Correlation Between Emotional Intelligence, Work-Life Balance and Role Efficacy among the Nurses from HCG Cancer Centres in Mumbai

Aakanksha Waghe[1], Shankar Das[2]

Abstract

This study aims to examine the correlation between Emotional Intelligence, Work-Life Balance, and Role Efficacy among Nurses from two cancer centres in Mumbai. The sample consisted of a total of 82 nurses. Five-point rating scales on Emotional Intelligence, Role-efficacy, and Work-Life Balance were administered to assess the nurses. Results showed a positive relationship between the overall work-life balance score, nursing role efficacy score, and emotional intelligence score. Work experience affects nurses' emotional intelligence.

Key words: Emotional intelligence; Work-life balance; Nursing role efficacy

Emotions are reactions that human beings experience in response to events or situations. We choose to depend on our emotions, such as happiness, rage, sadness, boredom, or frustration. Your ideas, thoughts, and feelings can impact your health.

Health is the fundamental right of every individual. Nurses are key health professionals who directly influence patients' health. Because of high job demands, coping effectively with adversity has become vital for healthcare employees. Positive states in the form of emotional intelligence and engagement have the potential to activate and save resources for coping and adaptation amongst nurses. Emotional intelligence and work engagement have a statistically, significant effect on resilience. Of great significance is the direct link between emotional intelligence (EI) and strength (Chikobvu & Harunavamwe, 2022).

Rationale of study: Nurses form the primary workforce who are directly involved in patient care. Work-life balance, psychological protection, and workload management were significant predictors that impacted the nurse's mental health (Havaei et al, 2021). Therefore, the investigator was interested in finding the relationship between emotional intelligence, work-life balance, and the efficacy role of the nurses, which has an influence on quality patient care.

Objectives

The study was conducted with these objectives:

1. To find the (a) emotional intelligence score and (b) work-life balance score of the nurses.
2. To assess the role efficacy score of the nurses.
3. To find the relationship of emotional intelligence with (a) work-life balance, and (b) role efficacy of the nurses.
4. To find the relationship of work-life balance with role efficacy of the nurses.
5. To compare the nurses' emotional intelligence, work-life balance, and role efficacy scores with demographic variables such as age, work experience, and education.

Null Hypothesis

H_0: There will be no significant relationship between the emotional intelligence, role efficacy, and work-life balance of the nurses measured at a 0.05 level of significance.

Review of Literature

As related to work-life balance: In a well-being survey at work, 2,243 UK nurses responded. Among them, 40 percent were not in favour of 12-hour shifts, 35 percent were in favour of it, whereas 25 percent were unsure. The reasons for supporting 12-hour shifts were greater flexibility in schedule, more holidays, and more time for self. It gave an extra day off, and a better work-life balance, and they were paid for staying later than their duty hours. These 12-hour shifts cited consistently low performance from older workers compared to the younger nurses. They also responded to physical and emotional drains and expressed concern for patients' safety. Working 12-hour shifts is a debatable issue where the individual employers must be responsible for staffing, guiding, and caring for them.

The authors are: 1. Principal LT College of Nursing, SNDT Women's University Mumbai; 2. Pro Vice-Chancellor, Professor, Mumbai Campus, Dean, School of Health Systems Studies, Chairperson-Centre for Excellence in CSR, Tata Institute of Social Sciences, Mumbai.

Variables influencing the work-life balance of women doctors and nurses revealed that conflicts occurred due to co-workers, the nature of the job, and work pressure (Boamah et al, 2022). Work conflict resulted due to work pressure, job prospects, and multi-work instructions. Consequently, it gave rise to a negative attitude and lack of skill among women. The study results revealed that women in a joint family had to bear more family conflict discounting their work designation. This led to a lack of control and poor involvement in the family among most of these employees. The study concluded that both family and work conflicts influenced each other of the study participants. The study recommends an extension of support to 15 women employees by the family, society, and the organisation. This would enhance them to be a more productive asset to the organisation.

As related to role-efficacy: Chatterjee & Roy (2018) compared the nurse's perception of role efficacy in public and private sector hospitals. The private sector nurses better perceived their role efficacy in most dimensions such as integration, creativity, confrontation, influence, personal growth, helping relationship, super-ordination, and overall perception than their public counterparts. The public sector nurses had better perceptions of dimensions, namely, proactivity, centrality, and inter-role linkage, than private sector employees. It recommends changing the work setting along with the nature of the job to upgrade the role efficacy of nurses in the public sector.

Mahdizadeh et al (2016) studied the relationship between job stress and self-efficacy among hospital nurses of Semnan University of Health Sciences, Iran. The results showed that nurses' job stress impacted their personal, emotional, and cognitive effects, consequently affecting their functioning in the workplace. This situation may increase absenteeism, high attrition, decreased job satisfaction, and nurses' organisational commitment. The identified personal risk and protective factors can be utilised for planning the protection and promotion of nurses' health against stressful aspects.

Emotional Intelligence

Jin-Hwa Lee et al (2021) analysed the relationship between psychological well-being, emotional intelligence, will power, and job efficacy of clinical nurses by establishing a hypothetical Model. The study was conducted from 26 to 30 May 2020, and the subjects were 300 nurses. The survey was conducted through a self-report questionnaire. The results showed that psychological well-being, emotional intelligence, job efficacy, and will power had significant positive correlations with each subfactor. The results also found that the path between psychological well-being and will power was statistically significant. However, will power had no significant indirect effects on psychological well-being and job efficacy variables. Will power has a low influence on job efficacy. It was concluded that all these concepts are required to improve the competence in the nursing education field or personal development of the Nurses.

Khademi et al (2021) investigated the relationship between emotional intelligence and the quality of nursing care from the nurses' and patients' viewpoints. The study findings concluded that EI influences the quality of nursing care. It recommended planning and executing educational programmes to enhance the EI of nurses and enrich the quality of patient care. Also, it recommends using patients as indicators to evaluate the quality of nursing care.

Methodology

The research approach adopted was quantitative type. Emotional intelligence, work-life balance, and role efficacy scores of nurses were measured by obtaining ordinal data. A descriptive correlational design was used to describe relationships among variables without attempting to infer causal association (Beck & Denise F, 7th edition). This study attempted to measure the perception of emotional intelligence, work-life balance, and role efficacy of nurses. Further, the researcher attempted to identify significant relationship, if any, between these perceived aspects of emotional intelligence, work-life balance, and role efficacy of nurses.

Locale of the study: HCG Hospital, Borivali, and HCG Centre, Colaba, Mumbai.

Research Variables

a. *Emotional intelligence*: In this study, emotional intelligence means the responses given by the nurses on their perceived self-awareness, self-management, internality, motivation, empathy, and social skills. It was elicited by using a 5-point rating scale.

b. *Work-life balance*: In our study, work-life balance means the responses given by the nurses on their perceived social needs, personal needs, time management, teamwork, compensation and benefits, and work. It was elicited by using a 5-point rating scale.

c. *Nursing role efficacy*: In this study, nursing role efficacy means the responses given by the nurses

on their perceived aspects such as integration, proactivity, creativity, confrontation, centrality, influence, personal growth, interlinkage, helping relationship, and superordination. It was elicited by using a 5-point rating scale. The grading of research variables has been shown in Table 1.

Table 1: Grading of research variables

Percentile	Grade
0 -20	Very low
21-40	Low
41-60	Normal
61-80	High
81-100	Very high

Data was collected from two cancer hospitals in Mumbai. They have a wide spectrum of services available, including curative, rehabilitative, and home care. The study included 82 nurses from both hospitals; out of them, 59 were from one hospital and 23 were from another.

Inclusion Criteria

1. Nurses working in selected hospitals in Mumbai.
2. Nurses willing to participate in the study.

Sampling method adopted was non-probability convenience sampling.

Instrument of Data Collection

1. *Emotional intelligence scale*: A 4-point scale was used to examine the perceived emotional intelligence of nurses. It consisted of a total of 48 items. It measured six aspects of emotional intelligence: self-awareness, self-management, internality, motivation, empathy, and social skills.
2. *Work-life balance scale*: A 5-point scale was used to find the perceived work-life balance of nurses. It consisted of a total of 36 items. It has measured six aspects of work-life balance: social needs, personal needs, time management, teamwork, compensation and benefits, and work.
3. *Nursing role efficacy scale*: A 5-point scale was used to determine the nurses' perceived role efficacy. It consisted of a total of 30 items. It has measured 10 aspects of self-rule efficacy among nurses: integration, proactively, creativity, confrontation, centrality, influence, personal growth, inter-role linkages, helping relationships, and superordination.

These are standardised scales from the book 'Training Instruments in HRD and OD' by Udai Pareek and Surabi Purohit, SAGE Publications.

Technique: The technique used to administer these three tools was self–reporting.

Data Gathering Process

The tools were administered using Google Forms. The participants were instructed to fill out the documents only if they consented to participate in this study. Thus, all the nurses from both organisations enthusiastically participated in this study. The researchers believed that using online Google forms to collect data would yield unbiased results because the nurses were required to respond to questions regarding how they perceived their emotional intelligence, work-life balance, and role efficacy. This would guarantee their right to an independent self-perception. The total duration taken for the study was 10 days.

Scope of the Study

It will identify the influence of emotional intelligence on work-life balance and the role efficacy of nurses. It will aid in designing policies and training programmes for better performance of nurses and finally quality patient care.

Results

Demographic characteristics of nurses

Age: It was found that the majority (n=32, 39%) of the respondents belonged to the age group of 21 to 35 years, 29 (35.4%) of respondents belonged to the age group of 25 to 30 years, and 21 (25.6%) respondents were more than 30 years of age (Table 2). There was almost equal distribution in various age categories; hence, the findings would be devoid of any bias of under or over representation of any age.

Gender: Most (92.7%) respondents were females, and only 6 (7.3%) were male nurses (Table 2). This means the study findings would be biased due to the over-representation of females. Emotional intelligence, work-life balance, and role efficacy of female nurses differ from male nurses.

Table 2: Distribution of subjects as per gender, age, education, and work experience

Variables		Frequency	Percentage
Gender	Male	6	7.3
	Female	76	92.7
Age	21 to 25 yrs	32	39.0
	25 to 30 yrs	29	35.4
	>30 yrs	21	25.6
Education	ANM	8	9.8
	GNM	55	67.1
	BSc	19	23.2
Work experience	0 to 2 years	24	29.3
	2 to 5 years	38	46.3
	> 5 years	20	24.4

Education: Most (55, 67.1%) of the respondents had obtained a diploma in General Nursing and Midwifery, 19 (23.2%) nurses had obtained a Bachelor's in Nursing, whereas 8 (9.8%) had undergone one-or two-year programme in Auxiliary Nurse and Midwifery.

Working area: Most respondents (78, 95.1%) were involved with direct patient care, whereas only 4 (4.9%) were involved in hospital administration.

Work experience: The majority (38, 46.3%) of the respondents had work experience of 2 to 5 years, whereas the other two groups were equally distributed. Respondents with work experience of 0 to 2 years were 24 (29.3%), and more than five years were 20 (24.4%).

Overall Scores of Work-Life Balance, Role Efficacy and Emotional Intelligence among Nurses

Overall emotional intelligence scores: A maximum (n=48, 58.5%) of the respondents had a normal level of emotional intelligence scores, followed by a high level of EIs among 16 (19.5%) respondents and a low level of EIs among 15 (18.3%) of respondents. Thus, most (n=64, 78%) of the respondents' scores were normal to high, whereas 22 percent had low to very low scores. The low EI scores need to be improved in the aspects of self-awareness, self-management, and motivation for the nurses.

Overall WLB scores: More than half (n=44, 53.7%) of respondents had a high work-life balance score, followed by an average work-balance score among 36 (43.9%) respondents. Thus, most of the nurses could balance their work with their families.

Overall role efficacy scores: The respondents who perceived normal levels of role efficacy scores were 59 (72%), followed by 18 (22%) with low scores. Only a few, namely one (1.2%) and four (4.9%) of respondents, perceived very high and high role of efficacy scores, respectively.

Correlation between Overall Work-life balance Score, Nursing Role Efficacy Score and Emotional Intelligence Score

H_1: There is a significant relationship between the emotional intelligence and work-life balance of the nurses measured at a 0.05 level of significance.

In the Table 3, the calculated value of Spearman's rho correlation between emotional intelligence and work-life balance of the nurses is 0.283 with a p-value of 0.010 at 0.05 level of significance. This indicates a weak positive correlation between emotional intelligence and the work-life balance of the nurses. Thus, the findings suggest that emotional intelligence positively had a positive influence on nurses' work-life balance.

Table 3: Work-life balance as correlated with nursing role efficacy score and emotional intelligence score

Correlations					
			Overall Work-life balance	Total NRS	Total EIS
Spearman's rho	Overall Work-life balance	Correlation coefficient	1.000	0.403	283
		Sig (2-tailed)	.	0.000	10
		N	82	82	82
	Total NRS	Correlation coefficient	403	1.000	547
		Sig (2-tailed)	000	-	000
		N	82	82	82
	Total EIS	Correlation coefficient	283	0.547	1.000
		Sig (2-tailed)	010	000	.
		N	82	82	82
Correlation is significant at the 0.01 level (2-tailed).					
Correlation is significant at the 0.05 level (2-tailed).					

H_2: There is a significant relationship between the emotional intelligence and role efficacy of the nurses measured at a 0.01 level of significance.

The calculated value of Spearman's rho correlation between emotional intelligence and role efficacy of the nurses is 0.547 with a p-value of 0.00 at 0.01 level of significance (Table 3). This indicates a weak positive correlation between emotional intelligence and role efficacy of the nurses. Thus, the findings suggest that emotional intelligence had a positive influence on nurses' role efficacy.

H_3: There is a significant relationship between the nurses' work-life balance and role efficacy measured at a 0.01 level of significance.

In Table 3, the calculated value of Spearman's rho correlation between work-life balance and role efficacy of the nurses is 0.403 with a p-value of 0.00 at 0.01 level of significance. This indicates a weak positive correlation between work-life balance and the role efficacy of the nurses. Thus, the findings suggest that work-life balance positively influences nurses' role efficacy.

Comparison of the nurses' emotional intelligence, work-life balance, and role efficacy scores with demographic variables such as age, work experience, and education

- Age does not influence nurses' emotional intelligence, work-life balance, and role efficacy scores.

- Education does not influence nurses' emotional intelligence, work-life balance, and role efficacy scores.
- Work experience does not influence nurses' work-life balance and role efficacy scores but influences their emotional intelligence.

Discussion

The main aim of the study was to find the correlation between emotional intelligence, work-life balance, and role efficacy among the nurses from HCG Cancer Centres in Mumbai. The study findings indicate that there is a positive correlation between the overall work-life balance score, nursing role efficacy score, and emotional intelligence score. Thus, emotional intelligence positively influences work-life balance and nursing role efficacy which is also supported by a study on health professionals (Maillet & Read, 2021) explored work-family conflict, emotional intelligence, and general self-efficacy among medical practitioners during the COVID-19 pandemic. The study results revealed a significant relationship between work-family conflict, general self-efficacy, and emotional intelligence among medical practitioners.

Another study on the correlation between Humanistic Care Ability (HCA) and emotional intelligence among hospital staff in China (Ma et al, 2022) revealed that the emotional intelligence of medical staff affected their levels of HCA. Both studies emphasised on providing emotional intelligence training for the hospital staff to facilitate their psychological well-being.

The relationship between emotional Intelligence and quality of nursing care from the nurses' and patients' viewpoint was investigated by Khademi et al (2021). The study findings indicate that EI influences the quality of nursing care. It recommends planning and executing educational programmes to enhance the EI of nurses and enrich the quality of patient care. Also, it recommends using patients as indicators to evaluate the quality of nursing care.

In the present study, nurses' self-reported role efficacy was measured which can be further improved by collecting objective data about the nurse's role efficacy. The study was conducted in hospitals dedicated to caring for cancer patients. This environment is a persistent challenge for nurses to control grief, be resilient, and be continuously involved in patient care. Their self-awareness could be increased by addressing their counselling needs. Self-management and motivation can be enhanced by providing formal and informal gatherings. Nurses can be encouraged to attend conferences and present research papers affecting personal growth and their role efficacy.

Limitations of the study

1. It was conducted at two health centres of HCG.
2. The instruments were administered online.

Nursing Implications

- For individual nurses, the organisation should make provision for training programmes on self-management, stress reduction techniques, and learning opportunities to improve their emotional intelligence, role efficacy as well as work-life balance.
- At organisational level, create a positive work environment by recognising and rewarding hard work, promoting mental and physical wellness, and encouraging nurses to address safety concerns.

Recommendation

1. The study can be replicated on a larger sample.
2. The study could be replicated only for male nurses as they may vary in emotional intelligence, work-life balance, and role efficacy.

Conclusion

- There is a positive correlation between the overall work-life balance score, nursing role efficacy score, and emotional intelligence score.
- Emotional intelligence positively influences work-life balance and nursing role efficacy.
- Work experience affects nurses' emotional intelligence.

References

1. Abdulrahman A, Ali Wasif. The notion of work-life balance, determining factors, antecedents, and consequences: A comprehensive literature survey. *International Journal of Academic Res & Reflection* 2016; 4 (8): 74-85
2. Chikobvu P, Harunavamwe M. The role of emotional intelligence and work engagement on nurses' resilience in public hospitals. *SA Journal of Human Resource Management* 2022; 20: 259-67 (https://doi.org/10.4102/sajhrm.v20i0.1690)
3. Khademi E, Abdi M, Saeidi M, Piri S, Mohammadian R. Emotional Intelligence and quality of nursing care: A need for continuous professional Development. *Iranian Journal of Nursing & Midwifery Research* 2021; 26 (4), 361-67 (https://doi.org/10.4103/ijnmr.IJNMR_268_19)
4. Ma J, Peng W, Pan J. Investigation into the correlation between humanistic care ability and emotional intelligence of hospital staff. *BMC Health Services Research* 2022; 22: 1-12 (https://doi.org/10.1186/s12913-022-08227-4)
5. Maillet S, Read, E. Work environment characteristics and emotional intelligence as correlates of nurses' compassion satisfaction and compassion fatigue: A cross-sectional survey study. *Nursing Reports* 2021; 11 (4); 847 (https://doi.org/10.3390/nursrep11040079)