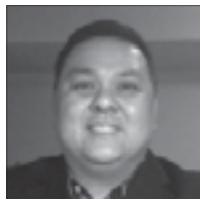


Research Article

# Transforming Nursing Education and Practice through Emotional Intelligence



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**Key words:** *Emotional intelligence, nursing education, nursing practice*

## Abstract

Emotional intelligence (EI) and its potential to transform nursing education and practice were examined using available literature. The concept of EI was explored and its relationship with intelligence quotient, a traditional indicator of success, was discussed. Current literature indicates EI's potential to enhance an individual's chances of success in his or her career. As a relational based discipline, the integration of EI with nursing education and practice may potentially contribute to the transformation of the nursing profession. Further studies are required to more accurately measure or understand the various facets of this uniquely human and personal skill and how it directly relates to success in higher education, nursing education, and nursing practice, and ultimately transform nursing practice.



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## Introduction

Emotional intelligence (EI) is a relatively new concept in the field of nursing. This concept was initially introduced by Salovey and Mayer (1990) who suggested that some individuals possess the ability to reason about and use emotions to enhance thought more effectively than others and, subsequently, considered as having the potential “to predict educational criteria... above and beyond general (cognitive) intelligence and personality” (Matthews, Zeidner, & Roberts, 2006, p. 167; Mayer & Caruso, 2008). Owing to the relational nature of the discipline of nursing, it is therefore not surprising to see nurses, nursing educators,

and nursing researchers become interested in this topic. But what exactly is EI? How is it different from or related to intelligence quotient? How might EI be relevant to nursing? EI, as a concept, has the potential to contribute to the transformation of nursing practice. In this paper, we will discuss the concept of EI and will compare it with intelligence quotient (IQ) as a strategy to transform nursing practice. We will also explore the literature to describe the current state of understanding on the relationship between EI and higher education, with a focus on its application to nursing education and practice.

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### Emotional Intelligence Defined

Salovey and Mayer (1990) defined EI “as a set of skills... [that] contribute to the accurate appraisal and expression of emotion in oneself and in others, the effective regulation of emotion in self and others, and the use of feelings to motivate, plan, and achieve in one's life” (p. 185). Cherniss (2000) further described it as “a person's ability to perceive, identify, and manage emotion [that] provides the basis for the kinds of social and emotional competencies that are important for success in almost any job” (p. 10). The concept was further popularized following the publication of the work of Goleman (2005) in 1995 where he described EI as the ability of individuals “to motivate oneself and persist in face of frustrations; to control impulse and delay gratification; to regulate one's moods and keep distress from swamping the ability to think; to empathize and to hope” (p. 34). This work evolved into a theory that sparked the interest of educators, managers, and researchers on EI and sought its application in different areas. More recently, Akerjordet and Severinsson (2007) defined EI “as an ability that encompasses personal and social competence, in which the core values of one's professional identity is reflected by self-awareness, emotional management, responsibility, authenticity, and empathetic understanding” (p. 1411). From these definitions, it can be inferred that EI may be a potential tool that a person can use to navigate difficult organizations, systems, and situations that do not otherwise respond to logic or other traditional forms of knowledge and standards. EI also realizes the value of how humans relate to each other in contributing to one's success.

Emmerling and Goleman (2003) noted the impact of EI on popular culture and the academic community. Among business leaders, there was a realization as to how *unconventional abilities* helped customer service representatives excel in their jobs while the technically and academically savvy employees saw their careers stalled because they were *not* emotionally intelligent (Cherniss & Goleman, 1998). Accordingly, Kaschub (2002) remarked that Goleman's theory of EI views success as resulting from “an awareness of one's own emotional state and an awareness of another's emotional state that lead to productive action” (p. 10). Ten years after the initial publication of Goleman's work, the previously unnoticed field had generated over 700 completed doctoral dissertations investigating various aspects of EI and numerous studies completed by academics and other researchers (Goleman, 2005).

### Emotional Intelligence and Education

Sherlock (2002) noted that EI “begins with self-awareness and self-understanding, progressing toward the goal of student learning to manage his or her own emotions” (p. 143). Studies indicate that EI helps students and individuals academically, emotionally and socially (Cherniss, Extein, Goleman & Weissberg, 2006; Jaeger, 2003; VanderVoort, 2006). VanderVoort outlined the value of EI in academia that could significantly impact postsecondary education by providing immeasurable “positive personal, social, and societal outcomes” (p. 6). Kristjánsson (2006) reported that there is a pressing realization among educators, particularly those in the United States, to promote emotional literacy in schools. It was further emphasized that incorporating EI within the postsecondary curriculum not only facilitates the teaching-learning process; it also improves career choice and the likelihood of success, and social adaptation in general (Cherniss, et al.; VanderVoort). Kaschub (2002) aptly described the meaning of success in this situation “as happiness, solid career choice, positive family life, or the 'American Dream' in general” (p. 10).

Unfortunately, the use of feelings and emotions in assessing academic performance has not received enough discussion, ignoring their value in providing people with valuable information that they can use to enhance their lives, careers and the way they deal with people around them (Jaeger & Eagan, 2007). Kovalik and Olsen (1998) point out that the prevailing curriculum is not helpful to today's learner's brain that requires emotional engagement at an intrinsic level. Not many graduate programs use EI research to look into the intrapersonal and interpersonal capabilities of students that will help them succeed in graduate education and, eventually, in the workplace (Jaeger, 2003). This may be particularly true in today's society where emphasis is placed on entry-to-practice competencies and practice standards to the extent that EI skills are overlooked. With additional research, it may be possible to prove that “EI has the potential to enrich the understanding of how to train excellent physicians” (Grewal & Davidson, 2008, p. 1202). In medical school, a study suggested the importance of incorporating EI as an admission criteria as they acknowledged the difficulty associated with the teaching of EI to aspiring physicians (Weng, Chen, Chen, Lu, & Hung, 2008). This may also be the reason why there are healthcare programs such as medicine and nursing that are having a hard time retaining students who were deemed to be suitably qualified and who have met their stringent admissions requirements. Jaeger (2003) points

out that curricula are not designed to help students discover and improve their EI. Instead, programs focus on having the students acquire the discipline-specific knowledge and skills to ensure competence in their field. This may potentially lead to graduating professionals who are task-oriented, and who focus on disease conditions as opposed to acknowledging the unique human person in each client.

Is EI *more* important than IQ in measuring intellect and, ultimately, determining success? Goleman (2001) pointed out that “IQ would be a much stronger predictor than EI of which jobs or professions people can enter... IQ predict[s] what technical expertise that person can master” (p. 22). This was confirmed by Barchard (2003) who noted in her study that EI is not an effective indicator of academic success as IQ but suggested that EI may be a good tool to measure personality, as well as success in specific areas such as graduate education for counselors. Jaeger (2003), on the other hand, gathered from her research data that EI is positively correlated with academic performance, and that it can be taught in a traditional classroom. This was supported by VanderVoort (2006) who suggested that incorporating EI in the college curriculum is a means to promote a positive and holistic learning environment in higher education institutions that can impact on personal, social, and societal outcomes. These studies highlight the importance of developing the entire person beyond their discipline specific knowledge if they are to become well-rounded individuals who can potentially succeed in their chosen careers.

### **Emotional Intelligence, Nursing Education, and Nursing Practice**

While EI has become a buzz word in the field of education in general, it was only recently that the nursing profession started to show interest in this topic. For example, a literature search using the Cumulative Index of Nursing and Allied Health Literature (CINAHL) and Medline only yielded 82 materials written on EI and nursing that were published in English and peer-reviewed, academic journals, with the earliest being published in 2002. Kooker, Shultz, and Codier (2007) remarked that the study of the relationship of EI to nursing is still in its infancy. Researchers began to take interest in the value of EI as a way to develop the various aspects of the discipline including education (Allen, Ploeg, & Kaasalainen, 2012; Freshwater & Stickley, 2004), leadership (Akerjordet & Severinsson, 2010), and practice (Codier, Freel, Kamikawa & Morrison, 2011; Codier, Kamikawa, Kooker, & Shultz,

2009; Görgens-Ekermans & Brand, 2012; McQueen, 2004; Smith, Profetto-McGrath, & Cummings, 2009). In this section, we will present some of the literature published recently on EI and its application to nursing education and nursing practice.

Montes-Berges and Augusto (2007) conducted a quantitative study to determine the relationship between perceived EI and coping, social support, and mental health variables among 119 first year nursing students from one nursing school in Spain using the Trait Meta-Mood Scale. Their results showed the value of perceived EI in stress coping among the participants. In a related study done by Landa, Lopez-Zafra, Aguilar-Luzon, and Salguero de Ugarte (2009), it was reported that perceived EI is positively related to self-concept amongst nursing students, and advised that nursing curricula ought to include EI in training future nurses. Montes-Berges and Augusto (2007) further suggested that the nursing curriculum, and the students in particular, would greatly benefit from the inclusion of “reflective learning experiences, supportive supervision and mentorship, modeling, developing empathy, and emotional competency” in the program of studies (p. 169). This was observed from the experience of one of the authors (Montes-Berges) who reported getting positive results based on improvement in students' skills and their encouraging evaluation of the program. While these findings seem interesting, we question how the results from one cohort of students can be used to make such generalizations.

Hurley and Rankin (2008) discussed EI as a framework to address the many challenges confronting the expanding role of mental health nurses in the UK, including but not limited to community services, proliferating specializations, and increased client expectations. In establishing the relationship between EI and nursing practice, Hurley and Rankin suggested that mental health nurses typically require human qualities to help them thrive as their scope of practice expands, and that this is best addressed through curricular innovation by including EI training within the nursing program. The authors, however, caution that while EI is a desired characteristic for mental health nurses, it should be approached with further investigation to ensure that EI concepts are appropriately and practically incorporated into the nursing curricula (Hurley & Rankin). Ultimately, the increasing emphasis of EI in the nursing curricula has the potential to bring about the individual student nurse's “personhood” and will better equip them to meet their own needs, their clients' needs, and those of the organization (Hurley and Rankin, p. 203). The inclusion of EI in nursing education

emphasizes the relational aspect of our profession. It has the potential to help nursing students better address the unique needs of clients entrusted in their care, as well as promote self-care through self-awareness.

Millan's (2008) doctoral dissertation examined and compared the EI skills of students from different nursing programs at a South Texas College, namely: Licensed Vocational Nurse (LVN), Registered Nurse (RN), LVN-RN Transition Option, and Paramedic-RN Transition Option using the Emotional Skills Assessment Process Questionnaire. Her results indicate that, in general, EI does not differ between students enrolled in the programs studied nor does the nursing program pose any significant effects on the students' EI (Millan). She noted, however, that as the student became more advanced with age, higher levels of EI might be expected (Millan). This supports the need to develop the nursing students' EI in all programs to assist them in dealing with the affective strains of the nursing profession (Millan). One barrier to incorporating EI within the nursing curriculum that Millan recognized was the need for each program to set its own requirement to fulfill its student learning objectives. She suggested assessing the a student's affective process as a criteria for admission to nursing schools, alongside innovations in pedagogy such as the use of service and problem-based learning approaches to develop and improve students' EI capabilities. Millan's findings and recommendations may be useful in the recruitment and retention strategies that can help alleviate the nursing shortage in Texas and elsewhere. She recommended the use of a qualitative approach to better examine EI differences between LVN and RN by investigating how students in the different nursing programs understand these affective skills (Millan). We find this recommendation interesting and worthy of consideration. While validated measures do exist in regards to measuring EI for various purposes, it is not certain how effective these are in measuring a personal human skill. A qualitative approach may thus be timely and appropriate to better explore this experience of nursing students.

Kooker, Shoultz, and Codier (2007) used a qualitative research approach to determine if improved process and outcomes in nurses' professional practice were related to EI. They analyzed 16 narratives written by nurses who were asked to write a story of their lived experience where nursing knowledge made a difference (Kooker, et al.). Kooker and colleagues noted that Goleman's four domains of EI, namely social awareness, social/relationship management, self-awareness, and self-management, were identified in all 16 stories. Social awareness and

social/relationship management were the most commonly demonstrated domains (Kooker, et al.). Their study further revealed that "elements of professional nursing practice, such as autonomy, accountability, mentoring, collegiality, integrity, knowledge, activism, and the professional practice environment, were all identified in the excerpts of the stories" (Kooker, et al., p. 34); these were positively correlated with the competencies of EI. The authors noted the potential application of EI as a means to keep nurses engaged in professional nursing practice and to improve nurse retention and patient outcomes (Kooker et al.).

Landa, Lopez-Zafra, Martos, and Aguilar-Luzon (2008) explored the interrelationship among EI, work stress and nurses' health. The study was based on the premise that health care professionals are frequently exposed to stress resulting from the inherent nature of their work with acutely ill individuals and the working conditions found in hospitals (Landa, et al.). A questionnaire survey was administered to nurses working in one of Spain's general public hospitals (Landa, et al.). Results indicated that a positive correlation exists between EI dimensions and stress and health; specifically, the authors reported that EI served to protect nurses from stress and provided a facilitative factor for health (Landa, et al.). The authors recognized the need to possibly incorporate EI training programs in hospitals as a means to help "improve nurses' EI abilities, facilitate coping with job stressors" thus contributing to positive patient outcomes (Landa, et al., p. 899).

McCallin and Bamford (2006) discussed how EI contributes to improved patient outcomes through effective interdisciplinary teamwork. They suggested that healthcare providers working in a team combine their interactional skills and EI to affect team behavior and performance (McCallin & Bamford). This underlines the role of developing a nursing manager's EI skills in order to promote team effectiveness, quality of client care, staff retention and job satisfaction.

The relationship between the nurse manager's EI and its empowering effect on staff nurses at a Canadian hospital was investigated by Lucas, Spence Laschinger, and Wong (2008). They also looked into the moderating effect of the nurse manager's span of control, i.e., the number of people he or she supervises, in empowering his or her staff nurses (Lucas, et al.). Results of this study indicate that staff empowerment was directly related to greater manager EI (Lucas, et al.). This may be related to the ability of an emotionally intelligent manager to



predict staff needs and resources that they require to provide the kinds of patient care expected of them (Lucas, et al.). A key finding in this study was the significant moderating effect of span of control on the nurse manager EI/staff nurse manager empowerment relationship. Lucas and colleagues noted that as the nurse manager's span of control increased, there was a corresponding decrease in his or her ability to empower the nursing staff, suggesting that even managers who may have high EI skills may not be able to effectively empower the staff if there is no meaningful interaction taking place due to increasing span of control.

Feather (2009) discussed the concept of EI in relation to its importance in nursing leadership. Feather pointed out how the EI levels of nursing leaders affect job satisfaction among staff nurses and subsequently their retention in the workplace. This is particularly important even from an economic point of view when one considers the amount of money health care institutions invest in hiring, orientating, and retaining new staff nurses. Feather pointed out the need for nurse managers to recognize and be aware of their own emotions and to be able to express these feelings to others, particularly their staff as a way to influence them and facilitate understanding and appreciation of the organization's mission and vision.

### Discussion and Conclusion

There are conflicting reports in regards to the relationship between EI and success, particularly in regards to its applications in academia. The field of EI can presumably be considered to be in its infancy stage. While researchers from both sides of the fence present their views and findings on the topic, one can only assume that more studies will be required to address the issues and misunderstandings its proponents currently face. Among other things, proponents of the field need to come together and attempt to agree on common language and concepts that they can use to further advance the field.

The value of EI in higher education appears to be related to its ability to enhance the teaching-learning process. Based on the findings of the studies cited in this paper, EI has the ability to promote career success beyond what can be provided by academic excellence. The challenge lies in determining the most appropriate way to incorporate it within curricula of different programs without displacing the program/course learning outcomes.

EI also appears to be gaining some appreciation in the area of nursing education and practice. As EI directly involves human emotions, it seems to be appropriate to use it as a guiding framework as nurse educators move towards designing a truly caring curriculum for nursing programs. Limited studies have pointed out the benefits of and the need for including EI training for nursing students. There also appears to be a positive correlation between EI and quality, patient-centered care. Studies also pointed to the need of providing EI training to nurse managers to better improve their leadership and mentoring skills, and ultimately contribute to the transformation of the profession. However, one cannot discount the importance of an individual's cognitive abilities. This was pointed out by the authors of the studies cited in this paper.

In closing, we would like to refer to Herbst (2007) who noted that individuals will continue to need, first and foremost, superior intellectual abilities; such competencies will need to be augmented with the emotional relationship competencies associated with success which may inevitably include, among other things, *emotional intelligence*. It would thus appear that IQ and EI may be suitable ingredients to promote an individual's success in any field, more importantly in a highly relational discipline such as nursing. However, as Matthews et al., (2006) noted, many EI studies used "questionnaires eliciting self-reports of emotional competence" and may prompt one to ask whether the respondents have "accurate insight into their emotional functioning" (p. 167). Further studies are required to more accurately measure and understand the various facets of this uniquely human and personal skill and how it directly relates to success in higher education, nursing education, and nursing practice, and ultimately transform nursing practice.

### Disclosure and Acknowledgment

This paper is based on a course requirement of EVC for NURS 505 – Transforming Nursing Practice, Faculty of Nursing, the University of Alberta, under the supervision of Dr. Dorothy Forbes.

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