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## ORIGINAL ARTICLE

# Estimating the effect of emotional intelligence in wellbeing among priests

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### KEYWORDS

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**Abstract** *Background/Objective:* Emotional intelligence is a variable which has been the subject of significantly increased research in recent years. Relationships have been shown with both physical and psychological problems. The aim of this study is to analyse the direct and indirect effect that emotional intelligence exerts over the manifestation of physical and psychological clinical symptomatology and to severe disorders such as burnout syndrome in a professional group in which social function is fundamental. *Method:* So that, 881 Latin-American catholic priests ( $M_{age} = 45.89$ ;  $SD_{age} = 11.58$ ) were evaluated using the Trait Meta-Mood Scale-24, the Maslach Burnout Inventory-22 and the General Health Questionnaire-28. *Results:* Using path analysis, emotional intelligence, especially Attention and Emotional Clarity, shows a high effect on psychological and somatic issues. *Conclusions:* Thus, both specific disorders and general wellbeing are related to emotional intelligence. Providing effective emotional intelligence training sessions seems to be able to reduce possible physical and emotional disorders.

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**PALABRAS CLAVE**

Evaluación;  
Inteligencia  
emocional;  
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Religión;  
Estudio descriptivo  
mediante encuestas

**Estimación del efecto de la inteligencia emocional sobre el bienestar en sacerdotes**

**Resumen** *Antecedentes/Objetivo:* La inteligencia emocional es una variable que ha sido objeto de un incremento notable de investigación a lo largo de los últimos años. La inteligencia emocional ha mostrado numerosas relaciones con múltiples variables psicológicas, destacando su conexión con diversos trastornos físicos y psicológicos. El objetivo del presente estudio es analizar los efectos directos e indirectos que la inteligencia emocional ejerce sobre la manifestación de sintomatología somática y psicológica, así como sobre el desarrollo de trastornos como el síndrome de burnout en un grupo de profesionales cuya labor social resulta esencial. *Método:* Se aplicaron las escalas *Trait Meta-Mood Scale-24*, *Maslach Burnout Inventory-22* y *General Health Questionnaire-28* a un total de 881 sacerdotes católicos latinoamericanos ( $M_{edad} = 45,89$ ;  $DT_{edad} = 11,58$ ). *Resultados:* Mediante *path analysis* se muestra el efecto que la inteligencia emocional, especialmente la atención y claridad emocional, ejerce sobre las alteraciones somáticas y psicológicas. *Conclusiones:* Tanto los trastornos específicos como el bienestar general presentan una relación clara con la inteligencia emocional. Proporcionar programas formativos efectivos que desarrollen la inteligencia emocional podría reducir la aparición de trastornos físicos y emocionales.

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Emotional intelligence (EI) appeared in the scientific literature for the first time more than twenty years ago, defined as "...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" (Salovey & Mayer, 1990, p. 189). Nonetheless, it was not until years later that this concept was globally accepted, and was understood to be an important aspect in achieving personal and professional success (Goleman, 2007). Since then, both the development of different explanatory models and the research into EI have grown exponentially (Joseph & Newman, 2010). Emotional capabilities are fundamental factors in social interaction (Peña-Fernández, Andreu-Rodríguez, Barriga, & Gibbs, 2013). They are the basis of social and communicative functions and they also allow people to adapt to their development contexts (Mavroveli, Petrides, Rieffe, & Bakker, 2007).

There are professional groups in which interaction and social function are particularly relevant, such as priests. The ability of this group to understand and deal with personal emotions and, more fundamentally, those of their parishioners, is of paramount importance in the correct development of their social role (Meaghera, 2015). There is evidence that EI is significantly related to specific pro-social attitudes (Jiménez & López-Zafra, 2011), which are fundamental to the work of priests. Nonetheless, while it is true that the emotional relationships that priests establish with their parishioners are important to their work, they must also be able to understand and manage their own emotions appropriately.

Diocesan priests are exposed to difficult situations in areas such as doubts, inner conflicts, tiredness, anxiety... Sociocultural changes experienced by the Church and its priests along the last decades reflect the need to analyze these problems and possible solutions in order to promote a ministry that encourages and motivates its mission. In

this regard, multiple stressors affect priests every day, such as a lack of social support, overwork, misaligned of interpersonal goals or problems of self-esteem among others (Miller-Clarkson, 2013), which increase the difficulties they have to face (e.g. Hansson, 2006; Rossetti & Rhoades, 2013). As a result of all these stressors, crises on priestly life can appear. Those crises evidence a breach of internal balance already acquired. An inappropriate lifestyle which requires a reorientation of basic schemes of life is the main reason to suffer a crisis. Even though priest can experience a broad variety of crisis, affective-sexual crisis, problems in relations with authority, triggered by labor problems, difficulties in interpersonal relationships or career and faith crisis are the most common (Miranda, 2002). Evidence about the influence of those variables on subjective well-being, mental health and engagement has been demonstrated along different contexts (e.g. Rodríguez-Fernández et al., 2016).

Although cultural heritage is one of the main reasons for vulnerability in young priests, especially along Western cultures. However, there are other relevant factors such as reduced and difficult labor insertion; lack of social recognition related to their role; isolation on their daily life; a poor inner life; too many commitments; lack of sleep; reduced leisure; and unsuitable housing (Laghi, 1992). All these factors increase the priest vulnerability to emotional and moral exhaustion, and, in general, the negative effects of stress.

Added to this, burnout syndrome is a possible consequence of experiencing these multiple stressors (Jackson-Jordan, 2013; Ventura, Salanova, & Llorens, 2015). This syndrome is characterized by physical and emotional exhaustion - provoked by constant interaction with other people; low self-esteem or reduced personal accomplishment -owing to personal or professional unsuitability to the job- and depersonalisation -a cynical, pessimistic, negative and sometimes aggressive attitude towards others (Maslach & Jackson, 1984). High levels of incidence of this syndrome

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