

Journal of legal and social studies

Issn: 2507-7333

Eissn: 2676-1742

The Level of Emotional Intelligence and Its Relationship to the Level of Psychological Burnout: with Gender- and Experience-Related Differences among Psychologists Treating Children with Autism Spectrum Disorder: A Field Study at 'Drid Hussein' Hospital in Algeria

Kebal Khaled^{1*}, Makhlouf Sadjia²

¹University of Algiers 2, Laboratory of Clinical and Psychometric Psychology (Algeria), khaled.kebal@univ-alger2.dz

²University of Algiers 2, Laboratory of Analytical Anthropology and Psychopathology (Algeria), sadjia.makhlouf@univ-alger2.dz

Date of send: 04 / 09 / 2025	date of acceptance: 01 / 10 / 2025	Date of Publication: 01/12/2025
------------------------------	------------------------------------	---------------------------------

*** Corresponding author**

Abstract:

This study aims to examine the levels of both emotional intelligence and burnout among clinical psychologists working with children diagnosed with autism spectrum disorder, given the high professional and emotional demands inherent in this field. The research further seeks to determine the nature of the relationship between these two variables and to explore differences according to gender and years of professional experience. To this end, the study employed a descriptive-correlational methodology, utilizing a personal data questionnaire, the Mayer–Salovey Emotional Intelligence Scale, and the Maslach–Jackson Burnout Inventory, both adapted to the Algerian context.

The purposive sample consisted of 100 psychologists (27 males and 73 females), aged between 25 and 54 years, with varying levels of professional experience, all of whom were either employed in or undergoing training at the Child Psychiatry Department of Drid Hussein Hospital in Algiers. The findings revealed that participants exhibited a moderate level of emotional intelligence and a high level of burnout. Moreover, a strong and statistically significant negative correlation was observed between the two variables. Gender-based analysis indicated that female participants outperformed their male counterparts in emotional intelligence, while no significant differences emerged in levels of burnout. Regarding professional experience, psychologists with fewer than five years of practice demonstrated higher emotional intelligence, whereas those with longer experience reported greater levels of burnout.

Keywords: Emotional Intelligence; Burnout; Autism Spectrum Disorder; Psychotherapist

Introduction

Professionals in the special education domain must demonstrate superior psychological competencies to work with children diagnosed with Autism Spectrum Disorder (ASD). The nature of this work requires continuous and intense dedication because practitioners must address prolonged therapeutic periods and challenging behavioral patterns. Advanced emotional competencies serve as necessary tools for professionals to deliver their clinical and educational duties effectively.

Emotional intelligence stands as one of the essential competencies which professionals must develop. Emotional intelligence surpasses basic emotional theory because it involves practical abilities which include self-awareness of emotions together with emotional control and understanding of others' feelings and effective use of these abilities to handle professional challenges and generate appropriate decisions.

Professionals working with children diagnosed with ASD face elevated challenges that exceed those experienced by specialists who work with children without developmental disorders. The elevated requirements of this field create negative effects on professional adaptation. Specialists sometimes encounter difficulties in delivering their duties properly because they face various stressors that stem from their interactions with children and families as well as their teamwork with colleagues and hospital or educational center communications and their involvement with special education institutions. The high levels of professional demands within this field create additional challenges.

Given this accumulation of psychological and occupational stressors, many providers of psychological and social services experience a range of emotional and psychological difficulties. Consequently, terms such as anxiety, tension, lack of motivation, low self-esteem, diminished job satisfaction, and burnout have become common and frequently used, even among the professionals themselves, including male and female psychologists alike.

Study Problem

Work in the field of psychology—particularly within special education—requires considerable additional effort from practitioners, especially clinical psychologists. These professionals encounter challenges and pressures that often exceed those faced by teachers or therapists working with typically developing children, which may in turn negatively affect their psychological well-being and level of professional adjustment.

Clinical practice establishes benevolent neutrality as both an ethical foundation and a methodological framework. The approach demands professionals to demonstrate both openness and respect along with maintaining proper professional distance.¹ defined this stance as “evenly suspended attention” (attention flottante) and benevolent neutrality because it establishes a secure setting for patients to express themselves. Maintaining proper balance between emotional involvement and professional detachment needs high emotional intelligence abilities which Goleman (1995)² defines as:

- Self-awareness: Psychologists must understand their own emotional responses and recognize how their feelings affect others.
- Emotional regulation: One’s ability to control personal emotional reactions during high-stress situations.
- Empathy: The capability to comprehend what others feel while avoiding excessive emotional involvement or critical assessments.
- Social skills: Establishing a therapeutic relationship grounded in trust and respect.

Yet, practicing benevolent neutrality while maintaining constant emotional vigilance may result in accumulating stress, particularly when working with populations requiring intensive care, such as children with autism spectrum disorder (ASP) or individuals with chronic conditions. These stresses increase the likelihood of developing what is commonly referred to as burnout—a state of emotional exhaustion, loss of motivation, and professional fatigue, as described by Maslach and Jackson (1981).³

Herbert Freudenberger (1980)⁴ was the first to identify the phenomenon of burnout through his study of stress responses among professionals in service-oriented fields such as teaching, medicine, and nursing. He defined it as “a state of emotional depletion or physical exhaustion resulting from excessive stress, reflecting negative changes in an individual’s relationships and attitudes toward others due to overwhelming emotional and psychological demands.”

The clash of high-pressure professions generates feelings of intense and persistent stress in individuals, leading to a loss of interest and diminished commitment, both of which contradict the original motivations of the worker. These feelings manifest across three dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment.⁵

Among such high-pressure professions are service-related fields, such as medicine and nursing, which, according to Zeynep Merve Ünal (2014),⁶ are

among the most vulnerable to burnout due to the constant demands of the job and the intensive interaction with patients. These challenges necessitate the acquisition of specific skills to regulate emotions and maintain performance quality.

Santos (2024)⁷ emphasizes that, in recent years, the profession of behavior analysis and psychological support has been associated with elevated levels of stress and emotional exhaustion. This phenomenon can be explained by the nature of the work, which involves intensive engagement with individuals experiencing severe disorders, extended treatment periods, and the complex behavioral challenges practitioners face. This may explain why Battal (2015) highlighted the need for clinical psychologists working in therapeutic contexts to develop emotional intelligence, thereby enabling them to cultivate emotional self-awareness, regulate their feelings, and ultimately ensure professional effectiveness.

In a study conducted on a sample of 152 specialists across 13 Algerian provinces, the researcher observed that participants exhibited high averages in various dimensions of emotional intelligence, particularly in empathy, emotional regulation, and social communication, with relatively lower scores in emotional knowledge. No significant differences emerged based on gender or age. The researcher attributed this to the clinical training process itself, which inherently prepares practitioners to manage emotions and to monitor their own personal development throughout practice. She further advocated for the integration of emotional skills into ongoing university curricula and emphasized the importance of implementing psychological supervision for clinical practitioners.⁸

This raises important questions regarding the situation of clinical psychologists treating children with ASD in the Child Psychiatry Department at Drid Hussein Psychiatric Hospital, El Kouba, Algiers. This also applies to psychologists from various health institutions, hospital departments, and psychopedagogical centers in neighboring provinces, who had attended a training internship on the TEACCH program (Treatment and Education of Autistic and Related Communication Handicapped Children), a method used in the care of children with ASD, under the supervision of Professor Ould Taleb, a child psychiatry specialist.

Accordingly, the research questions are defined as follows:

- Is there a relationship between the level of emotional intelligence and the level of burnout among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algiers?
- Are there gender-based differences (male/female) in the level of emotional intelligence among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algiers?
- Are there gender-based differences (male/female) in the level of burnout among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algiers?
- Are there differences in the level of emotional intelligence among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algiers according to years of experience?
- Are there differences in the level of burnout among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algiers according to years of experience?

StudyHypotheses

In response to the research questions, the following hypotheses are proposed:

- A significant correlation exists between the level of emotional intelligence and the level of burnout among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria.
- Gender (male/female) plays a significant role in the emotional intelligence levels of clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria.
- There are notable gender-based differences in the levels of burnout among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria.
- The emotional intelligence levels of clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria vary significantly based on years of professional experience.
- Significant differences in burnout levels among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria are observed according to their years of professional experience.

StudySignificance

The importance of this study lies in the following:

- Providing a framework for understanding how clinical psychologists can balance the high emotional demands and occupational pressures of their work while maintaining professional adjustment and psychological well-being.
- Promoting awareness of the importance of mental health among professionals in helping professions, while highlighting the necessity of creating supportive work environments.
- Drawing researchers' attention to a pressing real-world issue that requires both scientific and academic engagement, in addition to official state-level interventions aimed at supporting and professionally empowering this category of practitioners.

Study Objectives

- To determine the levels of emotional intelligence and burnout among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria.
- To examine the relationship between emotional intelligence and burnout among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria.
- To identify the variables—namely gender and years of professional experience—that contribute to differences in emotional intelligence and burnout levels among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria.

Study Scope

The scope of this study is defined as follows:

- Thematic Scope: The present research is limited to examining the level of emotional intelligence and its relationship with the level of burnout among psychologists, considering these two constructs in their entirety, along with the investigation of differences related to gender and professional experience.
- Spatial and Temporal Scope: This study is confined to psychologists working with children diagnosed with ASD at the Child Psychiatry Unit of the “Drid Hussein” Psychiatric Hospital in Kouba, Algeria. It also includes psychologists coming to this unit from various neighboring provinces, as well as those working in pedagogical-psychological centers and hospital

services. Both psychologists who had previously completed or who were undergoing training placements on the TEACCH method for the education and treatment of children with ASD were included.

It is worth noting that the research process began in 2017 during the preparation of the master's thesis and continued through 2022 as part of the doctoral dissertation.

THE FIRST TOPIC: DEFINITION OF THE MAIN CONCEPTS OF THE STUDY

First requirement: Emotional Intelligence

According to Mayer and Salovey emotional intelligence includes the capability to recognize emotions precisely and to express them while also using them to enhance intellectual processes and emotional intelligence development through effective emotional regulation.⁹

The same emotional intelligence definition receives support from Othman and Rizq who explain it as the skill to observe and understand your personal emotions while maintaining clarity in emotional expression and emotional management based on observing others' emotional states. This ability enables the individual to establish positive emotional and social relationships, thereby fostering intellectual and professional development and facilitating the acquisition of further positive life skills."¹⁰

Second requirement: Operational Definition of Emotional Intelligence Level

In this study, emotional intelligence is operationally defined as the total score an individual achieves on the Emotional Intelligence Scale, which includes the following subcomponents: emotional awareness, emotion management, emotion regulation, empathy, and social communication. Accordingly, the overall score that a psychologist may obtain on this scale ranges from 58 to 290.

Third requirement: Burnout

Maslach and Jackson (1981) define burnout as "a state marked by depersonalization, emotional exhaustion, and a lowered feeling of personal accomplishment."¹¹

Maslach further characterizes burnout as "a psychological condition marked by a set of negative traits, including tension, instability, a tendency toward withdrawal, as well as negative attitudes toward work and colleagues."¹²

Jackson, in turn, defines it as “emotional and physical exhaustion, accompanied by dissatisfaction with oneself, others, and one’s work, along with loss of enthusiasm, lethargy, indifference, and diminished productivity”.¹³

Fourth requirement: Operational Definition of Burnout Level

This study quantifies burnout by the total score obtained by the psychologist on the Burnout Scale, encompassing its three dimensions: emotional exhaustion, depersonalization, and reduced personal accomplishment. The lowest score is 0, and the highest score is 132.

Fifth requirement: Autism

According to the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition,¹⁴ The American Psychiatric Association (APA) says that ASD is a neurodevelopmental disorder that starts early in life and is characterized by limited, repetitive, and stereotyped patterns of behavior, interests, and activities, as well as problems with communication and social interaction.

Similarly, the World Health Organization (WHO), in its International Classification of Diseases, 11th Revision,¹⁵ defines autism as: “a persistent deficit in reciprocal social interaction and communication, manifested in conjunction with a range of restricted and repetitive behavioral patterns, heightened or atypical sensory sensitivities, and varying degrees of intensity, frequency, and focus across development.”

THE SECOND TOPIC: REVIEW OF RELATED STUDIES

In recent years, there has been a notable increase in scholarly interest regarding the relationship between emotional intelligence and burnout among psychologists, particularly those working directly with patients in hospitals, rehabilitation centers, and various educational and social settings. Western research has long taken the lead in this field, followed by studies emerging from the Arab world. More recently, Algerian research has begun to address the existing gap, with efforts to account for the specificities of local contexts.

First requirement: Western Studies

First section: Study by Santos (2024)

In 2024, Eliam Santos conducted a field study in the United States that sought to explore the relationship between emotional intelligence, work stress, and burnout among a specialized group: Board-Certified Applied Behavior Analysts (BCBAs). The study employed a quantitative correlational design and

included a sample of 45 active practitioners certified by the Behavior Analyst Certification Board. This sample was characterized by diversity in gender, age, and ethnic background, as well as variation in professional experience, which ranged from less than five years to more than ten years.

Data were collected through an electronic survey consisting of three main instruments:

- an emotional intelligence scale that looks at things like self-awareness, emotional regulation, motivation, empathy, and social skills;
- a work stress scale that looks at how stressed people think they are at work; and
- the short form of the Maslach Burnout Inventory, which looks at emotional exhaustion, loss of motivation, and professional fatigue.

The results revealed that the relationship between emotional intelligence and burnout was weakly positive and approached, but did not reach, statistical significance. This suggests that higher emotional intelligence within the sample was not clearly associated with lower indicators of burnout. Furthermore, no significant relationship was found between emotional intelligence and work stress. However, comparative analyses indicated that less experienced analysts (0–5 years) reported higher stress levels than their more experienced counterparts.¹⁶

Second section: Study by Wahyuni et al. (2019)

In 2019, Wahyuni and colleagues conducted a study in Malang, Indonesia, aimed at examining the relationship between emotional intelligence, school climate, and burnout levels among school counselors. The sample included 250 counselors, selected from a population of 664 using proportional cluster sampling to ensure diversity in age, years of experience, and professional background. The majority of participants were women (198), and their varying ages and professional experiences provided a comprehensive representation of different subgroups.

The researchers employed three instruments to measure the study variables: an emotional intelligence scale based on Goleman's (2009) model; the School Climate Scale adapted from the U.S. National School Climate Center (2012); and a modified version of the Maslach Burnout Inventory for Human Services.

Findings indicated a clear negative correlation between emotional intelligence and burnout, as well as between positive school climate and burnout.

However, emotional intelligence emerged as the strongest factor in reducing symptoms of emotional exhaustion when compared to school climate.¹⁷

Third section: Study by Seyed Ehsan Samaei et al. (2017)

In 2017, Seyed Ehsan Samaei and his research team conducted a field study in Iran, aiming to examine how emotional intelligence and occupational stress interact in shaping burnout levels among nurses working in public hospitals in the city of Kerman.

The researchers did not limit themselves to assessing the effect of each variable separately; rather, they sought to present a more comprehensive picture of the interrelationships among them within a single causal model. To this end, they employed structural equation modeling (SEM). The study sample consisted of 300 participants (including nurses, supervisors, and department heads), selected through stratified random sampling across three major hospitals, thereby ensuring proportional representation for each hospital.

The study utilized four main instruments for data collection: a demographic and occupational questionnaire; the Maslach Burnout Inventory (MBI); the Schutte Self-Report Emotional Intelligence Test (SSREIT) in the Syber–Shiring version, which comprises five dimensions; and finally, the British Health and Safety Executive's (HSE) occupational stress scale, which measures seven core domains.

The findings revealed that the average level of emotional intelligence among nurses ranged between moderate and high. The highest scores were recorded in social skills and social awareness, while the lowest were observed in self-motivation. The average occupational stress level reached 57.78%, with the domains of relationships and control identified as the most stressful, whereas role and change exerted the least stress. Regarding burnout, emotional exhaustion ranked first with an average of 66.91%, followed by reduced personal accomplishment, while depersonalization came last at 36.07%.

The analysis of structural modeling showed definite linkages between emotional intelligence and occupational stress and burnout with correlation values of -0.63 and -0.51 that demonstrate higher emotional intelligence leads to reduced stress and burnout levels. Occupational stress shows a strong positive relationship with burnout (0.49) which proves that elevated stress levels increase the chance of emotional exhaustion and depersonalization and decreased personal achievement. The model demonstrated that occupational stress functions as a partial mediator between emotional intelligence and burnout which shows that a

portion of emotional intelligence impact occurs through its ability to decrease work-related stress.

The researchers concluded that nurses with greater awareness of their own emotions, stronger self-regulation abilities, and more advanced social skills were better equipped to cope with the complex demands of the hospital work environment.¹⁸

Fourth section: Study by Zeynep Merve Ünal (2014)

Zeynep Merve Ünal carried out a field research in Turkey in 2014 with the goal of examining the connection between burnout symptoms among healthcare workers and emotional intelligence. The study aimed to ascertain if workers' emotional intelligence may help them feel more accomplished personally while also lowering emotional weariness and depersonalization (lack of empathy).

The study employed a descriptive correlational design. Data were collected using questionnaires distributed to 136 healthcare professionals (including physicians, assistants, trainees, and nurses) of both genders, with an average age of 32 years. Ünal utilized the short version of the Emotional Intelligence Scale (12 items), developed by Schan, which measures four dimensions: emotional appraisal, positive regulation, empathic sensitivity, and positive use of emotions. Additionally, the Maslach Burnout Inventory (MBI) was employed to assess burnout levels.

The results indicated generally high scores in empathic sensitivity, emotional appraisal, positive regulation, and personal accomplishment, whereas depersonalization was low and emotional exhaustion was moderate. Correlational analyses revealed that emotional appraisal and positive regulation were negatively correlated with emotional exhaustion and depersonalization, and positively correlated with personal accomplishment. A positive correlation was also observed between empathic sensitivity and personal accomplishment. Regression analyses demonstrated that emotional intelligence accounted for 23% of the variance in personal accomplishment, 10% in emotional exhaustion, and 3% in depersonalization. Stat. sig contributions emerged from emotional appraisal and positive regulation in reducing burnout, and from empathic sensitivity in enhancing accomplishment.

Ünal interpreted these findings to suggest that healthcare professionals who are able to accurately appraise their own emotions and those of others, and regulate their emotional responses in a positive manner, are more likely to maintain motivation and derive satisfaction from their work. This, in turn, reduces

the likelihood of emotional exhaustion and loss of empathy, while improving the quality of their interactions with patients and colleagues. She further emphasized that such skills can be cultivated through training, making them a crucial foundation for institutional interventions aimed at promoting occupational health.¹⁹

Second requirement: Arab Studies

Study by Naglaa Fathi Mohamed Al-Attar, Farida El-Sayed Abdel-Qawi Othman, and Huda Abdel-Moati Mahmoud (2023)

This study, conducted in Egypt in 2023, aimed to examine the impact of a training program based on emotional intelligence on three primary variables among nurses working in mental health care: burnout, psychological capital, and job performance. The research was guided by the hypothesis that a higher level of emotional intelligence among nurses enhances their ability to cope with occupational stress, reduces the likelihood of experiencing burnout, boosts morale, and improves professional efficiency.

The researchers employed a quasi-experimental design with pre-test and post-test measures for the same group in order to assess the changes brought about by the intervention. The experiment was carried out at the Mental Health Hospital in Benha. The sample consisted of 60 psychiatric nurses who were deliberately selected based on specific criteria, including direct work with patients exhibiting psychological symptoms, full-time employment, and no prior participation in similar training programs.

Five instruments were used for data collection: a personal and demographic information form; the Wong and Law Emotional Intelligence Scale; the Maslach Burnout Inventory; the Psychological Capital Scale; and the Schweirian Job Performance Scale.

The results of the study revealed a significant improvement in emotional intelligence among participants following their engagement in a training program. Specifically, emotional intelligence increased from a moderate to a high level in 72% of the sample, accompanied by a notable reduction in burnout indicators, particularly in the dimension of emotional exhaustion. Moreover, levels of psychological capital increased across all of its dimensions, and the proportion of nurses demonstrating high performance doubled. Additionally, statistical analysis showed a negative link between emotional intelligence and burnout and a strong positive correlation between psychological capital, performance levels, and emotional intelligence.²⁰

The study concluded that training programs aimed at enhancing emotional intelligence among psychiatric nurses contribute to reducing psychological stress and mitigating burnout, while simultaneously fostering motivation, competence, and professional performance quality.

Third requirement: Algerian Studies

First section: Study by Saqtani (2023)

The purpose of this study was to investigate levels of burnout and psychological hardiness among clinical psychologists working in institutions dedicated to individuals with special needs, as well as to examine the relationship of these two variables with certain demographic factors, including age, gender, seniority, marital status, and educational qualification.

The researcher employed a descriptive correlational design, applying Maslach's Burnout Inventory and Imad Mukhaimar's Psychological Hardiness Scale to a sample of 50 practicing clinical psychologists working in specialized institutions for individuals with special needs in the provinces of Constantine and Oum El Bouaghi.

The main findings were as follows:

- No significant correlation was found between burnout and psychological hardiness among the psychologists working in these institutions.
- The participants demonstrated a low level of burnout.
- The participants demonstrated an above-average level of psychological hardiness.
- No significant differences in burnout or psychological hardiness were observed based on years of professional experience.
- No significant differences in burnout or psychological hardiness were observed based on the institution in which participants were employed.²¹

Second section: Study by Battal Hanan (2015)

The study, entitled "Emotional Intelligence among Practicing Clinical Psychologists", was conducted by Battal Hanan in 2015. The researcher began from the premise that a clinical psychologist working in therapeutic practice requires emotional self-awareness in order to regulate emotions and thereby achieve professional effectiveness.

The researcher employed a descriptive methodology. The sample consisted of 152 clinical psychologists distributed across 13 Algerian provinces.

Participants were administered the Emotional Intelligence Scale developed by Farouk Othman (2002). The findings indicated generally high averages among the sample, particularly in empathy, emotional regulation, and social communication, with the lowest average recorded in emotional knowledge. No stat. sig differences were found based on gender or age.

The researcher emphasized that clinical training by its very nature continuously equips the psychologist to confront emotions and monitor self-development throughout professional practice. She further recommended the integration of emotional skills into continuous university-level training, alongside the activation of psychological support for practitioners—especially those working in departments with high emotional contagion.²²

Fourth requirement: Common Key Findings

- Emotional intelligence often plays a protective role against burnout and occupational stress, though its strength varies depending on the profession and context.
- High-stress professions (e.g., medicine, nursing, behavior analysis, psychological assistance) require training programs that target self-awareness, emotional regulation, and empathy.
- Organizational factors (such as professional experience, institutional climate, and administrative support) may influence the relationship between emotional intelligence and burnout.

First section: Synthesis

Based on the studies reviewed, it can be concluded that working in specific fields—such as psychological assistance and special education—requires more than training, preparation, or conventional cognitive intelligence. It demands a distinct form of intelligence that enables practitioners to resist psychological pressures and manage the challenges inherent to such specialized domains. This form of intelligence is emotional (or affective) intelligence, which constitutes one of the key indicators of psychological well-being. This is the dimension our field study seeks to examine in greater depth.

THE THIRD TOPIC: The Field Aspect of the Study

This section presents the methodological procedures of the study, including the study population and sample, data collection instruments, and statistical methods used in data analysis. It also provides a presentation and interpretation of the study's findings.

First requirement: Methodological Procedures

First section: Study Methodology

The present study employed the descriptive correlational method, as it was deemed the most appropriate for examining the relationship between the study variables. This method allows for a quantitative description of the degree of association between variables, as well as the identification of the type and strength of these correlations. It was further adopted to assess the levels of both emotional intelligence and burnout among psychologists working with children diagnosed with ASD within the sample, and to examine differences in these levels according to gender and years of professional experience.

Second section: Study Population

The study population consisted of all psychologists treating children with ASD at the Child Psychiatry Unit of the “Drid Hussein” Psychiatric Hospital in Kouba, Algiers, as well as psychologists from various healthcare institutions, hospital services, and pedagogical-psychological centers in neighboring provinces who attended this unit for training in the TEACCH method. These training programs, supervised by Professor Ould Taleb, a specialist in child psychiatry, were specifically designed for the care and education of children with ASD.

Third section: Study Sample

Given the difficulties associated with encompassing the entire study population—such as the absence of official statistics regarding the total number of psychologists who had benefited from training at this unit, the instability of incoming trainees, and the reluctance of some individuals to participate in the study—an effort was made to select a representative sample. The final sample consisted of 100 participants, both male and female, aged between 25 and 54 years, with professional experience ranging from 5 years to over 13 years. The sample was selected using a purposive sampling method.

The following table illustrates the composition of the sample according to gender:

Table (01): Composition of Sample Members by Gender

Gender	Frequency	Percentage (%)
Male	27	27%
Female	73	73%
Total	100	100%

The data presented in Table 01 show the composition of the study sample according to gender. It is evident that the majority of participants (73%) are female, while only 27% are male. This proportion reflects the social reality of the profession, as women tend to be more inclined to work with children, whether typically developing or those with special needs. Furthermore, psychology in general—and clinical psychology in particular—attracts more women than men, a trend observable both in university enrollment and in professional practice.

Table (02): Composition of Participants According to Years of Professional Experience

Years of Experience	F	P (%)
Less than 5 years	35	35%
6–12 years	34	34%
13 years and above	31	31%
Total	100	100%

The classification of experience into uneven categories was necessitated by the dispersion of the data, yet it accurately reflects reality. The results indicate that most practitioners in this field are relatively inexperienced: 35% have fewer than five years of experience, and 34% have no more than 12 years. Meanwhile, one-third of the sample reported between 13 and 24 years of experience. The relatively limited years of practice can be attributed to the fact that the profession of the psychologist—especially when working with children diagnosed with autism spectrum disorder—is still relatively young in Algeria. In addition, attrition plays a role, as many psychologists leave their positions to pursue other professional roles.

Fourth section: Data Collection Instruments

In this research, we utilized a series of methodologies for data collection, specifically:

- Personal and Demographic Information Form: This form is meant to collect information about the participants' age, gender, marital status, level of education, and years of work experience.
- The Emotional Intelligence Scale, created by Mayer and Salovey in 1997, was translated into Arabic and adjusted to fit the Arab culture by Othman and Rizq in 2001. The current researchers then made more changes to fit the Algerian context. A thorough evaluation of the scale's validity and reliability was conducted. The Cronbach's alpha coefficient was calculated to be 0.88, signifying a substantial degree of internal consistency. The

internal consistency method was used to check validity by looking at how the subscales and the total score were related. The correlation coefficients were between 0.73 and 0.88, which is statistically significant at the $\alpha = 0.01$ level. This shows that the results are valid and trustworthy.

- Maslach and Jackson (1981) created the Maslach Burnout Inventory, which the researchers then adapted to fit the Algerian context. The overall Cronbach's alpha coefficient was found to be 0.80, which shows that it is very reliable and almost perfectly correlated. We used the same method for internal consistency to check for validity, and the correlation coefficients were between 0.74 and 0.80, which was statistically significant at the $\alpha = 0.01$ level. This confirms that the results are very reliable and gives us confidence in the next ones.

Fifth section: Statistical Methods for Quantitative Data Analysis

The study hypotheses were tested using the SPSS. Percentages, frequencies, arithmetic mean, standard deviation (SD), Pearson's correlation coefficient, t-tests, and F-tests were among the statistical techniques used.

Second requirement: Presentation and Analysis of Results

In this section, the results are presented and discussed. Each variable will first be described independently, beginning with the independent variable (emotional intelligence), followed by the dependent variable (burnout). Finally, the main research hypothesis will be tested, namely the prediction of a stat. sig correlation between levels of emotional intelligence and burnout among psychologists working with children diagnosed with ASD. In addition, the study will explore the influence of two potential moderating variables—gender and years of professional experience—on emotional intelligence and burnout.

First section: Descriptive Results for Emotional Intelligence

Table (03): presents the descriptive data related to the variable of emotional intelligence

Variable	N	Mean	SD	Range	Maximum	Minimum
Emotional Intelligence	100	210.7	37.4	137	277	140

From Table 3, it appears that the arithmetic mean of emotional intelligence was 210.74, indicating a moderate level that tends to be relatively high. The SD was 37.39, reflecting considerable variability among participants in their level of emotional intelligence. The range was 137 points, calculated as the difference between the highest recorded score (277) and the lowest (140), which indicates a wide composition of scores among the clinical psychologists.

These results suggest the presence of substantial individual differences in psychologists' ability to understand and regulate their emotions, which may be associated with factors such as gender, years of experience, or academic training.

Second section: Presentation of Descriptive Results for the Burnout Variable

Table (04): Descriptive Statistics of the Burnout Variable

Variable	N	Mean	SD	Range	Maximum	Minimum
Burnout	100	78.17	21.9	73	113	40

From Table 4, it is observed that the arithmetic mean of burnout was 78.17, with a SD of 21.89. The highest score recorded was 113, while the lowest was 40, yielding a range of 73.

These findings indicate that the participants exhibited a relatively consistent expression of burnout, regardless of gender, years of experience, age, or marital status. This consistency reflects the clear presence of burnout among the sample, which can be attributed to the inherent difficulty of the profession itself—particularly when working with children diagnosed with ASD. Such work generates considerable psychological strain due to the specific demands of the profession, including sustained concentration, close monitoring, and continuous vigilance.

In contrast, the results related to emotional intelligence revealed greater variability in score composition across participants, whereas burnout scores displayed greater homogeneity.

Third section: Presentation and Analysis of the First Hypothesis

The first hypothesis states: “There is a stat. sig correlation between the level of emotional intelligence and the level of burnout among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algiers.”

Table (05): Correlation coefficient between emotional intelligence and burnout

Statistical Data	N	Pearson's <i>r</i>	Sig
Variables			
Emotional Intelligence	100	-0.79	Stat. sig at the 0.01 level ($\alpha = 0.01$)
Burnout	100		

The results presented in Table (05) indicate the existence of a strong, stat. sig correlation between emotional intelligence and burnout within the study sample. Pearson's correlation coefficient reached (-0.79) at a significance level of

($\alpha = 0.01$). This demonstrates a strong inverse relationship: higher levels of emotional intelligence are associated with lower levels of burnout, and vice versa.

This finding supports the first hypothesis of the study, which posited a stat. sig correlation between the two variables among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria.

This result can be explained by the fact that the possession of skills such as self-awareness, emotional regulation, empathy, and the ability to manage stress enhances professional resilience and reduces symptoms of psychological and emotional exhaustion. Moreover, these findings are consistent with those reported in the studies;^{23, 24, 25, 26}, all of which underscored the role of emotional intelligence as a protective factor in high-stress professional environments, particularly in healthcare, education, and special education fields.

Fourth section: Presentation and Analysis of the Results for the Second Hypothesis

According to the second hypothesis, there are notable variations in emotional intelligence levels. among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algeria, according to gender (male/female).

To test the validity of this hypothesis and determine the statistical significance of the differences in the mean scores of emotional intelligence within the study sample according to the variable of gender, an independent samples t-test was employed. Prior to this, Levene's test was applied to verify the homogeneity of the groups. The results of the differences according to this variable are presented in Table 6.

Table (06): Differences in the Mean Scores of Emotional Intelligence According to Gender

Variable	Gender	N	Mean	SD	df	t	Sig
EmotionalIntelligence	Male	27	204	38.17	98	2.86	Stat. sig at the 0.05 level ($\alpha = 0.05$)
	Female	73	227	29.64			
	Male	27	204	38.17			
	Female	73	227	29.64			

The results presented in Table (06) revealed stat. sig differences in the level of emotional intelligence among psychologists according to gender. Male participants (n = 27) obtained a mean score of 204 with a SD of 38.17, whereas female participants (n = 73) achieved a higher mean score of 227 with a comparatively lower SD of 29.64. The calculated t-value was 2.86 with 98 degrees

of freedom, which is stat. sig at the level of ($\alpha = 0.05$). These findings indicate that, within this sample, females outperformed males in emotional intelligence.

This outcome can be interpreted in light of prevailing social and cultural factors in Algerian society, where females are often socialized into roles that emphasize emotional expression, empathy, and awareness of others—qualities that facilitate the development of emotional intelligence skills. Furthermore, the nature of psychological work with children, particularly those diagnosed with ASD, requires a high capacity for emotional regulation, management of sensitive situations, and effective interaction with parents and colleagues. These skills appear to be more strongly developed among female practitioners.

These findings are consistent with several previous studies. For instance,²⁷ in Turkey²⁸ and in Iran reported a relative advantage for females in certain dimensions of emotional intelligence, such as empathy and social awareness, which are fundamental in helping professions. Similarly,²⁹ in Indonesia demonstrated a strong negative correlation between emotional intelligence and burnout among female educational counselors compared to their male counterparts. In the Arab context,³⁰ found that female nurses were more effective in utilizing emotional intelligence skills to reduce burnout and enhance performance. Likewise,³¹ study in Algeria indicated higher levels of empathy and emotional regulation among females, although the differences were not stat. sig across all dimensions.

These findings demonstrate that training programs for emotional intelligence must be developed for psychologists regardless of gender while considering individual differences among them. The quality of psychological and educational care demands emotional intelligence development because it directly influences special education and therapeutic interventions for children with ASD.

Fifth section: Presentation and Analysis of the Third Hypothesis

The third hypothesis establishes that "The statistical differences in burnout levels exist between male and female psychologists who treat children diagnosed with ASD at Drid Hussein Hospital in Algeria." An independent samples t-test functioned to evaluate both the hypothesis and statistical differences in burnout scores between psychologists of different genders. Levene's test for equality of variances was performed as the initial step to determine if the two groups maintained equal homogeneity. The resulting comparison data appears in Table 07.

Table (07): Differences in the Mean Scores of Burnout According to Gender

Variable	Gender	N	M	SD	df	t	Sig
Burnout	Male	27	73.66	21.27	98	-1.27	Not stat. sig
	Female	73	79.83	22.02			

Table 07 shows that the mean burnout score among male psychologists (n = 27) was 73.66 with a SD of 21.27, whereas the mean score for female psychologists (n = 73) was 79.83 with a SD of 22.02. The calculated t-value was -1.27 with 98 degrees of freedom, which was not stat. sig.

This result indicates that there are no stat. sig differences between males and females in burnout levels within this sample. One possible explanation is that both male and female psychologists face similar pressures and challenges in their work environment with children diagnosed with autism—a profession that demands intensive emotional and professional effort.

The absence of significant gender differences may further suggest that other factors—such as professional experience, institutional support, academic training, or psychological resilience—play a more substantial role in shaping burnout levels. Specifically in the Algerian context, stressors such as limited resources, administrative burdens, and societal expectations of psychologists (often reflected in the skeptical expression “Za‘ma psychologue?!”) may exert a stronger influence than gender distinctions.

Sixth section: Presentation and Analysis of the Fourth Hypothesis

The fourth hypothesis states: “There are stat. sig differences in the level of emotional intelligence among clinical psychologists treating children with ASD at Drid Hussein Hospital in Algiers, according to years of professional experience.”

To verify the validity of this hypothesis and determine the statistical significance of the differences between the mean scores of emotional intelligence according to years of experience, an F-test for independent samples and a single variable was employed, after first ensuring group homogeneity using ANOVA tables. The results of the analysis based on this variable are presented in Table 8.

Table (08): Differences between mean scores of emotional intelligence according to years of professional experience

Variable	Years of Experience	N	Mean	SD	df	F	Sig
EmotionalIntelligence	< 5 years	35	241	23.1	2	38,64	Stat. sig at the 0.05 level ($\alpha = .05$)
	6–12 years	34	207	32.9	97		
	> 13 years	31	180	27.78			

Total	100	210	37	
-------	-----	-----	----	--

The results in Table 8 show that there are stat. sig differences at the significance level ($\alpha = 0.05$). The value of the analysis of variance test (F) reached 38.64, with degrees of freedom ($df = 2$) for between-groups variance and ($df = 97$) for within-groups variance. This indicates that years of professional experience have a clear effect on the level of emotional intelligence.

A closer examination of the means reveals that the group with less than five years of experience ($n = 35$) achieved the highest mean score (241) with a SD of 23.11. This was followed by the group with moderate experience (6–12 years) ($n = 34$), which obtained a mean of 207 and a SD of 32.90. The lowest values were observed in the group with more than 13 years of experience ($n = 31$), whose mean score was 180, with a SD of 27.78.

The interpretation of these findings can be attributed to several factors. Less experienced specialists may display higher levels of enthusiasm and professional engagement, demonstrating greater commitment to applying newly acquired theoretical knowledge and skills in clinical and educational practice. Conversely, the accumulation of years of professional experience and the repeated exposure to occupational stressors may contribute to a decline in certain emotional regulation skills or a reduced frequency of their effective use—particularly in work environments that lack support programs or continuous professional development.

In the Algerian context, institutional pressures and resource shortages may amplify the impact of professional burnout among more experienced specialists. This may explain the noticeable decline in their emotional intelligence scores.

Based on these results, the fourth hypothesis—which posits that professional experience influences the level of emotional intelligence—is confirmed. Furthermore, these findings highlight the necessity of providing ongoing training and support programs for practitioners with extensive experience, in order to maintain high levels of emotional competencies and to enhance the quality of clinical and educational performance.

Seventh section: Presentation and Analysis of the Results for the Fifth Hypothesis

The fifth hypothesis asserts: The level of burnout among clinical psychologists at Drid Hussein Hospital in Algeria shows statistically meaningful variation depending on their years of professional experience when treating children with ASD. The validity of this hypothesis was tested through a one-way

ANOVA analysis to determine statistical differences in burnout mean scores among participants based on their years of experience. The homogeneity of groups was evaluated through ANOVA tables before this analysis. The results of the differences according to this variable are presented in Table (09): Differences in the Mean Scores of Burnout According to Years of Professional Experience.

Table (09): Differences between the Mean Scores of Burnout According to the Variable of Years of Experience

Variable	Years of Experience	N	Mean	SD	df	F	Sig
Burnout	< 5 years	35	56	14.5	2	79.5	Stat. sig at the 0.05 level ($\alpha = .05$)
	6–12 years	34	82	14.1	97		
	≥ 13 years	31	97	11.9			
Total	100	78	21.9				

Table (09) indicates stat. sig differences in the mean scores of burnout among the study sample according to years of professional experience, at the significance level of ($\alpha = 0.05$).

- Less experienced psychologists (fewer than 5 years of experience) recorded a mean burnout score of 56 with a SD of 14.46, representing the lowest level among the three groups.
- Moderately experienced psychologists (6 to 12 years of experience) scored higher, with a mean of 82 and a SD of 14.14.
- Highly experienced psychologists (13 years and above) exhibited the highest burnout level, with a mean of 97 and a SD of 11.92.

These results reflect a progressive increase in burnout levels with more years of experience, suggesting that the most experienced psychologists are more vulnerable to burnout compared to their less experienced colleagues. Several factors may account for this pattern:

- Accumulation of professional stress over time: Longer service periods lead to the buildup of stress and negative emotional experiences, particularly when dealing with complex, long-term cases such as ASD.
- Institutional limitations and routine workload: Senior professionals may experience feelings of monotony, insufficient motivation, or lack of recognition, all of which exacerbate symptoms of burnout.
- Contextual psychological challenges within the Algerian work environment: Cultural and systemic factors—such as limited resources,

insufficient psychological support programs, and the burden of family and social responsibilities—may amplify levels of exhaustion.

The statistical analysis confirmed the significance of these differences ($F = 79.45$, $df = 2/97$), thereby supporting the fifth hypothesis, which posits that years of experience significantly affect levels of burnout.

These findings highlight the necessity of implementing psychological support programs and training in stress management strategies for psychologists, particularly those who have been in the profession for extended periods.

Conclusion

The findings of this study yielded several important insights. It was found that psychologists working with children diagnosed with ASD at Drid Hussein Hospital in Algiers demonstrate a moderate level of emotional intelligence alongside a high level of burnout, with a strong negative correlation observed between the two variables. The results further revealed that female participants outperformed their male counterparts in emotional intelligence, while no significant gender differences were found in levels of burnout. Professional experience also proved to be a decisive factor: practitioners with fewer years of experience displayed higher levels of emotional intelligence, whereas those with longer experience reported greater burnout.

Based on these findings, the study recommends the systematic integration of regular training programs designed to enhance emotional intelligence skills within both university curricula and professional practice. Additionally, it emphasizes the need for psychological and institutional support mechanisms specifically targeting practitioners with extensive professional experience, in order to mitigate the cumulative effects of stress. The study also calls for the improvement of work environments through motivation, reduction of administrative burdens, and the development of continuous training units in stress management and emotional regulation. Such measures would promote mental health and strengthen the quality of both clinical and educational practice.

1-Freud, S., Advice to Doctors on the Psychoanalytic Treatment, in Complete Works, Psychoanalysis, Volume XII, Presses Universitaires de France, Paris, 1912, pp. 109-120.

2- Goleman, D.: Emotional Intelligence: Why It Can Matter More Than IQ, Bantam Books, New York, 1995.

3- Maslach, C., Jackson, S.: "The Measurement of Experienced Burnout," Journal of Occupational Behavior, Vol. 2, No. 2, 1981.

- 4- Freudenberger, H. J., Richelson, G.: *Burnout: The High Cost of High Achievement*, Anchor Press, Garden City, 1980.
- 5- Maslach, C., Jackson, S.: *Stress, Burnout, and Work Holism*, in R. R. Kilburg, P. E. Nathan, & R. W. Thoreson (Eds.), *Professionals in Distress: Issues, Syndromes, and Solutions in Psychology*, American Psychological Association, Washington D.C., 1986, pp. 53–75.
- 6- Ünal, Z. M.: “The Contribution of Emotional Intelligence on the Components of Burnout: The Case of Health Care Sector Professionals,” [Journal Name], Vol. 19, No. 2, 2014.
- 7- Santos, E.: *Relationship of Emotional Intelligence to Workplace Stress and Burnout in Behavior Analysts*, PhD Dissertation, University of St. Augustine for Health Sciences, 2024.
- 8- Battal, Hanan: *Emotional Intelligence among Practicing Clinical Psychologists*, Master’s Thesis, Kasdi Merbah University – Ouargla, Algeria, 2015.
- 9- Mayer, J. D., Salovey, P.: *What Is Emotional Intelligence?* in P. Salovey & D. Sluyter (Eds.), *Emotional Development and Emotional Intelligence: Educational Implications*, Basic Books, New York, 1997, p. 10.
- 10- Othman, Farouk El-Sayed, Rizq, Mohamed Abdel-Sami: “The Emotional Intelligence Scale: Its Concept and Measurement,” in Abdel-Hadi Abduh & Farouk El-Sayed Othman (Eds.), *Psychological Measurement and Tests: Foundations and Tools*, Dar Al-Fikr Al-Arabi, Cairo, 2002, p. 36.
- 11- Maslach, C., Jackson, S.: “The Measurement of Experienced Burnout,” *Journal of Occupational Behavior*, Vol. 2, No. 2, 1981, pp. 99–113.
- 12- El-Samadouni, El-Sayed Ibrahim: *Psychological Burnout among Special Education Teachers and Its Consequences*, *Journal of Contemporary Education*, April 1995, p. 2.
- 13- Ibid., p. 3.
- 14- American Psychiatric Association: *Diagnostic and Statistical Manual of Mental Disorders (DSM-5)*, 5th ed., American Psychiatric Publishing, Washington, D.C., 2014.
- 15- World Health Organization: *International Classification of Diseases, 11th Revision (ICD-11)*, WHO, Geneva, 2016.
- 16- Santos, op. cit.
- 17- Wahyuni, F., Wiyono, B. B., Atmoko, A., Hambali, I.: “Assessing Relationships between Emotional Intelligence, School Climate and School Counselors’ Burnout: A Structural Equation Model,” *Journal for the Education of Gifted Young Scientists*, Vol. 7, No. 4, 2019, pp. 1361–1374.
- 18- Samaei, S. E., Khosravi, Y., Heravizadeh, O. R., Ahangar, H. G., Pourshariati, F., Amrollahi, M.: “The Effect of Emotional Intelligence and Job Stress on Burnout: A Structural Equation Model among Hospital Nurses,”
- 19 Ünal, op. cit
- 20- Elattar, N., Osman, F., Mahmoud, H.: “Effect of Emotional Intelligence Based Training Program on Burnout, Psychological Capital and Job Performance among Psychiatric Nurses,” *Menoufia Nursing Journal*, Vol. 8, No. 1, 2023, pp. 259–276.

21- Saqatni, Maria: Burnout and Its Relationship to Psychological Hardiness among Practicing Psychologists in Specialized Institutions for People with Special Needs, PhD Dissertation, University of Oum El Bouaghi, 2023.

22- Battal, op. cit.

23- Santos, op. cit

24- Wahyuni et al., op. cit

25- Samaei et al., op. cit.

26- Ünal, op. cit

27- Ibid.

28- Samaei., op. cit.

29- Wahyuni., op. cit

30- Elattar., op. cit.

31- Battal, op. cit.

Bibliography List:

1. Books:

- Freud, S.: Advice to Doctors on the Psychoanalytic Treatment, in Complete Works, Psychoanalysis, Volume XII, Presses Universitaires de France, Paris, 1912.
- Goleman, D.: Emotional Intelligence: Why It Can Matter More Than IQ, Bantam Books, New York, 1995.
- Freudenberger, H. J., Richelson, G.: Burnout: The High Cost of High Achievement, Anchor Press, Garden City, 1980.
- Maslach, C., Jackson, S.: Stress, Burnout, and Work Holism, in R. R. Kilburg, P. E. Nathan, & R. W. Thoreson (Eds.), Professionals in Distress: Issues, Syndromes, and Solutions in Psychology, American Psychological Association, Washington D.C., 1986, pp. 53–75.
- Mayer, J. D., Salovey, P.: What Is Emotional Intelligence? in P. Salovey & D. Sluyter (Eds.), Emotional Development and Emotional Intelligence: Educational Implications, Basic Books, New York, 1997, p. 10.
- Othman, Farouk El-Sayed, Rizq, Mohamed Abdel-Sami': The Emotional Intelligence Scale: Its Concept and Measurement, in Abdel-Hadi Abduh & Farouk El-Sayed Othman (Eds.), Psychological Measurement and Tests: Foundations and Tools, Dar Al-Fikr Al-Arabi, Cairo, 2002, p. 36.
- American Psychiatric Association: Diagnostic and Statistical Manual of Mental Disorders (DSM-5), 5th ed., American Psychiatric Publishing, Washington, D.C., 2014.
- World Health Organization: International Classification of Diseases, 11th Revision (ICD-11), WHO, Geneva, 2016.

2. Theses:

- Santos, E.: Relationship of Emotional Intelligence to Workplace Stress and Burnout in Behavior Analysts, PhD Dissertation, University of St. Augustine for Health Sciences, 2024.

- Battal, Hanan: Emotional Intelligence among Practicing Clinical Psychologists, Master's Thesis, Kasdi Merbah University – Ouargla, Algeria, 2015.
- Saqatni, Maria: Burnout and Its Relationship to Psychological Hardiness among Practicing Psychologists in Specialized Institutions for People with Special Needs, PhD Dissertation, University of Oum El Bouaghi, 2023.

3. Journal Articles:

- Maslach, C., Jackson, S.: "The Measurement of Experienced Burnout," Journal of Occupational Behavior, Vol. 2, No. 2, 1981.
- Ünal, Z. M.: "The Contribution of Emotional Intelligence on the Components of Burnout: The Case of Health Care Sector Professionals," [Journal Name], Vol. 19, No. 2, 2014.
- Maslach, C., Jackson, S.: "The Measurement of Experienced Burnout," Journal of Occupational Behavior, Vol. 2, No. 2, 1981, pp. 99–113.
- El-Samadouni, El-Sayed Ibrahim: "Psychological Burnout among Special Education Teachers and Its Consequences," Journal of Contemporary Education, April 1995, p. 2.
- Wahyuni, F., Wiyono, B. B., Atmoko, A., Hambali, I.: "Assessing Relationships between Emotional Intelligence, School Climate and School Counselors' Burnout: A Structural Equation Model," Journal for the Education of Gifted Young Scientists, Vol. 7, No. 4, 2019, pp. 1361–1374.
- Elattar, N., Osman, F., Mahmoud, H.: "Effect of Emotional Intelligence Based Training Program on Burnout, Psychological Capital and Job Performance among Psychiatric Nurses," Menoufia Nursing Journal, Vol. 8, No. 1, 2023, pp. 259–276.
- Samaei, S. E., Khosravi, Y., Heravizadeh, O. R., Ahangar, H. G., Pourshariati, F., Amrollahi, M.: "The Effect of Emotional Intelligence and Job Stress on Burnout: A Structural Equation Model among Hospital Nurses."