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Research Article

The intergenerational emotional intelligence among nursing officers at selected hospitals in Puducherry

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Abstract:

The study was conducted to assess the intergenerational emotional intelligence among nursing officers at selected hospitals in Puducherry. The objectives are to A Study to Assess the intergenerational emotional intelligence among nursing officers and associate the intergenerational emotional intelligence among nursing officers with their selected demographic variables. The present descriptive research was conducted in conducted in IGGGH & PGI and various PHCs in Puducherry among 100 nursing officers who were selected by non-probability purposive sampling technique, TEIQue-SF was used to collect data. The results show that, out of 100 nursing officers, majority 79% had average level, 19% had high level of emotional intelligence 2% had low level emotional intelligence. The mean and standard deviation of stress among nurses was 179±2.886. The level of emotional intelligence was associated with demographic variable age, marital status and years of experience at the p level 0.005, 0.005 and 0.000 respectively. The present study confirmed that, nursing officers had average level of emotional intelligence in respective to the demographic characteristics, the increased age, experience and marital status had influence over the emotional intelligence.

Keywords: Emotional Intelligence, Nursing Officers

INTRODUCTION

Nurses can play a variety of tasks, such as managing nursing teams, supervising the quality of treatment, and promoting and restoring patients' health. In healthcare environments, nurses must develop their personal and professional abilities to handle a variety of tasks and responsibilities under various circumstances on a regular basis. Professional nursing practice in the healthcare industry greatly depends on organizational and individual involvement. In clinical practice, nursing staff involvement is a source of personal fulfillment and well-being in addition to being a critical component of high-quality treatment. Workplace engagement among nurses is correlated with a number of elements, including work environment, optimism, and self-efficacy. Engaged employees accept advice relevant to their profession and are devoted to their organizations. However, it was discovered that emotional intelligence (EI) abilities like self-awareness, emotion regulation, motivation, and recognition were significant predictors of nursing performance and engagement. Additionally, improving EI abilities has a good correlation with wellbeing, personal fulfillment, and, eventually, successful nursing outcomes. The EI resources in the workplace are a key predictor of nurses' work engagement

Up to four generations, including baby boomers, Gen X, Millennials, and Gen Z, cohabit in today's healthcare workforce, each contributing distinct social backgrounds and values. Additionally, EI helps nurses understand that healthcare is a complex system. For nurses employed in the Saudi healthcare system, which is undergoing significant reforms and necessitates interdisciplinary cooperation to adopt the new improvement measures, this can be especially

As front-line healthcare workers, nurses must be familiar with the quality of emotional intelligence because of the nature of their interactions with patients.

Furthermore, it is said that emotional intelligence plays a significant role in determining one's ability to make decisions.¹⁶ Stronger nurse leadership and practice performance, improved patient safety, academic success, and personal well-being and stress management are all linked to better emotional intelligence.

NEED FOR THE STUDY

Nurses require strong emotional intelligence because it influences their interactions with patients, decision-making, leadership abilities, clinical performance, patient safety, stress management, and personal well-being. As frontline healthcare providers, nurses frequently encounter emotionally demanding situations and must effectively understand and manage both their own emotions and those of patients and families. Despite constituting a major proportion of the global healthcare workforce, many countries, including India, face shortages of qualified nursing personnel.

Therefore, developing emotional intelligence among nurses is important for improving communication, teamwork, coping skills, quality of care, and the ability to provide safe, compassionate, and patient-centred healthcare.

AIM OF THE STUDY

The study aimed to assess the intergenerational emotional intelligence among nursing officers and to associate the intergenerational emotional intelligence among nursing officers with their selected demographic variables.

MATERIAL AND METHODS

The present study adopted a quantitative research approach and a descriptive research design to accomplish the objectives of the study appropriate. The study was conducted in IGGGH & PGI and IGMC & RI in Puducherry. A total of 100 nursing officers working in IGGGH & PGI and IGMC & RI at Puducherry were selected as samples through non-probability purposive sampling.

The inclusion criteria comprised patients who were Working more than one year as nursing officer, willing to participate in the study and available during the time of data collection.

The researcher developed a structured tool based on literature review and expert consultation. The tool included two sections: Section A consisted of demographic variables of nurses such as Age, Gender, educational qualification, residence, religion, type of family, socio economic status, marital status, place of study, type of hospital working, area of working, years of experience, recreational activity and health status of the nurse ; Section B used the Trait Emotional Intelligence Questionnaire– Short Form used to assess the emotional intelligence among nurses. It has 30 items each scored from 1 to 7 based on samples thoughts. The scale ranges from completely disagree to completely agree. The interpretation of the tool is based on overall mean score of the tool. The maximum mark is 210. Minimum score is 30.

DATA COLLECTION PROCEDURE

After getting a formal permission from the authority, the researcher selected samples based on criteria. The researchers introduced themselves and rapport was established with the study participants. A brief introduction about the purpose of the study was given. A written consent was obtained from each subject and reassurance was provided that the data collected would be kept confidential. Data was collected by using semi structured questionnaire with interview schedule. Twenty minutes time was given to each sample. Data were collected, compiled and tabulated.

RESULT AND DISCUSSION

Among the 100 nursing officers, the majority were aged 41–50 years (38%), followed by those aged above 50 years (36%). Most participants were female (79%), resided in urban areas (51%), were Hindu (77%), and married (71%). The majority belonged to joint families (84%) and were above the poverty line (75%). Most participants had completed their education in government colleges (84%) and were employed in the government sector. Regarding the area of work, 38% were working in general wards, 28% in ICU and critical care units, 26% in OPD, and 8% were working as supervisors. Regarding personal life, 38% reported a neutral feeling, 36% felt happy, and 26% felt sad, while 70% perceived their health as good.

With regard to emotional intelligence, the majority of nursing officers (79%) had an average level of emotional intelligence, followed by 19% with a high level and 2% with a low level. The mean emotional intelligence score was 179 ± 2.886 . The findings suggest that most nursing officers possessed a moderate level of emotional intelligence, which may support effective interpersonal relationships, emotional regulation, decision-making, and professional performance.

The present findings are consistent with the study conducted by Park et al. (2024) among 257 third- and fourth-year nursing students in Korea, which reported a significant positive relationship between emotional intelligence and clinical competency ($r = 0.457$, $p < 0.001$). The study further highlighted the importance of emotional intelligence, caring efficacy, and social support in enhancing clinical competency, emphasizing the need for interventions to strengthen these attributes among nursing professionals.

CONCLUSION

The present study confirmed that, nursing officers had average level of emotional intelligence in respective to the demographic characteristics, the increased age, experience and marital status had influence over the emotional intelligence.

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Table 1: Distribution of level of emotional intelligence among nursing officers. (N = 100)

Level of emotional intelligence	Frequency	Percentage
High	19	19
Average	79	79
Low	2	2
Mean±SD	179±2.886	

Table: 2 Association of emotional intelligence among nursing officers with their selected demographic variables. (N = 100)

S.No.	Demographic variable	High		Average		Low		Chi Square value
		n	%	N	%	N	%	
1	Age							13.258 df=3 0.005 S
	22 to 30 years	1	1	7	7	0	0	
	31 to 40 years	3	3	15	15	0	0	
	41 to 50 years	7	7	30	30	1	1	
	More than 50 years	8	8	79	79	2	2	
2	Sex							1.923 df=2 0.382 NS
	Male	5	5	15	15	1	1	
	Female	14	14	64	64	1	1	
3	Area of living							0.309 df=3 0.958 NS
	Urban	10	10	40	40	1	1	
	Rural	5	5	28	28	0	0	
	Semi urban	4	4	11	11	1	1	
4	Religion							0.192 df=3 0.979 NS
	Hindu	15	15	61	61	1	1	
	Muslim	1	1	7	7	1	1	
	Christian	3	3	11	11	0	0	
	Others	0	0	0	0	0	0	
5	Marital status							13.398 df=3 0.005 S
	Married	14	14	56	56	1	1	
	Unmarried	3	3	19	19	1	1	
	Separated	1	1	1	1	0	0	
	Widowed	1	1	3	3	0	0	
6	Type of family							3.390 df=2 0.335 NS
	Nuclear	1	1	7	7	0	0	
	Joint	16	16	66	66	2	2	
	Extended family	1	1	1	1	0	0	
	Single parent	1	1	5	5	0	0	
7	Socio economic status							4.266 df=2 0.234 NS
	Above poverty line	13	13	60	60	2	2	
	Below poverty line	0	0	2	2	0	0	
	Middle class	6	6	17	17	0	0	

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