reciprocal and dynamic, complicating efforts to clarify these processes.[18] Many studies indicate that emotional intelligence (EI) can positively influence academic success, particularly in areas such as emotional well-being and motivation. However, cognitive factors, such as intelligence and study habits, are more direct predictors of academic performance. This suggests that multiple factors including cognitive ability, motivation, study habits, and EI should be considered when evaluating academic outcomes, as different aspects of EI may impact performance in various ways.[19] Overall, academic performance is a complex construct. Emotional intelligence plays a crucial role in managing stress, motivating oneself, and enhancing interpersonal interactions. However, academic performance often depends more heavily on cognitive abilities and effective study habits. One study indicated that individuals with a CGPA above 4.50 scored significantly higher in emotional management (p = 0.048), emotional awareness (p < 0.001), social-emotional awareness (p < 0.001), and relationship management (p = 0.030). Additionally, males had higher overall emotional intelligence (EQ) scores compared to females (p < 0.001).20 Emotional intelligence (EI), significantly influences academic performance and mental health. It develops over time through life experiences, and research shows a positive correlation between EI and academic success. Three meta-analyses have confirmed that higher EI is linked to better academic outcomes, particularly among final-year medical students. Additionally, individuals with higher

emotional intelligence report greater self-satisfaction and lower stress levels.[21] Emotional intelligence (EI) is positively related to contentment and life satisfaction when accounting for personality factors, which is another benefit of enhancing EI among medical undergraduates.[22] Emotional Intelligence (EI) measures how well a student performs academically and affects their emotional well-being and stress management. Research indicates that both Interpersonal and Intrapersonal EI significantly impact academic performance, with Interpersonal EI being the strongest predictor.[23] A study of medical students in Nottingham revealed that those with high emotional stability performed better on pre-clinical assessments.[24]

Larger studies may be needed to strengthen the link between EI and academic success.

Conclusion
The analysis reveals a statistically significant and moderately positive relationship between emotional intelligence (EI) and academic performance. Students with higher EI scores generally perform better academically. In particular, those with below-average or average emotional intelligence are significantly less likely to achieve high academic performance compared to their peers with above-average EI. This emphasizes the importance of fostering emotional intelligence as a potential strategy for enhancing academic success among students.

Limitations
The study's limitations include a small sample size and focus on a single medical college, affecting generalizability.
- Only 1.3% of participants had above-average emotional intelligence, potentially weakening comparisons across categories.
- About 11.1% of the contingency table cells had zero frequencies, which may impact the reliability of the logistic regression model.
- The Emotional Intelligence Scale (WLEIS) and Academic Performance Scale (APS) were based on self-reported data, which can lead to inaccuracies.
- Data collected at a single point in time restricts the ability to establish cause-and-effect relationships between emotional intelligence and academic performance.

Recommendations
To improve outcomes, we should implement diverse student populations, emotional intelligence training programs, and accurate academic performance data. Balancing emotional intelligence and academic performance categories in future studies can help prevent zero-cell issues and enhance the reliability of statistical analyses.

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