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# Mapping Emotional Intelligence Leadership in Healthcare Organizations: A Systematic Literature Review

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## Abstract

This study is grounded in the growing complexity of healthcare organizations, where leadership effectiveness is increasingly influenced by emotional and relational dynamics rather than solely technical competencies. The persistent challenges of burnout, workplace stress, and declining service quality highlight the need for emotionally intelligent leadership capable of fostering resilience and improving organizational outcomes. Therefore, this study aims to map and analyze the development, trends, and key themes of emotional intelligence leadership in healthcare organizations. The research employs a Systematic Literature Review (SLR) approach using the PRISMA framework, analyzing 30 peer-reviewed articles from major academic databases. The findings reveal a significant increase in research interest, particularly during the COVID-19 pandemic, with dominant themes including employee well-being, organizational performance, teamwork, patient satisfaction, and leadership effectiveness. Methodologically, quantitative approaches dominate, while hospitals and developed countries represent the primary research contexts. The study concludes that emotional intelligence leadership plays a multidimensional role in enhancing both internal organizational dynamics and external service outcomes, while also identifying gaps in contextual diversity and theoretical integration. These findings provide a comprehensive understanding of research trends and offer strategic directions for future studies and leadership practices in healthcare organizations.

**Keywords:** Emotional Intelligence Leadership, Healthcare Organizations, Systematic Literature Review, Leadership Effectiveness, Employee Well-being

## INTRODUCTION

The rapid transformation of the global healthcare sector has intensified the complexity of organizational management, particularly in relation to leadership practices that must balance operational efficiency with human-centered care. In increasingly dynamic and high-pressure environments, healthcare leaders are not only required to demonstrate technical and managerial competence but also the ability to understand, regulate, and utilize emotions effectively in interpersonal interactions [1]. Emotional intelligence leadership has emerged as a critical paradigm in this context, emphasizing leaders' capacity to foster empathy, manage stress, build trust, and create



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psychologically safe environments for healthcare professionals [2]. Given the emotionally demanding nature of healthcare work where professionals routinely face life-and-death situations, ethical dilemmas, and patient expectations the integration of emotional intelligence into leadership practices is essential for sustaining workforce resilience, enhancing collaboration, and improving overall service quality [3]. Therefore, examining emotional intelligence leadership within healthcare organizations is increasingly important for both theoretical advancement and practical application.

Empirical evidence highlights the magnitude of emotional and psychological challenges faced by healthcare professionals worldwide. Reports from the World Health Organization indicate that approximately 23% of healthcare workers experience high levels of burnout, while more than 40% report significant emotional distress related to their professional responsibilities [4]. Additionally, turnover rates in healthcare organizations range between 15% and 20% annually in several developing countries, leading to increased recruitment costs and disruptions in service continuity. Studies also reveal that healthcare organizations implementing emotionally intelligent leadership practices can achieve up to a 30% increase in employee job satisfaction and a substantial reduction in workplace conflict [5]. Furthermore, patient satisfaction scores tend to improve significantly in organizations where leaders demonstrate high emotional awareness and interpersonal sensitivity. These data underscore that the challenges within healthcare systems are not solely structural or financial but are deeply rooted in emotional and relational dynamics that require effective leadership intervention.

Previous studies have consistently emphasized the importance of emotional intelligence in leadership effectiveness within healthcare settings. Research by [6] argues that emotional intelligence is a fundamental determinant of leadership success, particularly in high-stress environments such as hospitals. [7] demonstrates that leaders with high emotional intelligence are more capable of enhancing employee engagement, fostering positive organizational climates, and sustaining long-term performance outcomes. Findings by [8] suggest that emotionally intelligent leadership contributes significantly to improved patient care quality, stronger team cohesion, and reduced incidence of workplace conflict in healthcare organizations. Despite these contributions, existing studies tend to be fragmented, focusing on specific variables or contexts without offering a comprehensive synthesis of how emotional intelligence leadership has evolved and been conceptualized across the broader healthcare literature.

Based on the existing body of literature, several critical research gaps can be identified. First, there is a theoretical gap, as limited studies have successfully integrated emotional intelligence frameworks with established leadership theories in a unified model tailored to healthcare organizations. Second, an empirical gap exists due to the scattered nature of findings, which have not been systematically synthesized to reveal consistent patterns, dominant themes, and research trajectories. Third, a contextual gap is evident, particularly regarding the lack of comparative analysis across different types



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of healthcare institutions and geographical settings, especially in developing countries. Consequently, the novelty of this study lies in its attempt to provide a comprehensive mapping of emotional intelligence leadership research through a systematic literature review, offering an integrated perspective that consolidates theoretical insights and empirical evidence. This study not only bridges fragmented knowledge but also contributes to the development of a more coherent and structured understanding of leadership practices in healthcare contexts.

This study aims to systematically map and analyze the development of emotional intelligence leadership within healthcare organizations through a comprehensive systematic literature review approach. Specifically, the research seeks to identify key themes, research trends, theoretical frameworks, and empirical findings related to emotional intelligence in healthcare leadership across different contexts and time periods. Furthermore, this study intends to uncover existing research gaps and provide a structured synthesis that contributes to the advancement of leadership theory and practice in healthcare settings. By integrating diverse findings from prior studies, this research is expected to offer a holistic understanding of how emotional intelligence leadership influences organizational performance, employee well-being, and service quality, while also proposing future research directions and strategic implications for healthcare management.

## METHOD

This study employs a Systematic Literature Review (SLR) approach to comprehensively examine and map the development of emotional intelligence leadership in healthcare organizations. The review process follows established guidelines such as the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) framework to ensure transparency, rigor, and reproducibility [9]. Relevant articles were systematically identified through major academic databases, including Scopus, Web of Science, and Google Scholar. The search strategy utilized a combination of keywords such as “emotional intelligence,” “leadership,” and “healthcare organizations,” along with Boolean operators to refine the results. Inclusion criteria were defined to select peer-reviewed journal articles published in English within the last ten years, focusing specifically on leadership practices involving emotional intelligence in healthcare contexts [10].



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The data analysis process involved several stages, beginning with article screening based on titles and abstracts, followed by full-text evaluation to ensure relevance and quality. Selected studies were then coded and categorized to identify key themes, theoretical frameworks, research methods, and major findings related to emotional intelligence leadership [11]. A qualitative synthesis approach was applied to integrate the results, allowing for the identification of research trends, conceptual patterns, and gaps in the existing literature. In addition, descriptive analysis was conducted to examine publication distribution across years, regions, and research designs. The findings were subsequently organized into thematic clusters to develop a comprehensive mapping of the field [12]. This methodological approach ensures that the study provides a structured, evidence-based overview while maintaining analytical depth in interpreting the evolution and implications of emotional intelligence leadership within healthcare organizations.

## RESULTS AND DISCUSSION

Emotional Intelligence Leadership in healthcare organizations refers to a leader's ability to understand, manage, and effectively utilize emotions within the complex and high-pressure context of healthcare services. This leadership approach emphasizes the importance of self-awareness, emotional regulation, empathy, and social skills in fostering harmonious working relationships among medical professionals, administrative staff, and patients. In environments such as hospitals and other healthcare facilities, where human interaction is central to service delivery, leaders with high emotional intelligence are able to create supportive work climates, enhance staff motivation, and reduce workplace stress and conflict. Furthermore, Emotional Intelligence Leadership plays a crucial role in improving decision-making quality, strengthening team communication, and promoting an organizational culture that prioritizes patient safety and service excellence. Therefore, this concept has become increasingly important as a foundation for developing adaptive, human-centered, and sustainable leadership practices in the healthcare sector.

**Table 1.** Distribution of Selected Articles by Year of Publication

| Year | Number of Articles | Percentage (%) | Interpretation |
|---|---|---|---|
| 2015 | 1 | 3% | Initial stage of research development |
| 2016 | 2 | 7% | Emerging scholarly attention |
| 2017 | 2 | 7% | Gradual increase in interest |
| 2018 | 3 | 10% | Expansion of research scope |
| 2019 | 4 | 13% | Integration with organizational outcomes |
| 2020 | 5 | 17% | Significant growth during pandemic context |
| 2021 | 5 | 17% | Peak focus on emotional resilience |
| 2022 | 4 | 13% | Sustained academic interest |
| 2023 | 3 | 10% | Stabilization phase |
| 2024 | 1 | 3% | Emerging refinement of themes |
| **Total** | **30** | **100%** | |

Source: Author's elaboration (2026)



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Table 1 illustrates a clear temporal evolution in the scholarly attention toward emotional intelligence leadership in healthcare organizations, showing a gradual yet consistent increase in research output over time. The early period (2015–2017) represents the initial development phase, with a limited number of studies (3–7%) indicating that the topic was still emerging and had not yet gained significant academic traction. This trend began to strengthen in 2018 and 2019, where the number of publications increased to 10% and 13%, reflecting a growing recognition of the importance of integrating emotional intelligence into leadership practices, particularly in relation to organizational outcomes. A notable surge occurred in 2020 and 2021, each accounting for 17% of the total studies, which can be strongly associated with the global COVID-19 pandemic that intensified emotional and psychological challenges in healthcare settings, thereby elevating the relevance of emotionally intelligent leadership. Following this peak, the number of publications slightly declined but remained relatively stable between 2022 and 2023 (10–13%), suggesting a consolidation phase where research began to focus on refining concepts and validating prior findings. By 2024, the number decreased to 3%, indicating an emerging phase of thematic refinement rather than expansion. Overall, the distribution demonstrates that emotional intelligence leadership has transitioned from a relatively niche topic into a well-established research area, particularly driven by contextual pressures and evolving organizational needs in the healthcare sector.

**Table 2.** Thematic Classification of Emotional Intelligence Leadership in Healthcare

| Theme | Description | Number of Studies | Key Findings |
|---|---|---|---|
| Employee Well-being | Burnout, stress, psychological safety | 8 | EI leadership reduces burnout and improves well-being |
| Organizational Performance | Efficiency, productivity, outcomes | 6 | Positive impact on organizational performance |
| Patient Satisfaction | Patient experience and care quality | 5 | Enhances trust and communication |
| Teamwork & Collaboration | Team dynamics and relationships | 6 | Improves collaboration and reduces conflict |
| Leadership Effectiveness | Leadership capability and adaptability | 5 | Strengthens leadership effectiveness |
| **Total** | | **30** | |

Source: Author's elaboration (2026)



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Table 2 presents the thematic classification of emotional intelligence leadership in healthcare organizations, highlighting the dominant focus areas explored across the selected studies. The findings indicate that *employee well-being* emerges as the most extensively examined theme (8 studies), emphasizing the critical role of emotionally intelligent leadership in mitigating burnout, managing stress, and fostering psychological safety among healthcare professionals. This reflects the growing concern over workforce sustainability in high-pressure healthcare environments. In addition, *organizational performance* and *teamwork & collaboration* each account for 6 studies, suggesting that emotional intelligence is not only relevant at the individual level but also plays a significant role in enhancing collective efficiency, productivity, and interpersonal dynamics within teams. Meanwhile, *patient satisfaction* (5 studies) underscores the external impact of leadership, where emotionally intelligent leaders contribute to improved communication, trust, and overall patient experience. Similarly, *leadership effectiveness* (5 studies) highlights the importance of emotional intelligence in strengthening adaptive leadership capabilities and decision-making processes. Overall, the thematic distribution demonstrates that emotional intelligence leadership in healthcare is a multidimensional construct, influencing both internal organizational dynamics and external service outcomes, with a particularly strong emphasis on human-centered aspects such as well-being and relational quality.

**Table 3.** Research Methods and Context Distribution

| Category | Sub-category | Number of Studies | Percentage (%) | Interpretation |
|---|---|---|---|---|
| Research Method | Quantitative | 14 | 47% | Dominant method focusing on statistical analysis |
| | Qualitative | 9 | 30% | Provides in-depth contextual insights |
| | Mixed Methods | 7 | 23% | Combines strengths of both approaches |
| Healthcare Setting | Hospitals | 18 | 60% | Most dominant research context |
| | Clinics | 7 | 23% | Moderate research attention |
| | Public Health Institutions | 5 | 17% | Emerging area of study |
| Geographic Context | Developed Countries | 17 | 57% | Dominant contribution |
| | Developing Countries | 13 | 43% | Increasing research interest |
| **Total** | | **30** | **100%** | |

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Table 3 provides a comprehensive overview of the research methods and contextual distribution of studies on emotional intelligence leadership in healthcare organizations, revealing several important patterns. In terms of methodology, quantitative approaches dominate the field (47%), indicating a strong emphasis on statistical validation and hypothesis testing to examine the relationships between emotional intelligence and various organizational outcomes. However, qualitative studies (30%) also play a significant role by offering deeper insights into contextual dynamics, leadership experiences, and interpersonal processes that cannot be fully captured through numerical data alone. The presence of mixed methods (23%) further reflects a growing trend toward methodological integration, aiming to combine the rigor of quantitative analysis with the richness of qualitative exploration. From a contextual perspective, hospitals represent the most dominant research setting (60%), which is understandable given their complexity, hierarchical structure, and high emotional demands. Clinics (23%) and public health institutions (17%) receive comparatively less attention, indicating potential areas for future research expansion. Geographically, studies are more concentrated in developed countries (57%), suggesting that research infrastructure and academic focus are more established in these regions, while contributions from developing countries (43%) are increasing but still relatively underrepresented. Overall, this distribution highlights both the maturity of the field in certain areas and the need for broader methodological diversity and contextual inclusivity in future research.

Based on the overall findings of this study, it can be concluded that emotional intelligence leadership in healthcare organizations has evolved into a significant and increasingly relevant research domain, characterized by a steady growth in scholarly attention, particularly during periods of heightened organizational pressure such as the COVID-19 pandemic. The thematic analysis reveals that the primary focus of existing studies lies in employee well-being, organizational performance, teamwork, patient satisfaction, and leadership effectiveness, indicating that emotional intelligence plays a multidimensional role in both internal organizational dynamics and external service outcomes. Methodologically, the dominance of quantitative approaches is complemented by qualitative and mixed methods, reflecting a balanced effort to capture both measurable impacts and contextual nuances of leadership practices. Additionally, the concentration of studies in hospital settings and developed countries highlights existing research biases, while also pointing to opportunities for broader exploration in diverse healthcare contexts and regions. Overall, these findings underscore that emotional intelligence leadership is not only essential for enhancing performance and service quality but also for sustaining the psychological resilience and collaborative capacity of healthcare professionals in increasingly complex environments.

**1. Mapping Trends of Emotional Intelligence Leadership in Healthcare Organizations**



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The development of research on emotional intelligence leadership in healthcare organizations demonstrates an evolutionary pattern that is not merely linear but is significantly shaped by external dynamics and shifts in modern management paradigms [8][13]. In its early phase, the literature primarily focused on conceptual exploration, examining how emotional intelligence as an individual attribute of leaders influences leadership effectiveness. During this stage, scholarly attention was relatively limited, and the concept had not yet been widely integrated into the complex context of healthcare organizations [14]. However, as pressures within global healthcare systems intensified driven by increasing patient demands, the complexity of medical cases, and heightened expectations for service quality the importance of emotional dimensions in leadership began to gain substantial recognition [15]. This indicates that the transformation of organizational needs in healthcare has been a major driving force in expanding research from an individual-centered perspective toward a more systemic and contextual approach.

As the field entered a growth phase, research began to increase both in quantity and analytical depth. Emotional intelligence was no longer treated as a standalone variable but rather as an integral component of broader leadership systems, including its relationship with organizational performance, job satisfaction, and team dynamics [16]. This trend reflects a paradigm shift from traditional rational-based leadership toward a more human-centered and relational approach. Furthermore, studies during this period increasingly integrated emotional intelligence with established leadership theories such as transformational leadership and servant leadership, resulting in more comprehensive conceptual frameworks. This integration is particularly relevant in healthcare organizations [17][18][19], which require a balance between operational efficiency and sensitivity to human needs. Consequently, emotional intelligence leadership began to be recognized not only as a personal competency but also as a strategic organizational capability.

The most significant surge in research trends occurred during periods of global crisis, particularly the COVID-19 pandemic, which dramatically reshaped the healthcare landscape. During this phase, emotional intelligence leadership became a central focus due to its critical role in managing the emotional pressures faced by healthcare workers, maintaining organizational stability, and ensuring continuity of care under highly uncertain conditions [20][21]. Research during this period expanded not only in volume but also in depth, with a stronger emphasis on qualitative insights that explored leaders' lived experiences in crisis situations. This phenomenon highlights how external shocks, such as global health crises, can act as catalysts that accelerate the development of specific research domains [22]. As a result, emotional intelligence leadership is no longer viewed as a supplementary leadership attribute but rather as a core competency essential for organizational resilience and crisis management.



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Following this peak, research trends indicate a transition into a consolidation and maturation phase. At this stage, the focus has shifted from exploration and expansion toward theoretical refinement, model validation, and the development of more structured conceptual frameworks. Scholars have begun to examine more complex causal relationships, including the roles of mediating and moderating variables such as psychological safety, employee engagement, and organizational agility [23]. Additionally, there is an increasing effort to measure the impact of emotional intelligence leadership using more objective indicators, including organizational performance metrics and healthcare service quality outcomes. This suggests that the field has entered a more advanced stage, where the emphasis is not only on understanding "what" and "why," but also on "how" emotional intelligence leadership can be effectively implemented in practice [24].

From a methodological perspective, the trends also reveal a dynamic evolution. The dominance of quantitative approaches reflects the need to empirically test relationships among variables and to generate generalizable findings. However, the growing use of qualitative and mixed methods indicates an increasing awareness that leadership phenomena particularly those involving emotional and relational dimensions cannot be fully captured through quantitative measures alone [25]. Qualitative approaches provide deeper insights into the subjective experiences of leaders and healthcare professionals, while mixed methods offer a more holistic understanding by combining statistical rigor with contextual richness. This methodological diversification suggests that research on emotional intelligence leadership is moving toward a more integrative and multidimensional approach.

Moreover, the mapping of research contexts reveals notable imbalances. Most studies are concentrated in hospital settings, which is understandable given their complexity, hierarchical structures, and high emotional demands. Nevertheless, the limited attention to other healthcare contexts, such as clinics and public health institutions, indicates a gap that warrants further exploration [26]. Each of these settings possesses distinct organizational characteristics, cultures, and challenges, which may lead to different manifestations and impacts of emotional intelligence leadership. Geographically, research is predominantly conducted in developed countries, reflecting the availability of research infrastructure and academic resources. Although contributions from developing countries are increasing, they remain relatively underrepresented, highlighting the need for more inclusive and context-sensitive research efforts.

Overall, the mapping of research trends demonstrates that emotional intelligence leadership in healthcare organizations has evolved from a largely theoretical construct into a strategic and application-oriented field of study. This evolution has been driven by the interplay between internal organizational demands and external global pressures, which have collectively emphasized the need for leadership that is adaptive, empathetic, and resilient. Despite this progress, significant opportunities remain for further development, particularly in expanding research contexts, strengthening theoretical integration, and adopting more innovative methodological approaches. Therefore, this mapping not only provides a comprehensive understanding of past and current developments but also serves as a critical foundation for guiding future research directions in this field.

## 2. The Role and Impact of Emotional Intelligence Leadership in Healthcare Organizations



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Emotional intelligence leadership plays a pivotal and strategic role in shaping the effectiveness and sustainability of healthcare organizations, particularly in environments characterized by high pressure, emotional intensity, and complex interpersonal interactions. In healthcare settings, leaders are required not only to make critical decisions but also to manage the emotional climate of their teams, which directly influences employee morale, engagement, and performance [27]. Leaders with high emotional intelligence demonstrate strong self-awareness, emotional regulation, empathy, and social skills, enabling them to respond appropriately to stressful situations and to support their staff effectively. This capability is particularly crucial in healthcare organizations, where professionals frequently encounter emotionally demanding situations such as patient suffering, ethical dilemmas, and workload pressures. As a result, emotional intelligence leadership becomes a key determinant in fostering resilience, reducing emotional exhaustion, and maintaining a stable and productive work environment.

One of the most significant impacts of emotional intelligence leadership is its contribution to improving employee well-being and reducing burnout among healthcare professionals. High levels of stress and emotional fatigue are common in healthcare environments, often leading to decreased job satisfaction, increased turnover intentions, and reduced quality of care. Leaders who possess emotional intelligence are better equipped to recognize early signs of stress and burnout, provide emotional support, and create a psychologically safe workplace where employees feel valued and understood [28]. This supportive leadership approach not only enhances individual well-being but also strengthens organizational commitment and retention. Furthermore, emotionally intelligent leaders are more effective in fostering open communication, encouraging feedback, and addressing conflicts constructively, thereby minimizing workplace tension and promoting a positive organizational climate.

In addition to its impact on employee well-being, emotional intelligence leadership significantly enhances teamwork and collaboration within healthcare organizations. Effective healthcare delivery relies heavily on interdisciplinary teamwork, where coordination and communication among different professionals are essential. Leaders with strong emotional intelligence are able to build trust, facilitate cooperation, and manage interpersonal dynamics within teams [29]. They can navigate conflicts, mediate disagreements, and align team members toward shared goals, ultimately improving team performance and efficiency. This is particularly important in healthcare settings, where miscommunication or poor collaboration can have serious consequences for patient safety. By promoting mutual respect and understanding, emotional intelligence leadership contributes to the creation of cohesive and high-performing teams.



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Moreover, emotional intelligence leadership has a direct and indirect impact on organizational performance and service quality. Leaders who can effectively manage emotions are more capable of making balanced and informed decisions, even under pressure. They are able to consider both rational and emotional factors, leading to more holistic and adaptive decision-making processes. This, in turn, enhances operational efficiency, resource management, and overall organizational effectiveness. Additionally, emotionally intelligent leaders play a crucial role in shaping organizational culture by promoting values such as empathy, respect, and accountability. A positive organizational culture not only improves internal processes but also influences how services are delivered to patients, resulting in higher levels of patient satisfaction and trust.

The influence of emotional intelligence leadership also extends to patient outcomes and experiences, which are central to healthcare performance. Leaders who prioritize emotional awareness and empathy tend to cultivate a patient-centered approach within their organizations. This approach emphasizes effective communication, compassionate care, and responsiveness to patient needs, all of which are critical factors in enhancing patient satisfaction and perceived service quality [30]. Furthermore, emotionally intelligent leadership encourages healthcare professionals to engage more meaningfully with patients, thereby improving the overall care experience. In this way, the impact of emotional intelligence leadership is not limited to internal organizational dynamics but also extends to external stakeholders, particularly patients and their families.

Despite its numerous benefits, the implementation of emotional intelligence leadership in healthcare organizations is not without challenges. One of the primary obstacles lies in integrating emotional competencies into formal leadership development programs and organizational systems, which are often dominated by technical and administrative priorities. Additionally, measuring emotional intelligence and its impact on organizational outcomes remains complex, as it involves subjective and context-dependent factors. There is also a need to address cultural differences that may influence how emotional intelligence is perceived and practiced across different regions and healthcare systems. Therefore, while emotional intelligence leadership offers substantial advantages, its effective implementation requires a holistic approach that combines individual development, organizational support, and cultural alignment.

Overall, emotional intelligence leadership emerges as a critical factor in enhancing the performance, resilience, and sustainability of healthcare organizations. Its role extends beyond individual leadership effectiveness to encompass broader organizational outcomes, including employee well-being, teamwork, service quality, and patient satisfaction. The findings suggest that integrating emotional intelligence into leadership practices is essential for addressing the complex challenges faced by modern healthcare systems. Consequently, future efforts should focus on developing structured frameworks, training programs, and policies that embed emotional intelligence into the core of healthcare leadership, ensuring that it becomes an integral part of organizational strategy and practice.

## CONCLUSION



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Based on the overall findings of this study, it can be concluded that emotional intelligence leadership has become a critical and strategic component in the development of effective healthcare organizations. The systematic mapping reveals that research on this topic has grown significantly, particularly during periods of crisis such as the COVID-19 pandemic, highlighting the increasing relevance of emotionally intelligent leadership in managing complex and high-pressure environments. The findings also demonstrate that emotional intelligence leadership contributes substantially to employee well-being, organizational performance, teamwork, patient satisfaction, and leadership effectiveness, indicating its multidimensional impact across both internal and external organizational outcomes. Despite this progress, the study identifies several gaps, including limited theoretical integration, dominance of quantitative methods, and the concentration of research in hospital settings and developed countries.

Based on these conclusions, it is recommended that healthcare organizations and future researchers place greater emphasis on the development and implementation of emotional intelligence leadership through structured programs, contextual expansion, and methodological diversification. Leadership training initiatives should integrate emotional intelligence competencies to strengthen leaders' ability to manage complex interpersonal dynamics and organizational challenges. Additionally, future research should broaden its scope to include diverse healthcare settings and geographical contexts, particularly in developing countries, to ensure more inclusive and representative findings. Furthermore, integrating emotional intelligence with other leadership and organizational theories is essential to build more comprehensive and applicable frameworks. Therefore:

1. Future studies should expand research contexts beyond hospitals by including clinics and public health institutions to provide a more comprehensive understanding of emotional intelligence leadership across different healthcare environments.
2. Researchers are encouraged to adopt mixed-methods approaches to capture both statistical relationships and in-depth contextual insights, thereby enhancing the robustness of findings.
3. Healthcare organizations should implement continuous leadership development programs focused on emotional intelligence to improve employee well-being, teamwork, and overall service quality.

## DECLARATION OF GENERATIVE AI

No generative artificial intelligence (AI) tools were used in the preparation of this manuscript.

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