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Review Article

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Emotional Intelligence and Nursing Leadership

Maria Fragkaki, RN, MSc, PhD[1] and Georgia Fasoi[2]*

[1]Department of Nursing, Faculty of Health and Caring Sciences, University of West Attica, Greece

[2]Professor in Community Nursing, Department of Nursing, Faculty of Health and Caring Sciences, University of West Attica, Greece

Abstract

Purpose: The aim of this paper is to present a review of emotional intelligence (EI) models and conceptualize the relationship between elements included in the concept of EI and effective leadership behaviors in nursing practice.

Design/methodology/approach: The study used bibliographic analysis and revealed the intellectual framework, themes, and topics of EI and leadership research, shedding light on EI's role in leadership and human resource management.

Findings: This review results are particularly useful for enhancing the interpersonal interactions of nursing staff, identifying effective nursing leadership methods, and improving the overall organization and higher quality of health care service delivery.

Originality: Additionally, it will help in the early detection, proper management, and resolution of problems that develop throughout clinical practice.

Introduction

EI has gained popularity among researchers and the general public in recent years [1]. EI refers to a person's ability to recognize both their own emotions and those of others, successfully control them, and encourage self-motivation [2]. The concept of EI has emerged as a new approach to intelligence theory that has become quite popular in recent decades in the field of education, organizational development, and in many workplaces, especially in health care [3,4].

In particular, the medical workforce consists of front-line health care professionals. These are people who, as a result of routine exposure to patients under a great deal of stress, can establish and maintain relationships in emotionally charged settings [5]. Emotions have an intrapersonal and interpersonal impact on professional relationships, patient health decisions, and health care personnel [6].

In the field of health care, it has been found that there is a challenge in understanding different emotions and their impact in the organizational context of work and leadership [7].

The connection between labor and emotions has drawn the attention of numerous researchers. The research in particular concentrated on the growing workload, handling emotions at work, and lastly, the impact of emotions on health of medical professionals [5,8]. It is thought vital to employ and develop emotional abilities due to the special working environment. As a result, greater productivity can be achieved while also protecting workers from stressful environments [9].

Particularly in recent years, the growing importance of health professionals, and especially nursing personnel, has led to significant changes in health services and patients' experiences. These changes have improved coordination, but also the quality of the services provided, made better use of available resources, and, ultimately, enhanced patient care [10]. However, the demands are very high and everyday life is becoming more and more stressful. Therefore, the use and development of emotional skills is more necessary than ever.

The purpose of this specific literature review was to present an extensive reference to the benefits that EI provides to nurses as well as the relationship between EI and leadership.

Perceived and objective EI

Petrides and Furnham [11], proceeded to separate objective and perceived EI within the framework of the theoretical approach they developed. According to an objective definition, intelligence has to do with one's capacity for processing information. While intelligence, a personality

***Corresponding author:** Maria Fragkaki, RN, MSc, PhD, Department of Nursing, Faculty of Health and Caring Sciences, University of West Attica, Greece, Tel: +30-6979225524

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trait, is described as being perceptible [12]. Objective assessment as well as questionnaire reports can examine distinct aspects of EI. Of these, some are related to the characteristics of the personality and others to the acquired qualities of individuals [13]. The first method refers to the actual concept of EI, while the second to perceived EI [14].

Research has shown that there is a low to moderate correlation between perceived and objective EI scores [15-17]. According to Matthews, et al., [18] there are substantial disparities between them. They specifically contend that there are other aspects that influence each person's success at the professional and educational levels, in addition to variables related to a person's personality, sex, and age [19,20].

Management of emotions in nursing practice

According to Freshwater and Stickley [21], nurses have to communicate consistently with patients, doctors, and other specialties of health professionals in order to provide health care in the most effective manner. Interactions between nurses and patients are of particular importance in nursing practice. This relationship has been described as a complex process involving both the process of nurses perceiving and understanding the emotions experienced by patients and using them to achieve the best management of the emotions presented by patients [22]. Providing high-quality care for patients is the ultimate goal.

McQueen [23] and Muller-Smith [24] argue that the patient care process does not refer to the exclusive quality medical care. On the contrary, it refers to the entire spectrum of care, which includes respect for the goals of the patient, their preferences and choices, and the satisfaction of their social, emotional, and spiritual needs. The daily life of nurses includes the enlivening, psychological support, and emotional involvement of patients, families, and colleagues. However, it is worth mentioning that the nursing staff is not only confronted with the emotions experienced by patients and colleagues, but also with those that they themselves exhibit [25]. In particular, nurses experience stress over a long period of time due to many factors such as fatigue, increased workload, new working conditions, and constant changes in the healthcare units, in which they work [26-28]. Particularly during the COVID-19 period, it is widely recognized that work conditions and burnout have affected healthcare workers in general [29-31].

Similarly, Freshwater and Stickley [21] and McQueen [23] contend that nurses are frequently exposed to patients' emotions, including pain, discomfort, sadness, relief, and hope. In this situation, it's crucial to grow emotionally capable to be able to respond appropriately to the practice of their profession. According to Freshwater and Stickley [21], EI is a key component of nursing. For many researchers, the recognition, understanding, and management of emotions are main priorities for nursing practice, as well as basic skills for practicing this profession [32,33].

Importance of EI in the nursing profession

The different EI abilities, such as understanding others and social awareness - sensitivity are important predictors of successful performance in managerial roles [13]. Janovics and Christiansen [34], in their research, concluded that EI, according to the model defined by Mayer and Salovey [2], was moderately correlated with job performance. Job performance is significantly correlated with only two of the four domains defined by EI. These are emotion understanding and emotion perception.

It has been demonstrated that the development of emotion regulation skills, a key element of EI, can increase stress tolerance and act as a preventative measure to shield workers from adverse effects [35]. These include burnout and depression. As a result, the emotional well-being of employees is enhanced through the satisfaction they receive from their life and work [36,37].

According to Cherniss [38], Evans and Allen [39], Freshman and Rubino [40], and Cadman and Brewer [41], the impact of EI on Primary Health Care structures is of particular interest because this work environment is distinguished by unique characteristics that are not present in any other field. Akerjordet and Severinsson [42] claim that the improvement of EI creates positive consequences for the quality of work performed by health care professionals.

Nursing leadership practices

Supervisors are called upon to cope with the demands of the modern healthcare environment, while approaching new challenges with a critical mindset. They make decisions that have an impact on patient care. Therefore, it is important that leaders have the necessary resources and training to make the right decisions at the right time. It is considered important that nurses develop an effective leadership role to provide high quality care and patient safety, as they are called upon to take part in several roles in their daily lives [43].

For some researchers, administrative skills, clinical experience, adequate training, entrepreneurial skills, and knowledge of leadership principles are crucial for nurses in leadership roles [44]. Nursing leadership is described as a complex and challenging process that involves providing direction, support, coordination, collaboration, and effective communication to achieve the best possible outcome for patients [45,46].

Nurses in leadership positions have subordinates to whom they must provide clear vision, empowerment, and motivation [47]. Leaders act as a source of admiration and inspiration for subordinate nurses [48].

Leadership in nursing services is related to the decision-making process, creating the appropriate climate, assigning the right tasks for handling conflicts, acting with integrity, and effective team member development through cooperation, direction, and coaching [49]. Successful leaders look to develop their team members' skills through their leadership. Leaders who are effective are dynamic, passionate, motivated, create team identity, inspire others, and use a variety of processes to solve the problems they face. Those supervisors who possess these leadership characteristics can gain the trust and respect of the members of a group in their work context [43].

According to Marriner-Tomey [50], nursing is a field that does not distinguish itself for the leaders that exist in it, due to the feminization of this specific profession, the education that concerns the exercise of leadership, and finally, the existence of the authoritarian model that is usually followed and does not enhance the emergence of leadership. In accordance with other studies, managers are thought to be motivated to increase nurses' job satisfaction [51]. Bormann and Abrahamson [52] argue that the adoption of transformational leadership practices appears to have a positive impact on the job satisfaction of nurses.

Research Results

According to domestic and international literature, numerous studies associate EI with leadership. One of them is the study by Coskun, et al. [53] with a sample of family physicians conducted in Turkey, which found a positive correlation between the participants' leadership qualities and EI. The higher the EI, the more increased the leadership elements they possessed. Possible differences in the level of EI usually shape the respective leadership behaviors and characteristics of individuals [54]. Tyczkowski, et al.'s [55] corresponding study with 146 nurses in the USA found that EI has a 44% influence on the transformational leadership model, an 18% influence on the transactional model, and a 20% influence on the avoidant/passive model. Additionally, it has a 41% effect on the three elements associated with leadership outcome: more effort, effectiveness, and satisfaction with leadership. Specifically, regarding transformational leadership, many researchers have identified a positive correlation between it and EI [56], considering that the combination of these two elements is a factor of successful and effective leadership [57]. Lygerou's [69] research also agrees with the above positive correlation, which, among others, also found that the lower the level of EI, the more passive/avoidant leadership increases. Therefore, for many researchers, the application of a trans formational leadership model is considered important [58,59], as it has been shown that supervisors with high intrapersonal EI apply trans formational leadership more effectively [58]. In contrast to the aforementioned studies, completely different findings are presented in the research by Weinberger [60]. In this study was found that there is no correlation between an individual's EI level and the type of leadership they exhibit when in a position of authority.

Freshwater [21] and McQueen [23] state that emotions are a component of vital, genuine, authentic and honest human relationships. For this reason, emotion understanding is necessary for nursing practice. Some authors make associations between EI and areas of nursing practice that are important, such as clinical decision making, interprofessional relationships, and the clinical environment.

Furthermore, as argued by Cadman & Brewer [41] and Evans & Allen [39], all caring professions require the ability to control one's emotional life and comprehend the emotions expressed by others. Additionally, Cadman and Brewer [41] concluded that nurses lack the ability to demonstrate high levels of empathy. They emphasize the direct association between empathy and positive patient outcomes.

Emotions function as major indicators of the ethical dimensions of a decision, therefore, they are likely to be directly related to more empathetic and patient-centered decisions [21,39]. Emotions are likely to act as a powerful motivator for decision-making, and when they are taken into account, they are likely to motivate decision-makers to broaden their thinking and reconsider, resulting in more critical thinking [42]. Akerjordet and Severinsson [42] and Kooker, et al. [61] contend that when asked to make practical decisions, nurses are likely to use, perceive, and ultimately analyze emotional information in extensive detail.

In their research Kooker, et al. [61] proceeded to analyze the stories of nurses in their attempt to investigate the factors of EI that influence the performance of their nursing duties. They found that there are dimensions of EI that are related to the desire to remain in the nursing profession as well as the presence of favorable patient outcomes. In particular, nurses were found to have compassion and understanding of patients' needs, the maintenance of relationships, using their personal influence and acting as mediators between patients and doctors.

Nurses reported the frustration they experienced when they were faced with organizational barriers that led to the conflict of their knowledge or intuition regarding nursing practices, especially when their attempts to communicate and develop a teamwork vision for nursing were disregarded.

Gerits, et al. [62] investigated the adaptability in German nurses who care for patients with mental retardation and behavioral issues, as well as EI, stress management skills, psychopathology, burnout, and the capacity for psychotherapy. In this study the Bar-On EQ-i was used to measure EI. The data analysis revealed a positive correlation between EI and nurses' capacity for adaptation. Furthermore, the existence of a negative relationship between EI, burnout and psychopathology has been identified. It appeared that there was no association between EI or nurses' willingness to change jobs.

The study by Berges and Augusto [63] aimed to examine the role of perceived EI and its impact on the use of stress management techniques, nursing students' mental health, and finally, the use of social support. Using the "TMMS-TraitMeta-mood Scale" measurement tool, EI was assessed in this study. Social support and emotional adjustment, social support and mental health, and finally social support and emotional clarity were all found to be positively correlated. More specifically, it was discovered that emotional correction as well as purity are indicators of social support. Furthermore, a key indicator of mental health is emotional adjustment. The findings demonstrate the importance of perceived emotional control in the nursing context when managing stress. The investigation conducted by Rochester, et al. [64] into the competencies that seem to be most crucial to the success of nursing practice during the first two to six years of a nurse's employment was also of particular interest. In this work, it was found that competence in technical skills is considered necessary for successful nursing practices, however it is not sufficient. Furthermore, EI was identified as an important

factor for both graduate nurses and managers to make nursing practices successful.

In parallel, Neils, et al. [65] studied the relationships between EI, performance and collaboration in nursing teams. They found a positive correlation between the quality of health care and emotional regulation. Also, emotional regulation emerged with team collaboration. On the other hand, the assessment of emotions emerged to have a negative relationship with the quality of health care provided. In other words, it was discovered that the quality of medical care decreased the more the nurses were able to perceive and comprehend emotions.

In their study Landa, et al. [66] focused on the relationships between EI, stress and nurses' mental health. From the analysis of the collected data, it was found that there are different effects of EI on stress as well as mental health. For more information on stress, it was discovered that nurses who demonstrated a higher level of emotional correction and purity exhibited less stress. On the contrary, those who had higher performances showed higher levels of stress. This fact is likely to be related to the emotional intensity, which results from the particularly high attention paid to emotions and the presence of negative thoughts.

In the study conducted by Diamantopoulou and Lavdanitis [68], an effort was made to examine how nurses applied their professional practices and the presence of EI components in accordance with Goleman's theory. It was found that the participating nurses expressed information from all EI dimensions. These were related to the application of nursing knowledge in the context of their work. More specifically, the EI skills that nurses use most frequently are self-awareness, self-management, social awareness, and social management. Finally, it was found that using EI could provide strategies for effective professional practice and intervention.

McQueen [23] stated that the existence of emotional involvement has an important role in the formation of the therapeutic relationship between the patient and the nurse, but carries the risk of exhausting the nurses if this is intense and long-term. Similarly, Akerjordet and Severinsson [42] found that nurses are expected to have professional sensitivity in order to recognize the weaknesses that patients have, while at the same time being able to differentiate their emotions from those displayed by patients in an effective way.

Smith, et al. [67] in their review focused on studying the role of EI in nursing practice, nursing administration and nursing education, and clinical decision making. Being emotionally intelligent is a requirement for nurses due to the nature of their work. This assertion is supported by the observation that nurses deliver care as part of a human relations process. Therefore, they are required to communicate in these relationships, including their feelings. Both the process of understanding emotions and dealing with emotions is an essential skill of nurses [21].

Landa, et al. [66] focused on the role of EI in nursing. Both nursing students and professional nurses participated in their study. The analysis of the student-collected data revealed that there is a positive correlation between emotional perception and regulation, which are elements of perceived EI. Professionals were found to have a clear perception and sense of the situations and emotions that arise and have the ability to manage their emotions, and they are characterized by low levels of stress at work. Additionally, nurses who have a high ability to reduce their negative emotional state are able to have superior overall health compared to people who have difficulty regulating their emotions.

The EI, performance, work engagement, and retention of clinical nurses employed at a medical center in Hawaii were all topics of one study [61]. These were analyzed, and it was discovered that clinical nurses with higher levels of EI performed better, had longer careers, and were ultimately more willing to continue practicing this profession.

Conclusions

EI describes the perception, understanding, assimilation, and management of emotions and is related to both performance and leadership effectiveness. Moreover, it contributes to maintaining existing jobs, job satisfaction, stress management, and prevention of positive forms of conflict and burnout. Regarding the cross-sectional part of the research, according to the findings of the study, nurses seem to have relatively high EI. The results also show that EI levels are directly related to sex, age, and years of service. This review of theoretical and practical implications suggests that increased investment in the development of EI and leadership effectiveness is critical in nursing practice.

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