Original Research Article

The Impact of Self-Compassion and Emotional-Intelligence among registered nurses

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Abstract: The main purpose of current study was to assess the relationship between self-compassion and emotional intelligence among nurses. For the accomplishment of this purpose 153 registered nurses were selected as study participants from Punjab Institute of Mental Health, Lahore. Well-constructed questionnaires by Dr. Neff were distributed among staff nurses to collect data. Data analysis was done on SPSS version 21. Descriptive analysis, correlation and regression tests were applied for the analysis of results. The results of study show positive relationship in both variables among nurses. Self-compassion as constant variable effects on dependent variable that shows emotional intelligence or emotional wellbeing of nurses can vary due to independent variable.
Keywords: Nurses, compassionate care, Emotional intelligence, Relationship

INTRODUCTION

Nurses deliver the autonomous and compassionate care to the clients physically, mentally, socially and spiritually. The purpose of nursing care includes the care of sick persons, prevention of illness and promotion of health [1]. Nurses are trained to provide the care to the individuals of all age groups [1].

Dealing with the suffering of other people in the pain and have an internal feeling to bring out them from pain is called compassion [2]. Compassion has the power to motivate the patients for healing and it even encourages hospitalized and suffered patients for healthy progress. Nurses' self-compassion leave the evergreen effects on the patient care and their families [3]. In addition, nurses act as leaders as well at the clinical site and can they can create a compassionate care team. In teamwork highlighting the positive aspects of compassion and criticizing the negative aspects can improve the morale of the nursing staff to provide the quality patient care [4]. The study suggests that self-care is required for care of patients [5].

According to Heffernan and Griffin [6] self-compassion comprised of three elements self-kindness, self-judgement and common humanity. These elements are inter-related, if these elements are well developed among the nurses than it can ensure the compassionate care to the patients [6].

However, emotional intelligence is an insight of an individual to see precisely his/her own and others' feelings and to deal with all such feelings rationally [7]. Testa [8] emphasizes that emotional intelligence in nurses have major importance due to the ability of emotions identification and the skill to apply these emotions in thought process and deal with emotions of one's self and others in the accomplishment of the professional goals. Likewise, eemotional intelligence is an important characteristic for the nurses as it smooths the creative thinking and decision making in the critical situation. However, either the nurses provide the care services at the patients' bed or even in the management, the emotional intelligence of nurses play a key role to control one's own and others' emotions [9].

However, Heffernan *et al.* [6] describes that well-being, self-control, emotionality and the sociability are the four components of the emotional intelligence.

The study noted that self compassion and emotional inteeligence has positive significant association [10]. In nurses the self compassion and emotional intelligence both are necessary because they

have to look after the mentally retarted as well as physically ill persons [10].

This study investigates the effect of the self-compassion on the emotional intelligence among the nurses of the public mental hospital Lahore, Pakistan. In the previous literature, the relationship between self-compassion is not documented well and both elements are necessary among the nurses of the mental hospital as they treat the mentally sick patients which requires the self-compassion and strong emotionally stable staff.

Research Problem
Self-compassion and the emotional stability of the nurses have vital role to improve the quality of nursing care which is unfortunately decreasing with the passage of time. In the mental hospitals, nurse's self-compassion and emotional intelligence both are important elements as the they have to look after the mentally sick patients [10]. Although, patients have the right to be get the treatment with courtesy and respect but unfortunately patients reported the lower satisfaction from the nursing staff as they don't get feel the courtesy and respect [6]. The problem is even aggressive in the public mental hospitals of the developing countries. Thus, it is necessary to investigate the effect of self-compassion on the nurses' emotional intelligence of public mental hospital of Pakistan.

Significance of study
This study will provide the information regarding influence of self-compassion and emotional intelligence to the staff of the health care. Moreover, this study will highlight the importance of the self-compassion and emotional intelligence among the nurses of the mental healthcare institutes. Likewise, this study results will be helpful for the government, policy makers and hospital's management while making strategies to provide the better caring health services to the mentally sick patients and other as well.

Purpose of Study
The purpose of this research study is to find the relationship between self-compassion and emotional-intelligence among the nurses of the Punjab Institute of Mental Health, Lahore, Pakistan.

Objective of the study
- To examine the extent of relationship between self-compassion and emotional intelligence among the nurses of Punjab Institute of Mental Health, Lahore.

LITERATURE REVIEW
Self-compassion emphasize that all people are important and commendable paying little respect to their physical abilities or accomplishment. Self-compassion among the nurses is necessary because they

have to pay more attention to the patients for better recovery [11]. The study emphasizes that nurses should become broad minded and motivated, feel soft for others, developing an understanding, adopt the attitude to over-look the bad experiences to provide the compassionate care to the patients [6].

Heffernan *et al.* [6] noted that the three elements of self-compassion, first is common humanity means the shared human experiences, second is self-kindness means the self-actualization of oneself in pain and third is self-judgement means identification of self-emotions. However, Akerjordet and Severinsson [12] describes the emotional intelligence as the essential component of the authority and the absence of it among the nurses cannot prove them as extraordinary pioneer or a great leader.

The study found the significant positive relationship between self-compassion and emotions stability [6]. In addition, the study describes the emotions as a source of joy and people feel more happiness when they are self-compassionate. Self-compassion and forgiveness are positively associated with each other because the highly compassionate people have the quality to understand and manage emotions of self and others. This quality is highly required for the nursing leaders and management of the health care sector [13].

Akerjordetk and Severinsson [12] mention that emotional intelligence is vital while nursing practices. The emotional intelligence of the nursing leadership influence both the environment and individuals [12].

Consequently, Bramley and Matiti [14] determines that nursing is a fundamental element of the patient care whose responsibility is to remain compassionate while caring the patients and it ultimately enhances the emotional intelligence. On the other hand, lack of compassion among the nurses become the source of barrier for communication between the patients and nurses [14].

Furthermore, the study emphasizes that decision making is connected to the emotonal intelligence and effective dealing and control of the emotion is a key to success at the workplace [9]. Though, nurses with high emotional intelligence seems to have effective therapeutic relationship with patients as it enhance the ability of the nurse to forwards the symphatic message of care to the patient which reduce anxieny and promote wellbeing of the patient [9]. Likewise, emotionally intelligent nurse leader can effectively lead the department even in the worst situation [12]. In addition, the study noted the significant positive association between self-compassion and emotional intelligence [7].

Kemerer and Cwiekala [15] noted that self-control is the ability of an individual which is greatly linked with the emotional intelligence.In healthcare organization, while providing nursing care to the critical patients which create the anxiety in the environment and also prove as the emotional discouragement. Hence, nurses are responsible to provide the patient care services to the critical and average sick patients which reuire the emotioal intelligence and it can be achieved through self-compassion and self-determination [15].

MATERIALS AND METHODS

The current study investigates the relationship between self-compassion and emotional intelligence among nurses of Punjab Institute of Mental Health, Lahore. In this study, explanatory and quantitative study design has used. The sample size of this study was 153. The questionnaire of self-compassion (30 items) and emotional intelligence (12 items) of Neff [16] was used which measure the responses on 5-point Likert scale ("1 Strongly disagree" to "5 Strongly agree"). The self-administered questionnaires were distributed through convenient sampling technique to 200 staff nurses of the mental hospital Lahore, Pakistan and 165 questionnaires were returned out of which 153 were useable. SPSS 21 was used to test the frequencies, correlation, reliability, validity and regression analysis.

Hypothesis

Ho: There is no positive relationship between self-compassion and emotional intelligence.
H1: There is positive relationship between self-compassion and emotional intelligence.

DATA ANALYSIS AND RESULTS

Three portions of analysis were used in this chapter. First section was demographic portion comprised of organization, designation, gender, age, job experience, marital status, qualification and religion. The second portion was consisting of questionnaires regarding self-compassion and emotional intelligence.

DEMOGRAPHIC ANALYSIS
Organization of participants

Table-1: Organization name of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Punjab Institute of Mental Health	153	100.0	100.0	100.0

Table 1 shows that 100% (153) of the study participants were selected. All participants were from Punjab Institute of Mental Health, Lahore.

Designation of participants

Table-2: Designation of participants

Frequency	Percent	Valid Percent	Cumulative Percent
153	100.0	100.0	100.0

Table 2 shows that in this study 100% (153) nurses working at the designation of staff nurses were selected to collect the data.

Gender of participants

Table-3: Gender of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Female	153	100.0	100.0	100.0

Table 3 shows that 100 % (153) staff nurses participates were females in this study.

Age of participants

Table-4: Age of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	20-25 years	37	24.2	24.2	24.2
	26-30	82	53.6	53.6	77.8
	31-35	27	17.6	17.6	95.4
	36- 40	7	4.6	4.6	100.0
	Total	153	100.0	100.0	

Table 4 depicts that age of the study participants. The results show that 24.2% (37) staff nurses were from 20-25 years of age group, 53.6% (82) were of 26-30 years of age, 17.6 % (27) nurses were from 31-35 years and 4.6% (7) nurses were from age group of 36-40 years.

Job experience of Participants

Table-5: Job experience of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	< 1 year	35	22.9	22.9	22.9
	1- 5 year	76	49.7	49.7	72.5
	6-10 year	38	24.8	24.8	97.4
	Above 10 year	4	2.6	2.6	100.0
	Total	153	100.0	100.0	

Table 5 shows the distribution of job experience of the study participants. The results show that 22.9% (35) have less than 1 year of job experience, 49.7% (76) have job experience between 1-5 years, 24.2% (37) participants have job experience between 6-10 years and 2.6% (4) nurses have more than 10 year job experience.

Marital status

Table-6: Martial status of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Married	84	54.9	54.9	54.9
	Unmarried	69	45.1	45.1	100.0
	Total	153	100.0	100.0	

Table 6 show that 54.9% (84) of the study participants were married and 45.1% (69) were unmarried.

Qualification of participants

Table-7: Qualification of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Nursing Diploma	143	93.5	93.5	93.5
	Specialization	3	2.0	2.0	95.4
	Post RN	7	4.6	4.6	100.0
	Total	153	100.0	100.0	

Table 7 show that 93.5% (143) of the study participants have nursing diplomas, 1.3% (2) of the nurses were specialized, 4.6% (7) have degrees of Post RN BSN.

Religion of participant

Table-8: Religion of participants

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Muslim	144	94.1	94.1	94.1
	Other	9	5.9	5.9	100.0
	Total	153	100.0	100.0	

Table 8 show that 93.5% (143) of the study participants were Muslims and 5.9% (9) were non-Muslims.

Reliability of Self Compassion

Table-9: Reliability Statistics

Cronbach's Alpha	N of Items
.720	12

Table 9 show the reliability of 12 items of self-compassion. The value of Chronbach alfa is .720 which is under the recommended value. So, the scale of self-compassion is reliable.

Reliability of Emotional intelligence

Table-10: Reliability Statistics

Cronbach's Alpha	N of Items
.735	30

Table 10 show the reliability of 30 items of emotional intelligence. The value of Chronbach alfa is .735 which is under the recommended value. So, the scale of emotional intelligence is reliable.

Validity Test
Self-Compassion

Table-11: KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.697
Bartlett's Test of Sphericity	Approx. Chi-Square	291.478
	Df	66
	Sig.	.000

Table 11 show that KMO value is .697(>0.50) and Bartlett's test of sphericity is also significant (p<0.05) which show that the scale of self-compassion is significant.

Emotional Intelligence

Table-12: KMO and Bartlett's Test

Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.684
Bartlett's Test of Sphericity	Approx. Chi-Square	1050.073
	Df	435
	Sig.	.000

Table 12 show that KMO value is .684 (>0.50) and Bartlett's test of sphericity is also significant (p<0.05) which show that the scale of emotional intelligence is significant.

Correlations

Table-13: Correlations

		Self-compassion	Emotioal_Intelligence
Self-compassion	Pearson Correlation	1	.458[**]
	Sig. (2-tailed)		.000
	N	153	153
Emotioal_Intelligence	Pearson Correlation	.458[**]	1
	Sig. (2-tailed)	.000	
	N	153	153

**. Correlation is significant at the 0.01 level (2-tailed).

DESCRIPTION

Table 13 show the correlation between the interest variable of the current study. The results show that self-compassion has significant (p<.05) positive correlation (r=.458) with nurses' emotional intelligence.

Regression Analysis

Table-14: Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate	Change Statistics					Durbin-Watson
					R Square Change	F Change	df1	df2	Sig. F Change	
1	.458[a]	.210	.205	.362	.210	40.098	1	151	.000	1.452

Model Summary[b]

a. Predictors: (Constant), Self_compassion
b. Dependent Variable: Emotioal_Intelligence

Table-15: ANOVA[a]

Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	5.242	1	5.242	40.098	.000[b]
	Residual	19.738	151	.131		
	Total	24.980	152			

a. Dependent Variable: Emotional-Intelligence

Table-16: Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	2.198	.134		16.424	.000
	Self-compassion	.313	.049	.458	6.332	.000

DESCRIPTION

A simple linear regression was applied to analyze the relationship of self-compassion with emotional intelligence. Table 14 show that the 20.6% variation is explained in the emotional intelligence by the self-compassion. Table 15 describes the significance of the theoretical framework of this study. However, table 16 depicts that if the one unit of the self-compassion increases the change of .313 will occur in the nurses' emotional intelligence.

DISCUSSION & CONCLUSION

The current study investigates the relationship between self-compassion and emotional intelligence among the nurses of the public mental health institute of Lahore, Pakistan due to its importance for the effective patient health care. Table 12 also shows the positive and significant correlation between the self-compassion and emotional intelligence. However, table 14 describes that the 20.6% variation occur in the emotional intelligence is explained by the self-compassion. Though, the administration of the public mental healthcare institutes should enhance the focus on the importance of self-compassion and emotional intelligence of the nurses. They should facilitate and encourage the nurses so that they feel high and self-compassion and emotionally stable as well.

REFERENCES
1. World Health Organization (2017). The Nurse & Midwives at WHO; Health Professions Role in Primary Health Care.
2. Keren, G. (2013). A tale of two systems a scientific advance or a theoretical stone soup? Commentary on Evans & Stanovich (2013). Perspectives on Psychological Science, 8(3), 257-262.
3. Mills, J. and M. Chapman (2016). Compassion and self-compassion in medicine: Self-care for the caregiver, Australasian Medical Journal Pty Ltd Hillarys, GPO BOX 367, PERTH, WA 6923, Australia.
4. Haslam, D. (2015). More than kindness. *Journal of Compassionate Health Care*, *2*(1), 6.
5. Dabbaghjamanesh, M., Moeini, A., Ashkaboosi, M., Khazaei, P., & Mirzapalangi, K. (2016). High performance control of grid connected cascaded H-Bridge active rectifier based on type II-fuzzy logic controller with low frequency modulation technique. International Journal of Electrical and Computer Engineering, 6(2), 484.
6. Heffernan, M., Quinn Griffin, M. T., McNulty, S. R., & Fitzpatrick, J. J. (2010). Self-compassion and emotional intelligence in nurses. *International journal of nursing practice*, *16*(4), 366-373.
7. Teleb, A. A., & Al Awamleh, A. A. (2013). The relationship between self compassion and emotional intelligence for university students. *Current Research in Psychology*, *4*(2), 20.

8. Testa, D. (2014). An Empirical Study on the Association of Mindfulness and Emotional Intelligence to Burnout Among Counselors-in-Training, University of Akron.
9. Cheshire, M. H. (2013). Emotional intelligence: Relationship with traditional evaluation methods in nursing, The University of Alabama TUSCALOOSA.
10. Codier, E., Freitas, B., & Muneno, L. (2013, January). Developing emotional intelligence ability in oncology nurses: a clinical rounds approach. In *Oncology nursing forum* (Vol. 40, No. 1).
11. Major, M. M. (2016). The Effect of Emotionally Intelligent Relationships on Patient Satisfaction with Nursing Care, Benedictine University.
12. Akerjordet, K., & Severinsson, E. (2010). The state of the science of emotional intelligence related to nursing leadership: an integrative review. *Journal of Nursing Management*, *18*(4), 363-382.
13. Skoda, A. M. (2011). The relation between self-compassion, depression, and forgiveness of others, University of Dayton.
14. Bramley, L. and M. Matiti (2014). "How does it really feel to be in my shoes? Patients' experiences of compassion within nursing care and their perceptions of developing compassionate nurses. Journal of clinical nursing 23(19-20): 2790-2799.
15. Kemerer, D., & Ćwiekala-Lewis, K. (2016). Emotional Intelligence For Leaders In Nursing. *Polish Nursing/Pielegniarstwo Polskie*, *62*(4).
16. Neff, K. D. (2003). The development and validation of a scale to measure self-compassion. Self and identity, 2(3), 223-250.