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Caring Behavior and Emotional Intelligence Among Nurses at Dr. M. Djamil General Hospital: A Cross-Sectional Study

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Article information

Abstract

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Background: In carrying out their duties, nurses require social awareness and specific abilities that include intellectual, technical, and interpersonal skills, which are reflected in caring behavior. Caring behavior is essential in nursing practice, grounded in values of kindness, attention, and respect for patients' spiritual beliefs. Some patients at Dr. M. Djamil Padang General Hospital have reported that nurses do not fully address their complaints, feelings, and feedback, and are not responsive to patient calls. Emotional intelligence is considered important because of its role in providing attentive nursing care.

Methods: This study used a quantitative design with an observational analytic and cross-sectional approach. The study population consisted of nurses at Dr. M. Djamil Padang General Hospital. Data collection was conducted using questionnaires measuring emotional intelligence and caring behavior. The emotional intelligence questionnaire used *The Schutte Emotional Intelligence Scale* and the caring behavior questionnaire used the *Caring Behaviors Inventory (CBI)*.

Results: The majority of nurses (56.3%) at Dr. M. Djamil Padang General Hospital exhibited high emotional intelligence. Most nurses (95.8%) demonstrated good caring behavior. The analysis showed a significant relationship between emotional intelligence and nurses' caring behavior, but with a weak and negative correlation (r = -0.216, p = 0.019). This means that the higher the nurses' emotional intelligence, the lower the caring behavior tends to be, even though the contribution of emotional intelligence to caring behavior was only 4.7%.

Conclusion: Nurses at Dr. M. Djamil Padang General Hospital are mostly between 30-40 years old, female, and Ners graduates. The nurses possess high emotional intelligence and demonstrate good caring behavior. There is a significant relationship between emotional intelligence and nurses' caring behavior, but with a weak and negative correlation. This research suggests that other factors may have a more dominant influence on nurses' caring behavior at Dr. M. Djamil Padang General Hospital.

Keywords: carina behavior nursina, emotional intelliaence, predictor

Introduction

In carrying out their duties, nurses require social concerns and specific skills that encompass intellectual, technical, and interpersonal abilities, reflected in caring behavior or compassion. Research indicates that caring is fundamental in nursing practice, consistently grounded in values of kindness, attention, and respect for patients' spiritual beliefs.¹ Caring goes beyond the technical aspects of nursing as it involves providing compassion to alleviate the suffering of patients and their families, enhancing health and dignity, and expanding the self-actualization of the nurse.²

The caring behavior of nurses also has an impact on the nurses themselves. When nurses lack emotional awareness, they may neglect the needs of patients and even forget their duties and responsibilities.³ Additionally, nurses may show reduced empathy towards patients, leading to dissatisfaction with the quality of

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nursing care. Studies have shown that the better the caring behavior exhibited by nurses, the higher the level of patient satisfaction with nursing care services.⁴

Emotional intelligence (EI) is a crucial determinant of a nurse's ability to provide high-quality care. El encompasses self-control, motivation, and perseverance, as well as the ability to manage impulses and emotions, regulate mood without impairing cognitive abilities, empathize, and establish positive social relationships.^{5,6} It also involves the ability to resolve conflicts and demonstrate leadership, which are essential skills for ensuring compassionate patient care.⁷ Research has shown that nurses with high EI tend to have better patient interactions, improved decision-making under pressure, and higher levels of professional satisfaction. ^{8,9}

Based on a customer satisfaction survey conducted by the Ministry of Communication and Information (Kominfo) on several hospitals in Indonesia, RSUP Dr. M. Djamil Padang recorded the lowest satisfaction rate at only 30%. Given these concerns, it is crucial to investigate the relationship between nurses' emotional intelligence and their caring behavior at Dr. M. Djamil Padang General Hospital. Understanding this relationship can provide insights into improving nursing education, training programs, and healthcare policies to enhance the quality of patient care.

The aim of this study is to examine the relationship between emotional intelligence and caring behavior among nurses at Dr. M. Djamil Padang General Hospital using a cross-sectional approach.

Methods

This study employed a quantitative research approach with an analytical observational design using a cross-sectional method. This design was chosen to analyze the relationship between nurses' emotional intelligence and caring behavior at Dr. M. Djamil Padang General Hospital at a single point in time. A cross-sectional approach was used to simultaneously measure the independent variable (emotional intelligence) and the dependent variable (nurses' caring behavior) to determine their correlation.

The study population consisted of nurses working across various units at Dr. M. Djamil Padang General Hospital, including the surgical unit, non-surgical unit, obstetrics and gynecology unit, pediatric unit, laboratory unit, heart unit, ICU, PICU, NICU, and HCU. The sampling technique used in this study was probability sampling with proportional random sampling, ensuring equal representation of nurses from different units. The total sample size was 119 nurses, determined using a formula for finite populations to achieve statistical accuracy. The inclusion criteria included nurses who were willing to participate and had at least one year of work experience, while exclusion criteria included nurses who were on leave, sick, or assigned outside the hospital during the study period.

The data collection was conducted using a structured questionnaire in Bahasa Indonesia, which had been validated by the Ethics Committee of Dr. M. Djamil Padang General Hospital. The questionnaire consisted of three sections: (1) Demographic data (age, gender, employment status, and position), (2) Nurses' caring behavior, measured using the Caring Behaviors Inventory (CBI-24) developed by Wolf (1981), which aligns with Watson's Theory of Human Caring, and (3) Emotional intelligence, assessed using the Schutte Emotional Intelligence Scale (SEIS), which evaluates self-awareness, emotional regulation, and interpersonal skills. Both instruments were tested for reliability, with CBI-24 having a Cronbach's alpha (α) of 0.96, indicating high reliability.

The data analysis involved univariate and bivariate analyses. Univariate analysis was used to describe the frequency distribution of each variable, while bivariate analysis examined the relationship between emotional intelligence and caring behavior using the Pearson Product-Moment correlation test for normally distributed data or the Spearman correlation test for non-normally distributed data. The correlation coefficient (r) was interpreted based on established strength categories, with significance set at p < 0.05. This study received ethical approval from the Ethics Committee of Dr. M. Djamil General Hospital under approval number LB.02.02/5.7/468/2023.

Results

This study was conducted on 119 nurses working in various service units at Dr. M. Djamil Padang General Hospital. The research aimed to analyze the relationship between nurses' emotional intelligence and caring behavior in daily nursing practice. Data were collected through validated and reliable questionnaires.

The study results showed that the majority of nurses exhibited high emotional intelligence and demonstrated good caring behavior. However, statistical analysis revealed a weak and negative correlation between emotional intelligence and caring behavior, indicating that higher emotional intelligence did not necessarily translate to better caring behavior.

Univariate analysis

Univariate analysis was conducted to determine the frequency distribution and percentage of each variable in this study, including emotional intelligence and nurses' caring behavior.

Table 1. Frequency Distribution of Nurses' Emotional Intelligence

Emotional Intelligence Categor	ry Frequency (n)	Percentage (%)
High	67	56.3%
Moderate	40	33.6%
Low	12	10.1%
Total	119	100%

The univariate analysis results show that 56.3% of nurses had high emotional intelligence, while 33.6% were in the moderate category, and 10.1% had low emotional intelligence.

Table 2. Frequency Distribution of Nurses' Caring Behavior

Caring Behavior Category	/ Frequency (n	Percentage (%)
Good	114	95.8%
Poor	5	4.2%
Total	119	100%

Most nurses (95.8%) demonstrated good caring behavior, while 4.2% of nurses exhibited poor caring behavior.

Bivariate analysis

Bivariate analysis was conducted to determine the relationship between nurses' emotional intelligence and caring behavior using the Spearman correlation test.

Table 3. Relationship Between Emotional Intelligence and Nurses' Caring Behavior

Variable	r (Correlation)	p-value	Interpretation
Emotional Intelligence vs Caring Behavior	-0.216	0.019	Weak, Negative Relationship

The bivariate analysis results show a significant relationship between emotional intelligence and nurses' caring behavior (p = 0.019). However, the correlation coefficient (r = -0.216) indicates that this relationship is weak and negative, meaning that higher emotional intelligence is associated with a lower tendency for caring behavior, even though emotional intelligence only contributes 4.7% to caring behavior.

Discussions

Emotional Intelligence in Nursing

Emotional intelligence (EI) plays a crucial role in nursing practice as it helps nurses effectively manage their emotions and navigate patient interactions with empathy and professionalism. ^{5,6} In this study, the majority of nurses at Dr. M. Djamil Padang General Hospital exhibited high emotional intelligence (56.3%), while 33.6% were in the moderate category and 10.1% had low emotional intelligence. These findings align with previous research indicating that nurses with high emotional intelligence are better at handling stressful situations, maintaining effective communication, and providing compassionate care. ^{7,9} Emotional intelligence is essential for nurses to manage their own emotions while dealing with the emotional distress of patients, thereby enhancing the overall quality of patient care. ^{3,10,20} However, despite the high emotional intelligence levels observed, other influencing factors may impact how it translates into caring behavior.

Caring Behavior Among Nurses

Caring behavior is a fundamental aspect of nursing, reflecting the ability of nurses to establish trusting relationships with patients, demonstrate empathy, and provide holistic care. ^{1,2} In this study, 95.8% of nurses demonstrated good caring behavior, while 4.2% exhibited poor caring behavior. The predominance of good caring behavior suggests that nurses at Dr. M. Djamil Padang General Hospital generally prioritize patient-centered care, which is supported by Watson's Theory of Human Caring. However, qualitative observations suggest that external factors, such as workload, time constraints, and staffing shortages, may limit the extent to which nurses can consistently practice caring behaviors. ^{4,11} While technical skills and medical knowledge are crucial, the ability to demonstrate emotional presence, active listening, and compassionate engagement significantly contributes to patient satisfaction and recovery outcomes. ^{8,12}

The Relationship Between Emotional Intelligence and Caring Behavior

The statistical analysis in this study revealed a significant but weak negative correlation (r = -0.216, p = 0.019) between emotional intelligence and caring behavior, suggesting that higher emotional intelligence does not necessarily lead to better caring behavior among nurses. This finding contrasts with existing literature, which generally supports a positive correlation between EI and caring behavior.^{2,13} Several possible explanations for this outcome include external work stressors, burnout, organizational policies, and workload distribution, which may impact the nurses' ability to apply their emotional intelligence effectively in caring interactions.^{3,9} Additionally, nurses with high EI may prioritize emotional regulation and problem-solving over direct emotional expression in patient care, leading to variations in caring behavior.^{5,14} These findings indicate the need for further research to explore additional factors influencing caring behavior, such as work environment, leadership support, and job satisfaction, to optimize patient care outcomes.¹⁵⁻¹⁹

Conclusions

This study provides valuable insights into the relationship between nurses' emotional intelligence and caring behavior at Dr. M. Djamil Padang General Hospital. The findings indicate that most nurses exhibit good caring behavior, influenced by various factors, including emotional intelligence, demographic characteristics, and psychological aspects. Emotional intelligence plays a crucial role in shaping nurses' ability to manage emotions, empathize with patients, and provide compassionate care. However, the results reveal a weak and negative correlation between emotional intelligence and caring behavior, suggesting that other factors may have a more significant impact on nurses' ability to demonstrate caring behavior in daily practice.

Limitations

This study has several limitations that should be considered. First, the research was conducted only in one hospital, which limits the generalizability of the findings to other healthcare settings. Additionally, as a cross-sectional study, it provides only a snapshot of the relationship between emotional intelligence and caring



behavior without determining causality. Future research should include multiple healthcare institutions to improve generalizability and explore causal relationships between emotional intelligence, caring behavior, and other influencing factors.

Moreover, workload, staffing issues, and hospital policies may also influence nurses' ability to apply caring behavior effectively, which was not extensively explored in this study. Future longitudinal studies could provide a deeper understanding of how caring behavior develops over time and its long-term effects on patient outcomes. Despite these limitations, this study highlights the importance of fostering a supportive work environment and implementing training programs to enhance nurses' emotional intelligence and caring behavior, ultimately improving patient-centered care and healthcare quality.

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Declarations of competing interest

No potential competing interest was reported by the authors.

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