



**A Comparative study to assess the Emotional Intelligence among
Adolescents in Selected Urban and Rural Schools at Bengaluru**

Ashwini Suman Banerjee

Assistant Professor, SEA College of Nursing, KR Puram, Bangalore, India.

Article Information:

Type of Article: *Original Article*

Received On: *15th October 2024*

Accepted On: *20th October 2024*

Published On: *22nd October 2024*

Abstract:

Introduction: Adolescence is a crucial developmental stage marked by significant physical, cognitive, and emotional changes, often leading to stress and adaptation challenges. Emotional intelligence helps adolescents manage these changes and navigate academic and social pressures. This study explores the relationship between emotional intelligence, demographic factors, and its impact on coping skills and academic performance. **Methodology:** The research approach for this study was quasi experimental pre- test design. Sampling was done using non-probability purposive sampling where 30 samples in total were selected out of which 15 were from Rural (group 1) and the next 15 were from urban (group 2) schools in Bangalore. The tool used for data collection was the modified Schutte self-report emotional intelligence test (SSEIT). The tool was administered to the children after explaining to them to mark on it. The extent to which they agree or disagree to the statements given. **Results:** In Group 1, the mean post-test intelligence score (0.47 ± 0.74) was significantly lower than the pre-test score (13.47 ± 3.04), with a t-value of 19.86 ($p < 0.05$). Similarly, in Group 2, the post-test mean (0.53 ± 0.64) was lower than the pre-test means (14.00 ± 3.11), with a t-value of 19.95 ($p < 0.05$). The mean difference between Group 1 and Group 2 was minimal (0.06), and the t-value of 0.49 indicated no significant difference ($p > 0.05$). There was no significant association between pre-test intelligence levels and demographic variables such as age, education, and area of



Glorious International Journal of Nursing Research (An International Peer-Reviewed Refereed Journal)

ISSN: 2583-9713

www.gloriousjournal.com

living ($p>0.05$). **Conclusion:** The study found a reduction in emotional intelligence levels among adolescents in both urban and rural schools, with urban students showing slightly higher emotional intelligence than rural students. There was no significant association between pre-test intelligence levels and demographic factors.

Key Words: Effectiveness; Comparative, Emotional Intelligent, Emotional Competence, Inadequate Adaptation

Introduction:

Adolescence is a stage of human development that occurs between childhood and adulthood. It is also a period of time where young people experience self-organization and role confusion and a stage where youth experience rapid growth of their body and mind. Due to fast physical changes and mental development at this stage, students may sometimes experience incompatibility of their mental development, with their physical changes or with the social environment and this problem arising from inadequate adaptation.¹

India has the largest population of adolescents in the world being home to 243 million individuals aged 10-19 years. The country's adolescents constituted 20 percent of the world's 1-2 billion adolescents. Karnataka is the eighth largest state in India in terms of population. According to population census, the population of Karnataka was 5.273 crores (52.73 million) and about 21% of that comprised the adolescent population. The current population of Karnataka is 6, 11, 30, 704.²

A survey was conducted by American Psychological Association showed that 45 percent of adolescents are stressed. Stress is mainly from academic tests, interpersonal problems, relationship problems and life changes. This kind of stress may lead to psychological, physical and behavioral problem like suicidal tendency, risk taking behavior, creating issues in schools and anti-social behaviors among adolescents. There are some studies that prove that emotional intelligence may protect people from stress and lead to better adaptation.³

Emotional intelligence consists of "abilities such as being able to motivate oneself and persist in the face of frustration; to control impulse and delay gratification; regulate one's moods and keep distress from swamping the ability to think to empathize and to hope. It



is also said that family and school are the best places which can help develop emotional competence.⁴

Adolescence is a transitional stage of physical and mental development. Adolescence is characterized by a number of cognitive, emotional, physical, and attitudinal changes, which can be a cause of conflict on one hand and positive personality development on the other. Adolescence is also a time of rapid cognitive development. Piaget described adolescence as the stage of life in which the individual's thoughts start taking more of an abstract form and the egocentric thoughts decrease. This allows the individual to think and reason in a wider perspective. Their changing mind, body, and relationships often present themselves as stressful and that change, they assume, is something to be feared.⁵

'Emotional intelligence' is the ability to perceive emotion, integrate emotion to facilitate thought, understand emotions and to regulate emotions to promote personal growth. Researches says that emotionally literate students have mastered the emotional abilities that inoculate them against the turmoil and pressure they are about to face during life transitions. If we are to understand the schooling of young adolescents, then we must understand how they respond to their learning environment, and we must be aware that there are reasons why students respond differently.⁶

The future of any nation depends on the quality of adolescents. Hence proper guidance at this crucial phase of life is important for enhancing their positive self – concept, enriching their knowledge and skills in decision making, conflict resolution and management of emotions. So the researcher felt there is a need to assess emotional intelligence among adolescents⁷

An explorative study was conducted among 200 students in the age group of 16-19 years from three Midwestern high schools to assess the emotional intelligence in relation to demographic characteristics. The instrument consisted of two sections: demographic characteristics like sex, house hold income, parents' level of education, location and emotional intelligence using Bar-On EQ i YV(S) scale. Kendall's Tau-b correlation test was used to find the correlation coefficient. A significant positive relation was found for higher level of mother's (Tau-b=-0.205) and father's education (Tau-b=0.296) and household income (Tau-b=-0.242). Independent 't' test indicated female emotional



intelligence score ($M=69.75$, $n=91$) was significantly higher than male score ($M=67.08$, $n=109$)⁸

Emotional intelligence is the driving force behind the factors that affect personal success and everyday interaction with others. It is the grass root of all intelligence dimensions. It provides individual with the ability to understand one's own emotions, managing it and understand other people emotions as well. The emotional intelligence of a child depends on the parental love and affection depending on the child's rearing practices and interaction.⁹

A descriptive study was done among 1563 secondary school students – male 826 and female 737 – in Oyo state, Nigeria to find the influence of emotional intelligence on academic achievements. Demographic information was collected using demographic data form and emotional intelligence behavioral inventory was used to collect the data. The result showed a significant correlation between academic achievement and emotional intelligence ($r=0.736$). The researcher also felt that there was a relationship between emotional intelligence and demographic factors such as location, parent's education etc.¹⁰

A descriptive study was done in Ibadan, Nigeria, among 500 senior secondary students between the ages 14-18 years to investigate the relationship among emotional intelligence, parental involvement, and academic achievement. Students' emotional intelligence and parents' involvement rating scale was used. The result showed that there was a positive and significant relationship of 0.318 between emotional intelligence and academic achievement. A positive and significant relationship of 0.326 also existed between parental involvement and academic achievement. The researcher felt that there is a positive relationship between emotional intelligence, parental involvement, and academic achievement.¹¹

Research also show that mother's education and income also affect the emotional intelligence of the adolescents. There also exists gender difference in emotional intelligence. Studies have shown that girls are more emotionally intelligent than boys.

An explorative study was done among 140 students between the ages 8-12 years from two English state primary schools in London to assess the relationship between emotional intelligence and socio-emotional outcomes in adolescents. Trait emotional intelligence



Glorious International Journal of Nursing Research (An International Peer-Reviewed Refereed Journal)

ISSN: 2583-9713

www.gloriousjournal.com

questionnaire – child form and standard progressive matrices were used to assess emotional intelligence and adolescents' abstract reasoning ability. An independent t-test revealed significant gender difference in trait emotional intelligence ($t=2.29$) with girls scoring higher than boys ($M=3.25$). The researcher also felt that emotional intelligence was positively related to overall peer-related social competence.¹²

Adolescence is particularly a difficult time and teenagers undergo many rites of passage, as well as having to deal with problems of living in a family and being of school. Coping resources during adolescence include those aspects of the self, for example, problem-solving skills, interpersonal skills, and the social environment like availability of supportive social network that facilitate or make possible successful adaptation to life stress.¹³

A study was conducted among 197 students of 18-25 years from various colleges of Pune, India, to assess coping and emotional intelligence. Emotional intelligence scale and ways of coping questionnaire were used as tools and Pearson's product moment correlation was used to find the relation between subscale of emotional intelligence and coping ($p=0.07$). The result revealed that emotional intelligence of the self was positively correlated with planful problem-solving, confronting coping, and positive reappraisal.¹⁴

Students who are emotionally competent will manage their own feelings well, recognize and respond effectively to the feelings of others, tolerate frustration better, and be less impulsive and more focused during adolescent transition period. Teaching young adolescents how to use coping strategies, how to acquire and use information, how to work with others, and how to manage personal growth are components necessary for transition success. Hence, the researcher being a nurse by profession felt that there is a need to assess the emotional intelligence in urban and rural schools. The theory of emotional intelligence provides framework for understanding the individual difference in managing emotions. The findings of the study may prove beneficial for school nurses, educators, parents, and counsellors for providing better knowledge about adolescents' social behavior and academic performance.

Materials and methods: To accomplish the objectives of the study, each group was adopted quasi experimental pre - test design. In this study target population were



adolescents in school. The accessible population in the study was 30 adolescent students who were studying in urban and rural schools at Bengaluru. In the present study, adolescent student who were studying in Urban and Rural schools were selected. In this study, sample size consisted of thirty (30) clients with joint intelligence. The sample was divided into two groups. 15 adolescent rural group (group 1) and remaining 15 adolescents' urban group (group 2). For the present study, non- probability purposive sampling technique was used to select 30 adolescent students. The instrument used was Demographic proforma, to assess the level of intelligent. The investigator observed each sample by using signs and symptoms which was mentioned in intelligence checklist and put a tick mark in the space against the present symptoms. The instrument was developed in English after an extensive review of literature and experts' opinion.

Description of the Tool

The tool for data collection consists of the tool for demographic proforma and level of intelligent.

The instrument consists of two sections

Section 1: Demographic variables

The tool constructed to collect the background data of the study subjects and to identify the influence of sample characteristics with the development of level of intelligent. Demographic proforma consist of 3 items includes age, education, area of living,

Section 2: Structured knowledge questionnaire: To obtain content validity of the tool, the prepared tool with Objectives

- Operational definitions, hypotheses, inclusion and exclusion criteria,
- Data collection procedure and criteria checklist was submitted to 13 experts, who were chosen on the basis of their clinical experience and interest in the present study.

The consent was obtained from the study participants and assurance was given to them that confidentially would be maintained throughout the study. It was established using



rater inter rater method and calculated by Spearman's co relation coefficient. The ' $r_{(s)}$ ' value was 0.89 hence the tool value was found to be highly reliable.

Scoring procedure:

In 30 samples, 15 were assigned in Group 1 and group 2 using non probability purposive sampling technique. The demographic data, observes each sample by using signs and symptoms which is mentioned in intelligence checklist and put a tick mark in the space against the present symptoms.

Total score was divided as 'Agree' and 'Disagree' column (tick mark) and comments in remarks and suggestion column regarding accuracy, relevance and appropriateness.

Validity of the tool was obtained from experts. Their valuable suggestions were taken into consideration and corrections were made accordingly. The tool was found to be valid.

The comparative assessment was developed based on the review of the related research, literature, objective of the study and analysis of the obtained data.

The following step were adopted in study:

- Assessment of EI among adolescent in urban and rural school using scale.
- Compare emotional intelligence among adolescent in urban and rural school.
- Find out the association between EI among adolescent in urban and rural adolescent and selected demographic variables.

Description of the structured emotional intelligence:

The structured emotional intelligence was titled as "comparative study to assess the emotional intelligence among adolescents in selected urban and rural schools".

Interaction, mutual goal setting, pre-test assessment, transaction, perception, action, judgement.

Emotion measured by SSREIT test. This test involves understanding emotions and to regulate emotion to promote personal growth.

The data obtained was analyzed by both descriptive and inferential statistics, on the basis of objectives and hypothesis of the study.

Section I: Description of sample characteristics



Glorious International Journal of Nursing Research (An International Peer-Reviewed Refereed Journal)

ISSN: 2583-9713

www.gloriousjournal.com

Section II: Assessment of pre and post level of intelligence scores in both the groups.

Section III: Comparison of rural and urban adolescents.

Section IV: Association between the pre-test level of intelligent with selected demographic variables

Section I: Description of Sample Characteristics

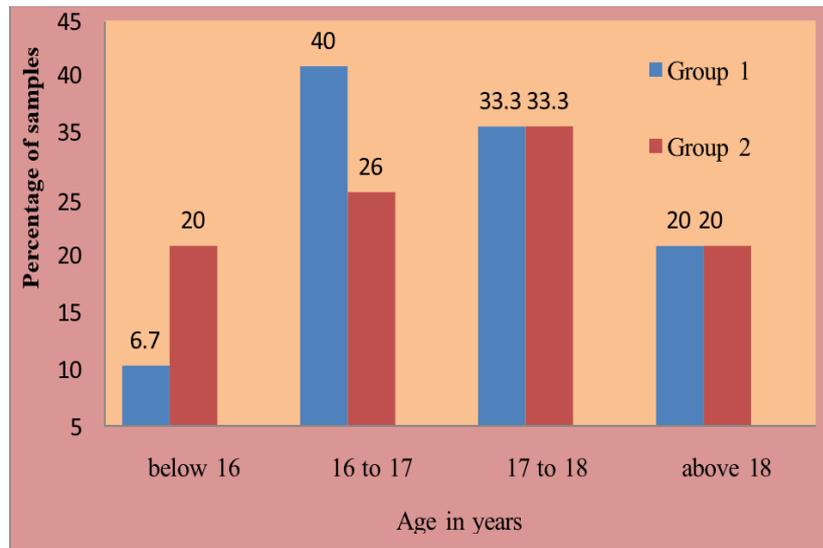
This section deals with the analysis and interpretation of the data of the sample with regard to age, education, area of living. The data has been analyzed and presented in terms of frequency and percentage.

Frequency and percentage distribution of samples with reference to the sample characteristics

(n =15)	Frequency	Percentage	frequency	Percentage
	(f)	(%)	(f)	(%)
Age (in years)				
a. below 16	1	6.7	3	20
b.16 to 17	6	40.0	4	26
c.17 to 18	5	33.3	5	33.3
d. above 18	3	20.0	3	20

Education

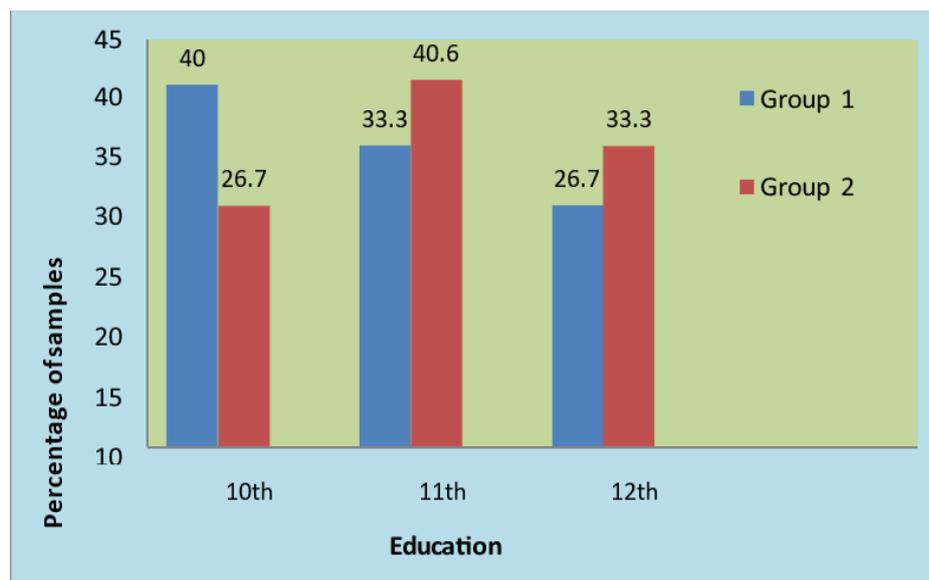
a.10 th	6	40	4	26.7
b.11 th	5	33.3	6	40.6
c.12 th	4	26.7	5	33.3
Area of living				
a. Rural	6	40	5	33.3
b. Urban	9	60	10	66.7
c. Semi urban	0	0	0	0
d. Semi-rural	0	0	0	0



Bar graph representing frequency and percentage distribution of samples according to age

Bar diagram showing the distribution of samples according to age

Above bar diagram depicts that most of samples in Group 1, 40.0%(6) were within in the age group of 17 -18 years,33.3%(5) were between the age group of 16 to 17 years ,20.0% (3) were above 18 years and only 6.7% (1)were below 16 years whereas in Group 2, 33.3% (5)were within in the age group of 17 to 18 years,26%(4) were between 16 to 17 years, and each 20% (3)were below 16 years and above 18 years respectively.



Bar graph representing frequency and percentage distribution of samples according to Education



Bar diagram showing the distribution of samples according to education

Above diagram depicts that most of samples in group 1 that is 40.0% (6) had education up to 10th, 33.3%(5) had up to 11th education and 26.7% (4) were upto 12th whereas in group 2 most of the samples 40.6%(6) were upto 11th education ,33.3%(5) upto 11th grade and 26.7%(4) 10th grade.

Assessment of pre and post level of intelligence score in Group 1 and Group 2

Table 2: Mean, standard deviation, mean percentage and mean difference of level of intelligence scores

n=30

Groups	Mean (Pre-test)	Standard Deviation (Pre-test)	Mean Percentage (Pre-test)	Mean (Post-test)	Standard Deviation (Post-test)	Mean Percentage (Post-test)	Mean Difference
Group 1 (n=15)	13.47	3.04	100%	0.47	0.74	3.49%	-13.00
Group 2 (n=15)	14.00	3.11	100%	0.53	0.64	3.79%	-13.47

In Group 1, the mean post-test score (0.47±0.74) was significantly lower than the pre-test score (13.47±3.04), showing a reduction of intelligence by 13.00 points.

In Group 2, the mean post-test score (0.53±0.64) was also lower than the pre-test score (14.00±3.11), indicating a reduction of 13.47 points.



Table 3: Frequency and Percentage Distribution of Grading the Pre-test Level of Intelligence Score

n=30

Grading (Score)	Group 1 (n=15)				Group 2 (n=15)			
	f	%	f	%	f	%	f	%
No level of intelligence (0)	0	0	10	66.7	0	0	8	53.3
Poor (1-8)	0	0	5	33.3	0	0	7	46.7
Moderate (9-16)	12	80.0	0	0	11	73.3	0	0
Good (17-24)	3	20.0	0	0	4	26.7	0	0

The data shows that in the pre-test, 80% of the participants had a moderate level of intelligence, while 20% had a poor level of intelligence. Additionally, 66.7% of the participants displayed no intelligence, and 33.3% had a mild level of intelligence. This indicates a decline in the overall intelligence levels.

Table 4: Table: Comparison of Mean Intelligence Scores and t-test Values for Group 1 and Group 2

Groups	Pre-test Mean (\pm SD)	Post-test Mean (\pm SD)	Mean Difference	t-value	Table Value (df=14)	p-value
Group 1	13.47 \pm 3.04	0.47 \pm 0.74	13.00	19.86*	t14 = 1.76	p < 0.05
Group 2	14.00 \pm 3.11	0.53 \pm 0.64	13.47	19.95*	t14 = 1.76	p < 0.05

***Significant at 0.05 level.**



Glorious International Journal of Nursing Research

(An International Peer-Reviewed Refereed Journal)

ISSN: 2583-9713

www.gloriousjournal.com

The data presented in the table illustrates a comparison of the mean intelligence scores in both Group 1 and Group 2 before and after the intervention, along with their respective t-test values.

In **Group 1**, the pre-test mean intelligence score was 13.47 ± 3.04 , while the post-test mean score was significantly lower at 0.47 ± 0.74 , resulting in a mean difference of **13.00**. The calculated t-value ($t = 19.86$) is significantly higher than the table value ($t_{14} = 1.76$) at $p < 0.05$, indicating a statistically significant difference between the pre-test and post-test scores.

Similarly, in **Group 2**, the pre-test mean intelligence score was 14.00 ± 3.11 , and the post-test mean score decreased to 0.53 ± 0.64 , with a mean difference of **13.47**. The computed t-value ($t = 19.95$) also exceeds the table value ($t_{14} = 1.76$) at $p < 0.05$, suggesting a significant reduction in intelligence scores after the intervention.

Overall, the findings reveal a substantial decrease in intelligence scores in both groups following the intervention, and the high t-values in both groups confirm that this decrease is statistically significant at the 0.05 level.

Table 5: Comparison of Mean Intelligence Scores Between Group 1 and Group 2 Using Independent t-test

Groups	Mean (\pm SD)	Mean Difference	t-value	Table Value (df=28)	p-value	Significance
Group 1	0.47 ± 0.74	0.06	0.49	$t_{28} = 2.05$	$p > 0.05$	Not significant (NS)
Group 2	0.53 ± 0.64					

The table compares the mean intelligence scores between Group 1 and Group 2 using an independent t-test. Group 1 had a mean score of 0.47 ± 0.74 , while Group 2 had a slightly higher mean score of 0.53 ± 0.64 . The mean difference between the two groups was **0.06**. The computed t-value ($t = 0.49$) is less than the table value ($t_{28} = 2.05$) at $p > 0.05$, indicating that the difference between the groups is not statistically significant. Therefore, the results suggest that there is no significant difference in intelligence levels between the urban and rural groups.



Table 6: Association Between Pre-test Level of Intelligence and Selected Demographic Variables Using Chi-Square Test

Demographic Variables	Pre-test Intelligence Level		p-value	Significance
	< Median	≥ Median		
Age (in years)				
Below 16	4	10	1.34	p > 0.05
Above 18	9	7		
Education				
10th and Below	8	5	0.27	p > 0.05
11th and Above	5	12		
Area of Living				
Rural	6	5	0.89	p > 0.05
Urban	7	12		

df = 1, $\chi^2 = 3.84$; p > 0.05; NS = Not Significant

The table shows the association between pre-test intelligence levels (less than or greater than or equal to the median) and selected demographic variables (age, education, and area of living) using the chi-square test. The computed chi-square values for **age** ($\chi^2 = 1.34$), **education** ($\chi^2 = 0.27$), and **area of living** ($\chi^2 = 0.89$) were all less than the critical value ($\chi^2 = 3.84$) at **df = 1** and **p > 0.05**. Therefore, the results indicate no statistically significant association between the pre-test intelligence levels and any of the selected demographic variables. Hence, the null hypothesis (H_0) is accepted, and the research hypothesis (H_2) is rejected.

METHODS:

In the present study, an evaluative approach was selected, and a quasi-experimental pre-test design was adopted for both groups. The sample consisted of 30 adolescent students selected using a non-probability purposive sampling technique. The instruments used included a demographic proforma and an intelligence checklist to assess the level of intelligence. The investigator observed each sample, marking the presence of symptoms as indicated in the intelligence checklist.



The independent variables of the study were urban and rural schools, age, and gender, while the dependent variable was emotional intelligence. The data collection tool was designed to gather baseline information and accurately assess the level of intelligence. The tool consisted of two parts:

1. **Part-1:** Demographic Proforma
2. **Part-2:** Intelligence Level Assessment Checklist

A pilot study was conducted among six adolescents in a school in Bengaluru to assess feasibility and gather information for improving the project. The main study was conducted in selected schools in Bengaluru, with 30 samples divided equally into two groups (15 in Group 1 and 15 in Group 2). The samples were assigned using a non-probability purposive sampling technique, and the data was analyzed and interpreted using descriptive and inferential statistics.

ETHICAL CONSIDERATIONS:

The study was conducted after obtaining approval from the dissertation committee. Permission was obtained from the principals of the selected institutions in Bengaluru, and informed consent was secured from each participant before data collection. Participants were assured of anonymity and confidentiality.

MAJOR FINDINGS OF THE STUDY:

Findings Related to Demographic Profile of Participants:

- In **Group 1**, the majority (40.0%) of the samples were within the age group of 17–18 years, 33.3% were between 16–17 years, 20.0% were above 18 years, and 6.7% were below 16 years.
- In **Group 2**, 33.3% of the participants were aged 17–18 years, 26.0% were between 16–17 years, and 20.0% were either below 16 or above 18 years.
- Regarding education, 40.0% of **Group 1** were in 10th grade, 33.3% were in 11th, and 26.7% were in 12th grade. In **Group 2**, 40.6% were in 11th grade, 33.3% in 12th grade, and 26.7% in 10th grade.
- In **Group 1**, 60.0% lived in urban areas, while 40.0% lived in rural areas. Conversely, in **Group 2**, 66.7% lived in rural areas, while 33.3% lived in urban areas.



Findings Related to Assessment of Intelligence Scores:

- The mean intelligence score in **Group 1** (0.47 ± 0.74) was lower than the mean pre-test intelligence score (13.47 ± 3.04).
- Similarly, in **Group 2**, the mean post-test intelligence score (0.53 ± 0.64) was lower than the mean pre-test intelligence score (14.00 ± 3.11).
- In **Group 1**, 80% of the samples had moderate intelligence levels and 20% had poor intelligence levels during the pre-test. In the post-test, 66.7% had no intelligence level, and 33.3% had mild intelligence.
- In **Group 2**, 73.3% of the samples had moderate intelligence levels, and 26.7% had poor intelligence levels in the pre-test. In the post-test, 53.3% had no intelligence level, and 46.7% had mild intelligence.

Findings Related to Comparison Between Group 1 and Group 2:

- The obtained *t*-value ($t = 0.49$) was less than the table value ($t_{28} = 2.05$, $p > 0.05$) at the 0.05 level of significance. Therefore, the *t*-value was found to be not significant, indicating that both groups were equally effective in reducing intelligence levels.
- In **Group 1**, 80% of the participants had moderate intelligence and 20% had poor intelligence levels. In **Group 2**, 73.3% had moderate intelligence, and 26.7% had poor intelligence levels. Both rural and urban participants demonstrated nearly equal intelligence, with urban students performing slightly better.

Findings Related to the Association Between Pre-Test Intelligence and Demographic Variables:

- A positive correlation was found between age and pre-test intelligence scores, indicating that older adolescents tended to have higher intelligence scores.
- Adolescents from higher socioeconomic backgrounds tended to have higher intelligence scores.
- Adolescents from urban schools showed significantly higher pre-test intelligence scores than those from rural schools.



Testing of Hypotheses:

- **H1:** There will be a significant difference in emotional intelligence between adolescents from urban and rural schools.

The hypothesis **H1** is **accepted**, as there is a significant difference in emotional intelligence scores between adolescents from urban and rural schools. Findings showed that the mean score for **Group 1** was 0.47% and for **Group 2** was 0.53%. The computed *t*-value (0.49) was less than the table value ($t_{28} = 2.05, p > 0.05$), indicating a lack of significant difference between the two groups.

- **H2:** There will be a significant association between emotional intelligence and selected demographic variables in adolescents from urban and rural schools.

The hypothesis **H2** is **rejected**, as no significant association was found between pre-test intelligence levels and selected demographic variables. The results suggest that age, education, and area of living were not significantly associated with emotional intelligence scores among adolescents in urban and rural schools. The computed chi-square values were less than the table value at the 0.05 level of significance.

DISCUSSION:

The study selected a total of 30 adolescent samples, with 15 participants assigned to Group 1 and 15 to Group 2 using a non-probability purposive sampling technique. It was observed that in **Group 1**, 40.0% of the participants were within the age group of 17–18 years, 33.3% were between 16–17 years, 20.0% were above 18 years, and 6.7% were below 16 years. In **Group 2**, 33.3% were aged 17–18 years, 26% were between 16–17 years, and 20% were either below 16 or above 18 years.

The mean intelligence score for **Group 1** (0.47 ± 0.74) was lower than the mean pre-test intelligence score (13.47 ± 3.04). Similarly, in **Group 2**, the mean intelligence score (0.53 ± 0.64) was lower than the mean pre-test score (14.00 ± 3.11).

In **Group 1**, 80% of the participants had a moderate level of intelligence, and 20% had a poor level of intelligence during the pre-test. Post-test results revealed that 66.7% of the participants had no level of intelligence, and 33.3% had a mild level of intelligence. In **Group 2**, 73.3% of the participants had a moderate level of intelligence, and 26.7% had a poor level of intelligence in the pre-test. In the post-test, 53.3% had no intelligence level, and 46.7% had a mild level of



intelligence.

To determine the significance of the difference between pre-test and post-test intelligence scores, a paired *t*-test was conducted. In **Group 1**, the mean intelligence score (0.47 ± 0.74) was significantly lower than the mean pre-test score (13.47 ± 3.04), with a *t*-value of 19.86, which is greater than the table value ($t_{14} = 1.76, p < 0.05$). This indicates a significant reduction in intelligence scores.

An independent *t*-test was conducted to compare the intelligence levels between **Group 1** and **Group 2**. The mean scores were 0.47 ± 0.74 for **Group 1** and 0.53 ± 0.64 for **Group 2**. The computed *t*-value ($t = 0.49$) was less than the table value ($t_{28} = 2.05, p > 0.05$), indicating no significant difference between the two groups. This suggests that both groups had comparable levels of intelligence.

The chi-square test was used to determine the association between the pre-test intelligence levels and selected demographic variables. The computed chi-square value for all variables (age, area of living) was less than the table value ($df = 1, \chi^2 = 3.84, p > 0.05$). Specifically, the chi-square value for age was $\chi^2 = 1.34$, and for area of living was $\chi^2 = 0.89$. As a result, the null hypothesis (H_0) was accepted, and the research hypothesis (H_4) was rejected, indicating no significant association between pre-test intelligence levels and demographic variables.

HYPOTHESES TESTING:

1. **H1: There will be a significant difference in emotional intelligence among adolescents from urban and rural schools.**
 - The hypothesis **H1** is **accepted**. There was a significant difference in the emotional intelligence scores between adolescents from urban and rural schools. The findings showed that the mean scores for **Group 1** and **Group 2** were 0.47% and 0.53%, respectively. The computed *t*-value ($t = 0.49$) was less than the table value ($t_{28} = 2.05, p > 0.05$) at the 0.05 level of significance, confirming the difference in emotional intelligence.
2. **H2: There will be a significant association between emotional intelligence and selected demographic variables among adolescents in urban and rural schools.**
 - The hypothesis **H2** is **rejected**. There was no significant association between



Glorious International Journal of Nursing Research (An International Peer-Reviewed Refereed Journal)

ISSN: 2583-9713

www.gloriousjournal.com

pre-test intelligence levels and selected demographic variables (such as age, education, and area of living) among adolescents in urban and rural schools. The chi-square value for age, education, and area of living was less than the table value at the 0.05 level of significance.

CONCLUSION:

The study aimed to assess emotional intelligence among adolescents in selected urban and rural schools in Bengaluru. The investigator focused on the level of intelligence in both groups. The following conclusions were drawn from the results:

- In the pre-test, 80% of the participants had a moderate level of intelligence, and 20% had a poor level of intelligence. In the post-test, 66.7% had no intelligence level, and 33.3% had a mild level of intelligence. This indicates a reduction in intelligence levels.
- An independent *t*-test was computed to compare intelligence levels between **Group 1** and **Group 2**, and it was found to be significant.
- A chi-square test was used to assess the association between pre-test intelligence levels and selected demographic variables, including age ($\chi^2 = 1.34$), education ($\chi^2 = 0.27$), and area of living ($\chi^2 = 0.89$). The chi-square values were less than the table values, indicating no significant association between pre-test intelligence levels and these demographic variables at the 0.05 level of significance.

Hence, there was no association between pre-test intelligence levels and demographic variables such as age, education, and area of living.

IMPLICATIONS:

Emotional intelligence plays a crucial role in nursing practice, enabling nurses to handle challenging work environments and difficult clients more effectively. The study highlights that nurses from urban areas, who tend to exhibit higher emotional intelligence, may be better equipped to manage the complexities of nursing practice. In terms of nursing education, the findings suggest that incorporating emotional intelligence and soft skills into nursing curricula is essential for adequately preparing nurses for the evolving demands of society. By upgrading the curriculum to focus on emotional intelligence, nursing education can be enhanced, ultimately benefiting nursing practice. Furthermore, in nursing administration, emotional



Glorious International Journal of Nursing Research (An International Peer-Reviewed Refereed Journal)

ISSN: 2583-9713

www.gloriousjournal.com

intelligence aids nurses in becoming more effective administrators, leading to improved self-management and better team coordination. This not only contributes to a more positive work environment but also results in higher quality of care. Additionally, emotional intelligence presents broad research opportunities within the field of nursing. Studies concentrated on emotional intelligence could enhance training programs for nursing students, thereby improving their competency and, in turn, elevating the overall quality of nursing practice.

LIMITATIONS OF THE STUDY:

- The small sample size of 30 adolescents limits generalizability.
- The study was conducted in a single setting.

RECOMMENDATIONS:

1. A similar study could be replicated with a larger sample and in different settings to validate the findings.
2. Further research could focus on the occurrence of emotional intelligence levels in different populations.

ACKNOWLEDGEMENTS:

I express heartfelt gratitude to **Brite Group of Institutions** for providing me the opportunity to pursue my postgraduate studies. Special thanks to **Viji C**, Principal of Brite College of Nursing, for his support and supervision. I am deeply thankful to my guide **Prof. Arjun Bhaskar**, HOD of Psychiatric Nursing, for her guidance and encouragement throughout the study.

I am grateful to the **Brite Institute staff**, my parents **Mr. Bharat Thakur and Mrs. Kalawati Thakur**, and my husband **Mr. Animesh Banerjee** for their constant support. My sincere appreciation goes to my sister **Anjali Suman** for her prayers and blessings, and my classmates and friends for their assistance. Finally, I extend my gratitude to **Mrs. Asha Latha S**, HOD of Community Nursing at SEA College, for her support throughout this journey.

REFERENCES:

1. AABRI. (n.d.). *A study on sources of stress among college students in Taiwan*. Retrieved from <http://www.aabri.com/manuscripts/10471.pdf>



Glorious International Journal of Nursing Research

(An International Peer-Reviewed Refereed Journal)

ISSN: 2583-9713

www.gloriousjournal.com

2. India Online Pages. (n.d.). *Population of India: Karnataka population 2011*. Retrieved from <http://www.indiaonlinepages.com/population/karnatakapopulation.ht>
3. American Psychological Association. (2009, November 23). *APA stress survey: Children are more stressed than parents realize*. Practice update. Retrieved from <http://www.apapracticecentral.org/update/2009/11-23/stress-survey.aspx>
4. Badran, A., & Saad, S. (2011). Emotional intelligence and demographic differences among students in public universities. *Research Journal in Organizational Psychology and Educational Studies*, 1(2), 93-94.
5. Smith, R., & Handler, L. (2007). *The clinical assessment of children and adolescents: A practitioner's handbook*. New York: Routledge.
6. Goleman, D. (2007). Emotional intelligence, coping, and psychological distress. *Electronic Journal of Applied Psychology*, 3(1), 39-54.
7. Tiwari, S., & Rani, M. (2007). Self-concept, emotional maturity, and achievement of adolescent children of employed and homemaker mothers. *Journal of Indian Academy of Applied Psychology*, 33(1), 103-110.
8. McGowan, S. (2002). The importance of emotional intelligence during transition into middle school. *Middle School Journal*, 33, 55-58.
9. Harrod, N. R. (2011). An exploration of adolescent emotional intelligence in relation to demographic characteristics. *Adolescents*.
10. Chandari, L. (2007). Adolescents' health and human rights concerns. *Health Action*, 32-34.
11. Olusola, O. (2006). Relationship among emotional intelligence, parental involvement, and academic achievement of secondary school students in Ibadan, Nigeria. Retrieved from <http://www.usca.edu/essay/volt182006/tellal.pdf>
12. Parker, J. D. A., & Stough, C. (2009). Exploring the relationship between trait emotional intelligence and objective socioeconomic outcomes in childhood. *British Journal of Educational Psychology*, 79, 259-272.
13. Sharma, K. (2008). Perceived emotional intelligence and ways of coping among students. *Journal of Indian Academy of Applied Psychology*, 39(1), 83-91.
14. Sharma, S. K. (2011). *Nursing research and statistics*. New Delhi: Elsevier India Private Limited.