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EFFECT OF LIFE SKILLS TRAINING ON EMOTIONAL INTELLIGENCE AMONG NURSING OFFICERS AT SELECTED TERTIARY CARE HOSPITAL

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ABSTRACT

Background: Nurses are on the frontline of patient interaction in any clinic or hospital. Being emotionally intelligent means understanding ourselves, handling our emotions in a mature way, understanding others and helping them to handle their emotions. Life skills training helps to build confidence in communication, cooperative and collaborative skills, problem solving, socializing and recognize the impact of their actions. Methods: One Group Pre-test Post-test Research design was adopted in this study. The study was conducted in 50 Nursing Officers were selected by using Convenient Sampling Technique. Standardized tool (Schutte Emotional Intelligence Scale) was used to assess the Emotional Intelligence of the Nursing Officers. The data was analysed for frequency, percentage, mean, standard deviation. The effect of Life Skills Training was analysed by using Paired t-test. Association between pre-test level of Emotional Intelligence and demographic variables was analysed by using Fisher's Exact test. Conclusion: There was significant increase in the post-test level of Emotional Intelligence as compared to the pre-test level of Emotional Intelligence and the increase was statistically significant at p < 0.05. There was statistically significant association between the pre-test level of Emotional Intelligence and demographic variables like years of work experience, working area at p < 0.05. The study findings suggests that Life Skills Training is found to be efficient in improving the Emotional Intelligence of Nursing Officers.

Key words: Life Skills Training, Emotional Intelligence, Nursing Officers

INTRODUCTION

According to World Health Organisation (WHO), Life skills are the abilities for adaptive and positive behaviour that enable individuals to deal effectively with the demands and challenges of everyday life. [1] Emotional intelligence, on the other hand, is defined by another eminent researcher, Bar-On, as "a range of non-cognitive capabilities, competencies, and skills that influence one's ability to successfully cope with environmental demands and pressures." The conversion of emotional intelligence into on-the-job skills is facilitated by emotional competence. For instance, one must have acquired the specific empathic abilities necessary for efficient bedside nursing, caring pastoral counselling, and psychotherapy in order to truly understand another person's suffering. Like

any healthcare professionals, nurses strive to reach their full potential and work successfully in the field. While medical education provides the knowledge necessary for performing their jobs, acquiring life skills will boost their success and allow them to enjoy their careers to the fullest.

Objectives

- 1. To assess the level of Emotional Intelligence among Nursing Officers.
- 2. To determine the effect of Life Skills Training on Emotional Intelligence among Nursing Officers.
- 3. To associate the pre-test level of Emotional Intelligence with selected demographic variables.



MATERIALS AND METHODS

Quantitative research approach using One Group Pre and Post-Test Research Design was adopted. The study was conducted among 50 nursing officers working in villupuram medical college and hospital. Nursing Officers who met the inclusion criteria were selected by using convenient sampling technique.

Data collection instrument and technique: Tool

Section – A: Self report questionnaire consisted of age, gender, education, marital status, type of family, residence, years of work experience, working area, monthly income. **Section – B:** The standardised tool Schutte Emotional Intelligence Scale consists of rating scale with 33 statements in which the study participants should rate them from 5 to 1.

RESULTS AND DISCUSSION

Research Article

Score Interpretation

Total score = 165

Less than 111 - Low Emotional Intelligence 111 - 137 - Average Emotional Intelligence Above 137 - High Emotional Intelligence

Description of the intervention

Informed consent was obtained from the participants after explaining the purpose of the study and pre-test (Demographic data and Schutte Emotional Intelligence Scale) was conducted. The study participants were divided into two groups. One group attended the training in the morning and the other group attended the training in the evening. Life skills Training was provided for 8 days daily and each session for 45 minutes. After 14 days of Life Skills Training, post-test was conducted for the same participants using the same tool.

S. No.	Demographic variables	Frequency	Percentage
1.	Age (years)		
	a. 21 – 30	45	90.0
	b. 31 – 40	4	8.0
	c. 41- 50	1	2.0
2.	Gender		
	a. Male	2	4.0
	b. Female	48	96.0
3.	Marital status		
	a. Married	12	24.0
	b. Unmarried	38	76.0
4.	Type of family		
	a. Nuclear	24	48.0
	b. Joint	24	48.0
	c. Single-parent	2	4.0
5.	Residence		
	a. Rural	26	52.0
	b. Urban	19	38.0
	c. Semi-urban	5	10.0
6.	Education		
	a. UG	48	96.0
	b. PG	2	4.0
7.	Years of work experience		
	a. Less than or equal to 1 year	15	30.0
	b. 2 years	8	16.0
	c. 3 years	7	14.0
	d. Greater than or equal to 4 years	20	40.0
8.	Working area		
	a. Ward	30	60.0
	b. OPD	4	8.0
	c. OT	4	8.0
	d. Emergency/ICU	12	24.0
9.	Monthly income (Rs.)		
	a. Less than or equal to 15,000	26	52.0
	b. 15,001 – 30,000	22	44.0
	c. 30,001 – 45,000	1	2.0
	d. Above 45,000	1	2.0

Table 1 shows that majority of Nursing Officers 45 (90%) belongs to the age group between 21-30 years. Most of them 48 (96%) were female. Almost 38 (76%) were unmarried. 24 (48%) belong to nuclear and another 24 (48%) belong to joint family. Mostly 26

(52%) belong to rural area. Majority of them 48 (96%) were undergraduate. 20 (40%) of them has greater than or equal to 4 years of working experience. Larger part 30 (60%) of them were working in ward. Maximum 26 (52%) of them earns less than or equal to Rs. 15,000.

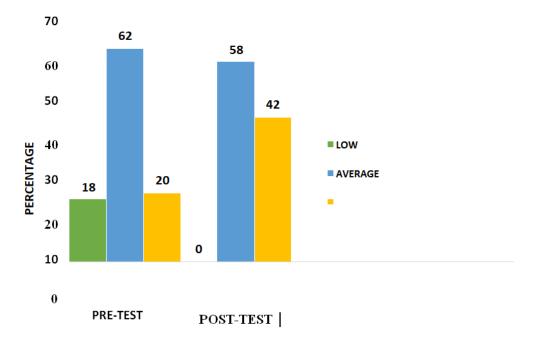


Figure 1: Level of Emotional Intelligence among Nursing Officers.

Figure 1 shows the percentage distribution of the level of Emotional Intelligence among Nursing Officers. Pre-test scores of Nursing Officers showed that 9 (18%) had low, 31(62%) had average and 10 (20%) had high level of

Emotional Intelligence. Post-test scores of Nursing Officers showed that 2 (58%) had average, 21(42%) had high and none of them had low level of Emotional Intelligence.

Table 2: Effect of Life Skills Training on Emotional Intelligence among Nursing Officers. (n = 50)

Variables	Mean score	Standard deviation	t - Value	p - value
Pre-test	123.40	14.25	-19.37	p < 0.001*
Post-test	136.90	11.20		

^{* =} Significant

Table 2 shows that there is increase in the post-test level of Emotional Intelligence as compared to the pre- test

level of Emotional Intelligence and the increase is statistically significant at p < 0.05.

Table 3: Association of pre-test level of Emotional Intelligence with selected demographic variables (n=50)

	Demographic	Level of Emotional Intelligence						Fisher's Exact
S. No.	Variables							
1.		Low (9)		Average (31)		High (10)		
		n	%	n	%	n	%	p - value
	Age (years)							0.660
	a. 21 – 30	9	100	26	83.9	10	100	**
	b. 31 – 40	0	-	4	12.9	0	-	
	c. 41- 50	0	-	1	3.2	0	-	
2.	Gender							0.620
	a. Male	0	-	1	3.2	1	10	**
	b. Female	9	100	30	96.8	9	90	
3.	Marital status							0.179

(A)

	a. Married	0	-	9	29	3	30	**			
	b. Unmarried	9	100	22	71	7	70				
4.	Type of family							0.512			
	a. Nuclear	5	55.6	13	41.9	6	60	**			
	b. Joint	3	33.3	17	54.8	4	40				
	c. Single-parent	1	11.1	1	3.2	0	-				
5.	Residence							0.256			
	a. Rural	7	77.8	13	41.9	6	60	**			
	b. Urban	1	11.1	14	54.8	4	40				
	c. Semi-urban	1	11.1	4	3.2	0	-				
6.	Education							0.620			
	a. UG	9	100	30	96.8	9	90	**			
	b. PG	0	-	1	3.2	1	10	1			
7.	Years of work experience							0.034			
	a. Less than or equal to 1 year	5	55.6	6	19.4	4	40	*			
	b. 2 years	3	33.3	3	9.7	2	20				
	c. 3 years	0	-	5	16.1	2	20				
	d. Greater than or equal to 4 years	1	11.1	17	54.8	2	20				
8.	Working area							0.035			
	a. Ward	2	22.2	19	61.3	9	90	*			
	b. OPD	0	-	4	12.9	0	-	1			
	c. OT	2	22.2	2	6.5	0	-	1			
	d. Emergency/ICU	5	55.6	6	19.4	1	10	1			
9.	Monthly income (Rs.)							0.303			
	a. Less than or equal to 15,000	7	14	12	34	7	14	**			
	b. 15,001 – 30,000	2	4	17	2	3	6				
	c. 30,001 – 45,000	0	0	1	2	0	0				
	d. Above 45,000	0	0	1	2	0	0	1			

^{* =} Significant

Table 3 shows that there is statistically significant association between the pre-test level of Emotional Intelligence and demographic variables like years of work experience, working area at the level of p <0.05 and there is no statistically significant association between the pre-test level of Emotional Intelligence and demographic variables like age, gender, marital status, type of family, residence, education, monthly income at the level of p >0.05.

CONCLUSION

Among 50 participants, 9 (18%) had low, 31 (62%) had average and 10 (20%) had high level of Emotional Intelligence in pre-test. None of them had low, 29 (58%) had average, 21 (42%) had high level of Emotional Intelligence in the post-test.

The post-test mean (136.90) was higher than the pre-test mean (123.40). The calculated t-value is lesser than the table value at 0.05 level of significance. This states that there was significant increase in the post-test level of Emotional Intelligence as compared to the pre-

test level of Emotional Intelligence and the increase was statistically significant at p < 0.05. The study findings revealed that there was a significant difference in the level of Emotional Intelligence before and after Life Skills Training among Nursing Officers.

There was statistically significant association between the pre-test level of Emotional Intelligence and demographic variables like years of work experience, working area at the level of p<0.05 and there was no statistically significant association between the pretest level of Emotional Intelligence and demographic variables like age, gender, marital status, type of family, residence, education, monthly income at the level of p>0.05.

Hence the study findings suggests that Life Skills Training is found to be efficient in improving the Emotional Intelligence of Nursing Officers and enables them to understand the emotional ambience of workplace which leads to good patient outcomes and improved quality of care. It also helps in balance between work and family life.

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^{** =} Not Significant

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