Effect of Emotional Intelligence Education Intervention on Nursing Students' Emotional Intelligence Level in Nepal

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ABSTRACT

Introduction: Emotional intelligence (EI) is increasingly recognized as an important attribute in healthcare professions, with a growing acknowledgment of its pivotal role in providing patient-centered care. A high emotional intelligence will promote comprehensive coping skills to address stress, conflict, or any negative behavior in academics and work-related environments.

Objective: To assess the effect of emotional intelligence education intervention on nursing students' emotional intelligence level in Nepal.

Methods: A true experimental pretest and posttest control group design was adopted for the study. A total of 240 (120 in each study and control group) nursing students enrolled in final year at selected private nursing campuses of province 2 in Nepal were selected for the study by cluster random sampling. The data was collected using self-administered structured questionnaire and Schutte Self Report Emotional Intelligence Test (SSEIT). Both descriptive (frequency, percentage, mean, Standard deviation) and inferential statistics (Mann Whitney test and Wilcoxon test) were used to analyze data in SPSS vs20.

Results: The findings of the study revealed that there was no significant difference of pretest mean EI score between study and control group as P >0.05, whereas the mean EI scores were significantly higher in study group than the control group as P<0.0001 after emotional intelligence education intervention. Similarly, the study findings also revealed that there was significant difference within study group before and after the intervention as p<0.0001. This shows that there was significant effect of Emotional intelligence education intervention program on study group, whereas in control group there was no significant difference as P>0.05

Conclusion: The present study findings showed that emotional intelligence improved after introducing education intervention for the study subjects with significant improvements across all subscales post intervention. It is recommended that emotional intelligence courses should be included in curriculum of nursing for students to improve emotional intelligence thereby enhancing their self-esteem and quality of life.

KEY WORDS: Education program, Emotional Intelligence, Nursing students, Nepal

INTRODUCTION:

Emotional intelligence (EI) refers to the capacity of any individual or group of

individuals to perceive feelings (both their own and those of others), separate distinct emotions from them, imprint them in a similar manner, and use enthusiastic information to guide and chastise. [1] Emotional intelligence (EI) is increasingly recognized as an important attribute in healthcare professions, with a growing acknowledgment of its pivotal role in providing patient-centered care. Healthcare practitioners with heightened EI possess a unique ability to engage with patients on a profound emotional level, transcending the clinical aspect of care. They excel in clear, empathetic communication, alleviating patient anxieties and significantly enhancing the overall healthcare experience. [2] EI can help health care professionals in dealing with pandemic situation while improving their medical health. [3] Emotional Intelligence is vital in nursing, where compassion and caring are touchstones of the profession. For providing compassionate care, nurses must be able to identify, use, manage and understand emotions not only in themselves but also in others. [4] The nursing students have to encounter many problems to make successful adaptation during the life of stress. [5] Nursing students face mental health challenges like stress, anxiety, and depression. Emotional negativity in nursing students is linked to a number of factors, such as discord in the home, low self-esteem, drinking, loneliness, conflicts between personal and academic obligations, work overload, and disinterest in the course material. While a greater proportion of nursing students reported mental symptoms of PTSD and insomnia, fewer reported mental symptoms of melancholy, anxiety, or stress. [6] During the academic period nursing students are competent in nursing skills but when it comes to actual practice in hospital setting, they find it difficult in applying social skills. Emotional intelligence will help them to balance the professional and personal efficacy by having self-awareness. [7] By fostering empathy and enhancing interpersonal

awareness, emotionally intelligent students can navigate social interactions with clarity and understanding. They are better equipped to resolve conflicts peacefully and receive support from peers and instructors, ultimately reducing stress and enhancing their quality of life. [8] Study findings suggest that only few 11.4% of nursing students had high level of emotional intelligence and strongly recommended that educational workshops and seminars should be conducted regularly for the nursing students on how to develop and improve students' emotional intelligence skills. [9] various studies depicts that only 25.33% [10], 25% [11] had high levels, of EI, 3.5% [12] had less than average levels and more than half 56.60% [13] had low levels of EI among students and nurses. Study conducted in Nepal showed that about 46% of the students were normal and only few students 15% had a high level of emotional intelligence (EI). [14] Similarly, the overall emotional intelligence was poor and students are not aware of themselves, their emotions, strengths and weaknesses hence recommended that the students and the faculty staff of nursing institutions should be exposed to structured soft skills training regularly by means of seminars and workshops. [15] Psychological intervention had significant role in augmenting EI among the adolescents students. [16] Studies finding suggests that emotional intelligence training is effective on increasing emotional intelligence. [17] A competent and confident professional nurse result when emotional intelligence is developed and sustained throughout the basic nursing program. A high emotional intelligence will promote comprehensive coping skills to address any negative behavior in academics and work-related environments. Since Proficiency Certificate Level (PCL) nursing program is one of the basic nursing education programs in Nepal. Nursing students must have adequate emotional intelligence level to understand and regulate their emotions and enhancing the

others. Since there has been relatively little research done regarding Emotional intelligence among nursing students and no study had been done in this context to evaluate the effect of education intervention on nursing students. So, this study aims to assess the effect of emotional intelligence education intervention on nursing students' emotional intelligence level in province 2 Nepal.

MATERIALS AND METHODS
A true experimental pretest and posttest control group design was adopted for the study. The study was carried out among nursing students currently enrolled and studying Proficiency in Certificate Level (PCL) nursing final year at six private nursing campuses of province 2, Nepal selected by cluster random sampling method and who were available during the data collection period in the study sites. Out of selected six campuses three was selected as study group and three was selected as control group by simple random sampling technique and all the students of each cluster was selected for the study in the respective group. The sample size for the study was calculated using G*Power software with the following assumptions: level of emotional intelligence among nursing students being 50 %, 5 % margin of error, 95 %confidence level, power of design being 80%, increase in level of emotional intelligence after intervention is assumed to be 20% and 15% sample loss to follow-up. the minimum sample size was 235. However, total 240 nursing students (120 in each group) of the selected private campuses were sought for data collection. Present Study was conducted after getting RDC from MGU (MGU/Ph.D./RDC2022/2075). Ethical approval was obtained from ethical review board of Nepal Health Research Council (NHRC) (Ref.1690), Nepal to conduct the study. Formal administrative approval was obtained from the campus chief of selected nursing campuses. Written informed consent was taken from the study participants prior to administration of the questionnaire among them. Data were collected from March 2023 to June 2023 by using self-administered structured questionnaire which consisted of two parts, prepared after review of relevant literatures. Part I: This part consisted of information related to socio-demographic factors like age, religion, area of residence, monthly family income, type of family, father's educational status, father occupation, mother's educational status, mother's occupation. Part II: consisted of Schutte Self Report Emotional Intelligence Test (SSEIT), which is a standard and valid tool adopted to assess the emotional intelligence level of nursing students. The self-report emotional intelligence scale is designed and modified by Schutte N, John M, Malouff J M and Bhullar N in 1998. It is based on Salovey and Mayers (1990) original model of emotional intelligence. In validation studies, the test demonstrated high internal consistency (Cronbach's alpha = 0.90) and acceptable test-retest reliability (0.73) as well as excellent construct, predictive, and discriminant validity. Adopted tool was permitted free to use for research and clinical purposes by authors. [18] The scale consisted of 33 items, which were rated on a five-point Likert scale that ranges from "1 = strongly disagree" to "5 = strongly agree". There were three negative statements (5, 28, and 33) which were scored reversely. The total SSEIT score ranged from 33 to 165. The 33-item was based in four subscales: perception of emotions= 10 items; managing own emotions= 9 items; managing other's emotions= 8 items; and utilization of emotions= 6 items. The emotional intelligence score was categorized as Low emotional intelligence (≤111) Average emotional intelligence (111-137) and High emotional intelligence (≥137). [7, 19] The following steps were followed for data collection.
Step I: demographic characteristics and Pre-existing level of students' emotional

intelligence in each of the selected nursing campuses was assessed by using self-administered questionnaire and standard tools before the implementation of emotional intelligence educational intervention program in each group.

Step II: The emotional intelligence education intervention was rendered in a controlled classroom session in students own setting using various teaching learning methods like interactive lecture, media clips, role play, guided discussion and group activity etc. to the students in study group only. The intervention consisted of three days educational session for six hours (i.e. 2 hours session per day consecutively) to complete. Control Group students were involved in their routine classes.

Step III: posttest was done to assess level of emotional intelligence after two weeks, four weeks and eight weeks after the emotional intelligence education intervention program for study and control group using the same tool used for the pre-test. Multiple post-tests at different times were done to explore the effect of education intervention decay.

The collected data were entered, cleaned and analyzed in SPSS (Statistical Package for Social Sciences) version 20. Descriptive statistics including frequency, percentage mean, median and Standard deviation was used to analyze the data and Wilcoxon test for comparison of effectiveness before and after intervention within study and control group. Likewise, Mann Whitney test for comparison of effectiveness between study and control group.

RESULTS

The majority of the students 70.8.% and 64.2% fall in the age group of less than or equal to 20years, regarding religion, most of the students 86.7% and 95.8% of the students follow Hinduism in 85.8% and 90.8% of the students were unmarried, regarding type of family, 63.3% and 70% of the students belong to a nuclear family, more than half 50.8% and 57.5% of the students reside in college hostel in control and study group respectively. Similarly, 44.2% of students' father educational qualification was secondary level in control group and 46.7% of students' fathers educational qualification was higher secondary and above in study group, Likewise, 40% and 30.8% of students' mothers were illiterate; 29.2% and 34.2% of students' mothers educational qualification were secondary level. In regards to occupation most of students' 74.2 % and 71.7% mothers were home-maker. (Table 1 and 2)

Table 1: Respondents' Socio demographic Information. n=240

Variables	Group			
	Control group (n=120)		Study group (n=120)	
	Number	Percent	Number	Percent
Age in completed years				
≤ 20	85	70.8	77	64.2
>20	35	29.2	43	35.8
Mean age ±SD; Min,Max	20.39±2.201; *min 18, max 31*		20.55±1.878; *min 18, max 30*	
Religion				
Hinduism	104	86.7	115	95.8
Islam	07	5.8	3	2.5
Buddhism	09	7.5	2	1.7
Marital Status				
Unmarried	103	85.8	109	90.8
Married	17	14.2	11	9.2
Type of family				
Nuclear	76	63.3	84	70.0
Joint	44	36.7	36	30.0
Monthly Family Income (NRs)				
Less than 10000	19	15.8	13	10.8
10001-20000	36	30.0	25	20.8
20001-30000	37	30.8	28	23.3

More than 30000	28	23.3	54	45.0
Area of Present Residence				
Home	38	31.7	33	27.5
Hostel	61	50.8	69	57.5
Paying Guest/On Rent	21	17.5	18	15.0

Table 2: Respondents' Parental Characteristics n=240

	Group			
	Control group (n=120)		Study group (n=120)	
Variables	Number	Percent	Number	Percent
Education Status of Father				
Illiterate	12	10.0	5	4.2
Primary	19	15.8	21	17.5
Secondary	53	44.2	38	31.7
Higher secondary and above	36	30.0	56	46.7
Education Status of Mother				
Illiterate	48	40.0	37	30.8
Primary	28	23.3	27	22.5
Secondary	35	29.2	41	34.2
Higher Secondary and above	9	7.5	15	12.5
Occupation of Father				
Service	16	13.3	35	29.2
Business	41	34.2	41	34.2
Agriculture	45	37.5	27	22.5
Others	18	15.0	17	14.2
Occupation of Mother				
Service	11	9.2	11	9.2
Business	5	4.2	12	10.0
Agriculture	15	12.5	11	9.2
Homemaker	89	74.2	86	71.7

As presented in Table 3, majority of the respondents 60.0% and 64.2% had low level of Emotional intelligence in control and study group respectively, 35.8% and 30.0% had average level of emotional intelligence and only few 4.2% and 5.8% of respondents were having high level of emotional intelligence in control and study group respectively.

Table 3: Respondents' Emotional Intelligence Score n=240

Level of Emotional Intelligence	Group	
	Control group (n=120) Number (%)	Study group (n-120) Number (%)
Low (<111)	72 (60.0)	77 (64.2)
Average (111-137)	43 (35.8)	36 (30.0)
High (>137)	5 (4.2)	7 (5.8)

Data presented in table 4 depicts the overall mean score of Emotional Intelligence (EI) between study and control group, where there is no significant difference of pretest mean EI score between study and control group as P >0.05, whereas the mean EI scores was significantly higher in study group than the control group as P<0.0001 in Post test I, posttest II and posttest III.

As revealed in table 5 which showed the comparison of EI mean score before and after intervention in study and control group which shows that there is significant difference in study group as p<0.0001 at Post test I, II and III. This shows that there was significant effect of Emotional intelligence education intervention program on study group, whereas in control group there is no significant difference as P>0.05

Table 4: Emotional intelligence Mean Score between Study and Control Group n=240

Time duration	Study group (n =120)		Control group (n=120)		Mann Whitney test z value	P value
	Mean	**SD**	**Mean**	**SD**		
Baseline	100.82	23.90	100.81	24.778	-0.06	9.53
Post test I	142.63	8.416	101.97	24.32	-12.100	0.000**
Post test II	143.27	8.032	101.94	24.307	-12.254	0.000**
Post test III	142.01	8.43	102.01	24.314	-12.005	0.000**

** significant at P<0.000

Table 5: Comparison of Emotional Intelligence Mean Score Before and After Intervention

Group		Before	After		
		Baseline	**Post test I**	**Post test II**	**Post test III**
Study (n =120)	Mean	100.82	142.63	143.275	142.01
	SD	23.906	8.416	8.032	8.430
	Wilcoxon Z value	-	9.43	9.44	9.41
	P value	-	0.000**	0.000**	0.000**
Control (n =120)	Mean	100.81	101.97	101.94	102.01
	SD	24.778	24.32	24.307	24.314
	Wilcoxon Z value	-	-1.381	-1.367	-1.378
	P value	-	0.167	0.172	0.168

** significant at P<0.0001

Data shown in table 6 and 7 represents the comparison of subscale mean score of emotional intelligence which shows non-significant difference in study and control group as P>0.05 before intervention. The comparison of subscale wise mean score of EI in study and control group after the intervention shows that there is significant difference in Post-test I, II and Posttest III subscales mean score as P<0.0001. This shows that there was significant effect of Emotional intelligence education intervention program on study group.

Table 6: Subscale Wise mean Score of Emotional Intelligence before the Intervention

Subscales of EI	Study group (n=120)		Control group (n=120)		Mann Whitney test Zvalue	P Value
	Mean	**SD**	**Mean**	**SD**		
Perception of emotion	30.88	7.291	30.45	7.327	-0.406	0.685
Managing own emotion	27.62	7.413	27.72	7.202	-0.070	0.944
Managing others emotion	24.18	6.175	24.43	6.667	-0.251	0.801
Utilization of emotion	18.43	5.351	18.21	5.056	-0.233	0.816

Table 7: Subscale wise mean score of Emotional intelligence after the intervention

Subscales of EI	Study group (n=120)		Control group (n=120)		Mann Whitney test Zvalue	P Value
	Mean	**SD**	**Mean**	**SD**		
Post test I						
Perception of emotion	42.37	3.111	31.24	7.454	-11.286	0.000**
Managing own emotion	39.30	2.972	27.73	7.146	-11.688	0.000**
Managing others emotion	34.47	2.618	24.41	6.211	-11.416	0.000**
Utilization of emotion	26.49	2.477	18.59	5.362	-10.670	0.000**
Post test II						
Perception of emotion	42.62	2.994	31.23	7.457	-11.485	0.000**
Managing own emotion	39.46	2.852	27.72	7.127	-11.882	0.000**
Managing others emotion	34.67	2.555	24.41	6.211	-11.580	0.000**
Utilization of emotion	26.53	2.408	18.59	5.362	-10.725	0.000**
Post test III						
Perception of emotion	42.18	3.084	31.27	7.433	-11.186	0.000**
Managing own emotion	39.13	3.024	27.75	7.156	-11.559	0.000**
Managing others emotion	34.28	2.670	24.41	6.211	-11.261	0.000**
Utilization of emotion	26.41	2.478	18.58	5.356	-10.608	0.000**

** significant at P<0.0001

DISCUSSION

Overall, it was observed that almost similar respondents 60.0% and 64.2% had low level of Emotional intelligence in control and study group respectively, 35.8% and 30.0% had average level of emotional intelligence and only few 4.2% and 5.8% of respondents were having high level of emotional intelligence in control and study group respectively before emotional intelligence education intervention. The study findings are in congruent with the study findings of Ghorpade et al [20] which revealed that 48% in study and 48.4% of students in control group had average emotional intelligence and Only 18% and 17.2% of students had high emotional intelligence in study and control group respectively. The present study also showed similar findings on a study conducted by Faye et al [21] in India where 70% of the post-graduate medical students had low EI scores. Similarly, the finding of the present study is consistent with the findings of the study which showed that only few 11.4% of the studied students had high levels of emotional intelligence. [7]

The study findings also revealed that the baseline emotional intelligence mean score of nursing students in study group was 100.82± 23.90 and in control group 100.8±24.778. The baseline mean scores were similar in study and control group where there was no significant difference of pretest mean EI score between study and control group as P >0.05, The study findings are in same line with the study finding of Kamel et al [22] which revealed that the pretest mean score in study and control group were similar and there was no significant difference of pretest EI mean score between study and control group. Findings of current study is also congruent with the study conducted by Ghorpade et al [20] which revealed that the pretest mean score in study group was 122.87± 15.93 and in control group 122.22 ±16.10 and Fletcher et al [23] also revealed the similar findings as in study group

pretest mean score was 95.9±11.9 and in control group was 98.9± 13.9. where there was no significant difference of pretest mean EI score between study and control group as P >0.05.

The current study findings regarding the comparison of EI mean score before and after intervention within study and control group showed that the EI means scores in study group improved from 100.82±23.90 to 142.63±8.416 in posttest I, 143.275±8.032 in posttest II and 142.01±8.430 in posttest III, which revealed that there was significant difference in study group before and after intervention as p<0.0001 at Post test I, II and III. This shows that there was significant effect of Emotional intelligence education intervention program on study group, whereas in control group the EI mean score improved from 100.81±24.778 to 101.97 ±24.32 in posttest I, 101.94±24.307 in posttest II and 102.01±24.314 in posttest III, which depicted that there was no significance difference as P>0.05. These findings are congruent with the study findings of Ghorpade et al[20] which revealed that EI means scores in study group improved from 122.87± 15.93 to 135.69±12.06 in Post-test I, II and III, which revealed that there was significant difference in study group as p<0.0001. Similar findings were seen in a study finding [22] which reported the significant change in emotional intelligence score after the EI training intervention as reported P value was 0.038 (P<0.05) in study group. Similarly, study [24] reported consistent findings that there was improvement in mean score of emotional intelligence in study group from 44.57 ± 4.82 to 74.95 ± 5.27 as evident from p =0.001(p<0.05) also the study findings [23] showed that in study group the emotional intelligence improved from 95.9±11.9 to 104.0± 10.1 which was statistically significant. whereas in control group the mean scores were decreased from 98.8 ±13.9 to 96.9±15.8. Study findings [17] also reported that there is significant relationship between emotional

intelligence scores pre and post intervention as p<0.05

Present study findings also revealed that the EI mean score between study and control group after the intervention was significant as evident from p<0.0001, which is supported by the study findings [20,24] which also revealed that EI mean score between study and control group was significant as evident from p<0.0001 and p<0.05 after the intervention respectively.

The highest pre-test mean score was found in perception of emotion in study 30.88±7.291 and 30.45±7.327 in control group. Similar findings were reported in study [20] where the highest pre-test mean score was found in perception of emotion in study 36.00±4.470 and 35.74±4.434 in control group. The study conducted by Pradhan et al [25] also found that the mean score of perception of emotion was 35.64±4.32. similarly, Lekshmi et al [26] also reported the highest mean score in subscale perception of emotion being 36.9±4.9.

The lowest mean score was found in utilization of emotion in study 18.43±5.351 and in control group 18.21± 5.056 in present study which is consistent with the study findings [12] which depicted the lowest mean score in utilization of emotion in study 22.38±3.415 and in control group 22.27± 3.430. Similar finding was shown in study [25] where mean score of utilization of emotion was 24.72±2.7. Similarly, study conducted by Ibrahim H, et al [27] found that the mean score of utilization of emotion of nursing students was the lowest.

The present study findings also revealed that the comparison of subscale wise mean score of EI in study and control group after the intervention which showed there was significant difference in Post-test I, II and Posttest III subscales mean score after intervention as P<0.0001. Similar findings were reported in study [20,22] which showed that there was significant difference in posttest subscales mean score after the intervention.as P<0.0001.

CONCLUSION

On the basis of findings of the present study, it can be concluded that most of the participating nursing students exhibited low levels of emotional intelligence with significant improvements post-intervention in the study group which demonstrated that there was significant effect of emotional intelligence education program on Nursing students in study group. This intervention has improved across all subscales of Emotional intelligence like perception of emotion, managing own emotion, managing emotions of others and utilization of emotion. The findings also indicated that EI can be taught and learned through an educational program. Also, it is recommended that emotional intelligence courses should be included in the nursing curriculum to improve the emotional intelligence which may ultimately enhance the self-esteem and quality of life of nursing students.

Declaration by Authors

REFERENCES

1. Whitmire A. Learning in Action. 2018 [cited 2023 Nov 25]. What is Emotional Intelligence? And What's Missing? Available from: https://learninginaction.com/what-is-emotional-intelligence/
2. Birks YF, Watt IS. Emotional intelligence and patient-centred care. J R Soc Med. 2007 Aug;100(8):368–74.
3. Kumar A. Emotional intelligence can help healthcare professionals and managers: A way deal COVID -19 pandemic. Asian Journal of Management. 2021;12(4):353-8

4. Senyuva, E, Kaya, H, Isik B, Bodur, G. Relationship between self-compassion and emotional intelligence in nursing students. International Journal of Nursing Practice. 2014; 20: 588-96 doi:10.1111/ijn.12204

5. Smitha J Thundiparampil, Ratnachhaya Singh, ChristyJT. Emotional and spiritual intelligence and their coping ability among the nursing students in selected settings in kerala. International Journal of Nursing Education and Research. 2023; 11(1):49-56.

6. Mofatteh M. Risk factors associated with stress, anxiety, and depression among university undergraduate students. AIMS Public Health. 2021;8(1):36.

7. Ghorpade M, Dasila P, Krishnan SG. A study to assess the emotional intelligence among nursing students of selected nursing college in Pune. Int J of Scientific Research and Review. 2017; 6 (11): 1-5

8. Babatunde F, Haruna S, Omotayo A. Emotional Intelligence in Conflict Management and Leadership Effectiveness in Organizations. International Journal of Research. 2023Mar; 10 (3):146-165.

9. Mohamed SA. Relationship between emotional intelligence and self-esteem among nursing students. Egy Nurs J. Jan 2019;16(2):53-8.

10. Kaur S, Jiwan T. An Exploratory Study to Assess Emotional Intelligence and Performance of Students of Selected Nursing Institute, Ludhiana, Punjab. *Asian J. Nur. Edu. & Research 4(3): July- Sept., 2014; Page 346-351*

11. Sreedevi T, Drisya. G. Correlation between Parenting Styles and Emotional Intelligence among Adolescents *Asian J. Nursing Education and Research. 2021; 11(3):345-350.* DOI: 10.52711/2349-2996.2021.00083

12. 003 Ravi RK, Paul S, Jose, N. Emotional Intelligence among Nurses working in a Tertiary Care Hospital, Kerala, South India *Asian J. Nursing Education and Research. 2021; 11(4):451-454.* DOI: 10.52711/2349-2996.2021.00109

13. Deepak A, Krishnamoorthy K. Emotional Intelligence- A Questionnaire Based Study *Research J. Pharm. and Tech. 2016; 9(7):772-774* DOI: 10.5958/0974-360X.2016.00147.5

14. Sinha B, Bajracharya R, Pandey S, Sobhita KC, Koirala S, Kushwaha MP. Emotional intelligence among undergraduate nursing students. Int J Sci Res Publication. 2017;7(12):622-9.

15. Joshi J. et al. Evaluation of Psychology emotional intelligence among students of nursing college. Int J Indian Psychol. 2017; Sep 25;4(4):166-81.

16. Sampoornam W. Efficacy of psychological intervention on emotional intelligence among adolescents in selected schools at Erode, India. A and V Pub Journal of Nursing and Medical research.2023;2(1):1-3.

17. Kuruvilla J, Menezes PM. Effect of Emotional Intelligence Training on Emotional Intelligence of graduate Nursing Students *Asian J. Nursing Education and Research. 2019; 9(3):289-292.* DOI: 10.5958/2349-2996.2019.00062.4

18. Schutte NS, Malouff JM, Hall LE, Haggerty DJ, Cooper JT, Golden CJ, et al. Development and validation of a measure of emotional intelligence. Pers Individual Differ. 1998;25(2):167-77

19. https://www.veritas-itc.com/wp-content/uploads/2020/12/The-Schutte-Self-Report-Emotional-Intelligence-Test.pdf

20. Ghorpade. M, Dasila. P, Gopalkrishnan. S. Effect of Training Program on Emotional intelligence among Nursing Students in Selected Nursing Colleges of Maharashtra. *International Journal of Indian Psychology.* 2019; *7*(2), 424-432.DIP:18.01.051/20190702, DOI:10.25215/0702.051

21. Faye A, Kalra G, Swamy R, Shukla A, Subramanyam A, Kamath R. Study of emotional intelligence and empathy in medical postgraduates. Indian journal of psychiatry. 2011; 53:140-4. DOI: 10.4103/0019-5545.82541

22. Kamel NAF, Gamal AM, Lachine OR, Nabi Moussa AWA. Effect of Emotional Intelligence Training Intervention on Nursing Students' Emotional Intelligence and Empathy Level. Alexandria Scientific Nursing Journal. 2018: 20 (2): 97-114. DOI: 10.21608/asalexu.2018.208196

23. Fletcher I, Leadbetter P, Curran A, Sullivan H. A pilot study assessing emotional intelligence training and communication skills with 3rd

year medical students. *Patient education and counselling.* 2009; 377-380. doi: 10.1016/j.pec.2009.07.019

24. Al-Metyazidy Heba A, El-Ghafar S, Soheir MW. The effect of emotional intelligence intervention on nursing students' practice and patients' clinical outcomes at burn intensive care unit. Journal of Nursing Education and Practice. 2019;9(7):18-30 DOI: 10.5430/jnep.v9n7p18 .URL: https://doi.org/10.5430/jnep.v9n7p18

25. Pradhan U et al. Emotional Intelligence among Undergraduate Nursing Students in Selected Colleges of Morang District, Nepal. BJHS 2021;6(3)16. 1590 - 1594. DOI: https://doi.org/10.3126/bjhs.v6i3.43199

26. Lekshmi MS, Sreeja I, Premini S. Emotional Intelligence and Wellbeing among Adolescents. *Int. J. Nur. Edu. and Research.* *2018; 6(2): 145-150.* DOI: 10.5958/2454-2660.2018.00034.0

27. Ibrahim HAF,Elgzar WTI, Mohamed RE, Salem,GM. Relationship Between Nursing Students' Emotional Intelligence and Their Clinical Performance During Obstetrics and Gynecologic Nursing Practical Training. *American Journal of Nursing Science.* 2016; 5 (6): 240-250. doi: 10.11648/j.ajns.20160506.12

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