The Effect of Emotional Intelligence on Nurse’s Communication Skill

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Abstract
Practical and good communication is the key to carrying out their roles and functions for nurses. An obstacle in communication is the emotional response on the part of nurses. This study aims to acknowledge the effect of nurses’ emotional intelligence – which comprises emotional awareness, emotional control, self-motivation, empathy, and social skills – on their communication abilities. Nurses with high emotional intelligence will give meaning to interpersonal relationships by making people feel at ease. The research method used quantitative with a cross-sectional design. The respondent was 96 nurses selected with proportional stratified random sampling method. The data was collected through a questionnaire. The results of multivariate analysis using multiple linear regression analysis statistical tests, obtained the values of $\rho = 0.001$; $R^2 = 0.209$. Based on statistical test values, it can be concluded that nurses’ emotional intelligence – comprising emotional awareness, emotional control, self-motivation, empathy, and social skills – significantly influences the communication skills of nurses at Ruteng Regional General Hospital simultaneously. Having a higher level of emotional intelligence leads to better communication with patients and a better level of health quality. It is expected that leaders and managers of nursing organizations should develop educational programs aimed at increasing the competencies of nurses in emotion control and communication skills.

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INTRODUCTION

Communication is a vital element in Nursing in all areas of activity. Effective and good communication is the key to carrying out their roles and functions (Kourkouta & Papathanasiou, 2014). Based on research by Swansburg, nurses spent most of their time, namely 80% for communicating, 16% for reading, and 4% for writing. The development of communication skills is the key to success for a nurse (Suhartini & Anisa, 2017). Many problems in nursing services can occur due to communication errors. Minor errors in conveying information can hinder the client's healing process, and can even worsen the condition of the disease (Suryani, 2019).

Several studies have identified communication as a prerequisite factor in revealing a patient's symptoms, concerns, and problems and therefore communication skills are essential so that patients can adhere to health care, education and promotion, and rehabilitation programs (Kourkouta & Papathanasiou, 2014). The results of research on patient satisfaction report that there is still a lack of delivery of information to patients causing patients not to get clear information, inappropriate information, and lack of accountability in delivering information (Norouzinia et al., 2016). Another research shows that communication in nursing is the key to establishing a good therapeutic care relationship and how it is connected with the patient’s satisfaction in the various phases of hospitalization (Barilaro et al., 2019).

Nursing communication helps establish trusting relationships, ensures information is passed and understood and enriches people’s lives. Effective communicators not only place active listening as a priority but also exude warmth when talking with others. Warmth is felt by others when the communicator is friendly, approachable, and is kind. To exhibit these attributes of warmth, the nurse needs to make sure that the verbal communication and non-verbal communication are parallel (White & Grason, 2019). Sometimes, good communication can be hampered by obstacles. One of the factors that can hinder communication is the ability to control emotions. Countertransference is an emotional response of nurses that can be a barrier to nursing patients' communication (Muhith & Siyoto, 2018).

Empathy and emotional intelligence as predictors of a nurses' attitude towards communication, and the cognitive dimension of this attitude is a good predictor of the behavioral dimension of attitudes towards the communication of nurses (Giménez-Espert & Prado-Gascó, 2018). Emotional intelligence is managing our emotional life with intelligence, maintaining emotional harmony and its expression through know-how, self-awareness, self-control, self-motivation, empathy, and social skills. With this emotional intelligence, a person can put his or her emotions in the right position, make satisfying choices and regulate his or her mood (Goleman, 2012).

Nurses with high emotional intelligence will give meaning to their interpersonal relationships by way of making people feel at ease (Hutagalung, 2014). Other research results show a significant relationship between emotional intelligence and the communication skills score as well as a strong significant relationship between the four dimensions of emotional intelligence and the total score of communication skills of nurses at the emergency department (Raeissi et al., 2019).

Ruteng Regional General Hospital, a referral hospital in Manggarai, still receives complaints caused by dissatisfaction with its nursing services, particularly in connection with the attitude and friendliness of nurses, with the insufficient control of patients, and several other complaints. According to public opinion, the quite harsh character of the Manggarai people is one of the causes of their misperception about the unfriendly attitude of nurses. Facing this phenomenon, nurses must acknowledge the dimensions of emotional intelligence to improve their communication skills and ultimately increase their clients’ satisfaction as well as the hospital's quality. The objective of this research is to acknowledge the effect of emotional intelligence of nurses – which comprises emotional awareness, emotional control, self-motivation, empathy, and social skills – on their communication abilities.

METHOD

Study Design

This study used the quantitative research method with a cross-sectional approach to acknowledge the relationship between the variables, which were observed and measured at the same time. The data in this study were collected from January to February 2021. The population in
this study was all nurses who worked in the public hospital of the Ruteng area. The sampling technique used proportionate stratified random sampling. This sampling technique was used by considering that the member population is not homogeneous and proportionally stratified. The strata in question were the level of nurse education, position, and type of treatment room. Initial sample calculations used the Slovin formula with a degree of error of 5%. Then, it was proceed by counting the members of the sample stratified by proportional random sampling using the proportional allocation formula. The result of the calculation showed that the sample was 96 respondents. The data was collected by a questionnaire distributed to nurses in 10 rooms. The questionnaire that was filled out consisted of a questionnaire on emotional intelligence and nurse communication skills. The Emotional Intelligence questionnaire used was the Goleman standard questionnaire with a Likert measurement scale with a score of 1 (does not apply) to a score of 5 (always applies). There were 50 statements that assess the five dimensions of emotional intelligence: self-awareness, managing emotions, empathy, self-motivation, and social skills. Ten statements measure each dimension. Meanwhile, to measure nurses’ communication skills were used a communication skills assessment questionnaire with a Likert scale of 1-3. This questionnaire consisted of 40 questions assessing the four components of interpersonal communication skills: sending a clear message, listening, giving and getting feedback, and handling emotional interaction. The results of the validity test of the two questionnaires showed that the value of the r count> r table is 0.444. The reliability test of the emotional intelligence questionnaire showed that the Cronbach's Alpha value was 0.911, while the communication skills questionnaire had a Cronbach's Alpha value of 0.735. This showed that the questionnaire was reliable.

Data Analysis
The collected data have been edited and coded for further processing. Incomplete data were excluded. Data analysis was performed using univariate, bivariate, and multivariate methods. Bivariate analysis was performed using the Pearson Correlation test, while multivariate analysis was performed using multiple linear regression. Multiple linear regression analysis was carried out to see the effect of the emotional intelligence variable (X) which comprises: self-awareness (X1), managing emotions (X2), motivation oneself (X3), empathy (X4), and social skills (X5), on nurse communication skills (Y). The linear regression model used to assess the effect of the two variables is formulated as follows: $Y = a + b1X1 + b2X2 + b2X3 + b4X + b5X5$. Before performing the simple regression analysis, a series of classical assumption tests were carried out as a prerequisite for multiple regression tests which comprise: normality, linearity, and heteroscedasticity tests. After performing this assumption test, it was evident that all prerequisites had been met.

RESULT
Demographics Data

| Respondents’ Characteristics     | Freq (N) | Percentage (%) |
|----------------------------------|----------|----------------|
| **Age**                          |          |                |
| 26-35                            | 49       | 51.0           |
| 36-45                            | 34       | 35.4           |
| 46-55                            | 13       | 13.5           |
| **Sex**                          |          |                |
| Male                             | 5        | 5.2            |
| Female                           | 91       | 94.5           |
| **Length of Working**            |          |                |
| <2 years                         | 15       | 15.6           |
| ≥2 years                         | 81       | 84.4           |
| **Education**                    |          |                |
| DIII                             | 79       | 82.3           |
| Bachelor/Ners                    | 17       | 17.7           |
| **Employment status**            |          |                |

Table 1: Research Respondents’ Characteristics (n=96)
The profile of respondents is depicted in Table 1 showed that 96 respondents completed the survey. The respondents' characteristics were presented based on age, sex, and length of work. Based on age, 46 or approximately 51% of respondents were an age ranging from 26-35 (early adult). Meanwhile, at least 13 or 13.5% of respondents were in an elderly age range. Based on gender, most respondents were female, 91 or 94.5%. Meanwhile, 5 or 5.2% were males. Based on the length of working, 81 or 84.4% of respondents worked ≥ 2 years. Meanwhile, 15 or 15.6% worked <2 years. Based on the educational level, the highest number of DIII (Associate degree) was 79 or 82.3% and Ners 17 or 17.7%. Based on employment status, the most were civil servants, namely 79 or 82.3%, and 23 or 24% contracts, while based on position status in work units the most were nurses who were running at 86.5% and at least 7.3% in the office. Based on the work unit, there are at most 12.5% in two rooms, namely the medical ward and the emergency room.

### Description of Emotional Intelligence Dimension and Communication Skills

Table 2: Mean Distribution Dimensions of Emotional Intelligence (n=96)

| Variable             | Mean   | SD    | Min-Max |
|----------------------|--------|-------|---------|
| Self-awareness       | 38.61  | 4.619 | 28-48   |
| Managing Emotions    | 35.66  | 4.260 | 26-47   |
| Empathy              | 37.45  | 4.294 | 25-49   |
| Self-motivation      | 38.28  | 4.518 | 25-49   |
| Social Skills        | 39.99  | 45.62 | 28-50   |

### Table 3: Mean Distribution Total Value of Nurses’ Emotional Intelligence and Communication Skills

| Variable             | Mean   | SD    | Min-Max |
|----------------------|--------|-------|---------|
| Emotional Intelligence | 189.99 | 18.281| 146-243 |
| Communication Skills  | 66.05  | 12.604| 40-99   |
Table 3 showed that the total mean value of emotional intelligence was 189.99 (good category) with a range of scores 146-243. Mean total communication skills 66.05 (Middle category) with a range of 40-99.

Table 4. Results of Bivariate Analysis; Correlation Pearson  

| Variable               | Communication skill |
|------------------------|---------------------|
| Self-awareness         | r=0.370             |
| Managemg emotions      | p=0.000             |
| Motivating oneself     | r=0.330             |
|                       | p=0.001             |
| Empathy                | r=0.389             |
|                       | p=0.000             |
| Social Skill           | r=0.400             |
|                       | p=0.000             |

Resource: primary data 2021

Table 4 shows the results of the bivariate analysis, namely the Pearson Correlation test. The results of the analysis proved that the five-dimensional variables of emotional intelligence have a significant p-value which qualifies for the multiple linear regression analysis.

Table 5: Results of Classical Assumption Test for Linear Regression Requirements  

| Test                                      | Sig       |
|-------------------------------------------|-----------|
| One-Sample Kolmogorov-Smirnov Test Unstandardized Residual | 0.458     |
| Linearity                                 | 0.000     |
| Heteroscedasticity                        | 0.351     |

Resource: primary data 2021

Table 5 shows the results of testing the classical assumptions of linear regression requirements. Kolmogorov Smirnov one-sample test to assess the normality of the data with a significance of 0.05. The data used is residual data. The significant value is 0.458 > 0.05, so the data is said to be normally distributed. Linearity test to determine whether the independent variable has a significant linear relationship or not. A good correlation should have a linear relationship between the independent factors and the dependent variable. The results showed a linearity of 0.000 < 0.05, meaning that there was a linear relationship between the two variables. The last assumption test is heteroscedasticity to test whether in the regression model there is an inequality of variance from the residual value of one observation to another. The test conducted in the Glejser test where the significant value is 0.351 > 0.05, the conclusion is that there are no symptoms of heteroscedastic. The results of these three tests indicate that the research data passes to be continued with the linear regression test.

Table 6: Results of Multivariate; Multiple Regression Linear  

| Step | Variable               | Coefisien | Correlation Coefficient | p     |
|------|------------------------|-----------|-------------------------|-------|
| Step 1| Self-awareness         | 0.315     | 0.115                   | 0.412 |
|      | Managing emotions      | 0.181     | 0.061                   | 0.653 |
|      | Motivation oneself     | 0.418     | 0.151                   | 0.325 |
|      | Empathy                | 0.294     | 0.100                   | 0.478 |
|      | Social Skill           | 0.343     | 0.123                   | 0.442 |
|      | Konstanta              | 6.581     |                         | 0.597 |
| Step 2| Self-awareness         | 0.369     | 0.135                   | 0.309 |
|      | Motivation oneself     | 0.375     | 0.136                   | 0.362 |
|      | Empathy                | 0.325     | 0.111                   | 0.425 |
|      | Social Skill           | 0.437     | 0.157                   | 0.267 |
|      | Konstanta              | 7.865     |                         | 0.514 |
Table 6 shows the results of the multivariate analysis of the linear regression test using the backward method. The analysis results are divided into four steps. In the fourth step, it is known that the variable dimensions of emotional intelligence that have a significant influence on the communication skills of nurses are self-awareness and social skills. The equation obtained is $Y = 12,277 + 0.639 + 0.760$, which means that for every one-unit increase in the dimensions of self-awareness and social skills, the communication skills of nurses will also increase by 63.9 and 76 at a constant of 12.277. Furthermore, to determine the magnitude of the influence of the independent variables on the dependent variable is to use the coefficient of determination $R^2$ test

Table 7: Coefficient of Determination the Effect of Emotional Intelligence (X) on Nurses’ Communication Skills (Y)

| Model | $R$   | $R^2$ |
|-------|-------|-------|
| 1     | 0.457<sup>a</sup> | 0.209 |
| 2     | 0.455<sup>b</sup> | 0.207 |
| 3     | 0.499<sup>c</sup> | 0.202 |
| 4     | 0.439<sup>d</sup> | 0.193 |

Resource: primary data 2021

Table 7 shows the determination coefficient of the effect of emotional intelligence (X) on nurses’ communication skills. The results of this analysis indicate that the dimensions of emotional intelligence affect the nurses’ communication skills with an $R^2$ value ($R$ Square) 0.209 ($1^{st}$ model). The $R$ square value (coefficient of determination) is 20.9%, which indicates that the emotional intelligence variable (Y) has an effect of 20.9% on nurses’ communication skills variable (X) and 79.1% is influenced by other factors not examined in this study. The results of this statistical test showed that the more positive the emotional intelligence value, the higher nurses’ communication skills are

Table 8: ANOVA Test Results (F Test) the Effect of Emotional Intelligence (X) on Nurses’ Communication Skills (Y)

| Model | Sum of Square | df | Mean square  | $F$   | $p$   |
|-------|--------------|----|--------------|-------|-------|
| Regression | 3155,652 | 5  | 631,13       | 4,758 | 0,001 |
| Residual     | 1196,893    | 94 | 132,634      |       |       |

Resource: primary data 2021

Table 8 shows the results of the Anova test (F test) and the significance of the emotional intelligence variable (X) on the nurse communication skills variable (Y) with a value of $F_{count} = 4,758$ while $F_{table}$ at $\alpha = 0.05$ with the degree of numerator 1 and degree of denominator 94 obtained $F_{table}$ 2.31 thus $F_{count} > F_{table}$ and a significance value of 0.001 $< \alpha = 0.05$. These results indicate that emotional intelligence has a significant positive effect on the communication skills of nurses the regression equation is feasible to use.
DISCUSSION

The research results showed that the dimensions of the emotional intelligence of nurses—which comprises emotional awareness, managing emotions, self-motivation, and social skills—were on average in the category ‘good’. This means that a nurse with good self-awareness can recognize his/her inner state, recognize their own emotions, know their strengths and limitations, and they will be convinced of their abilities and will have positive feelings towards themselves. The inability to observe real feelings makes people fall in the power of feelings so that they are insensitive to real feelings which are bad for problem decision making (Goleman, 2009). Being self-aware allows nurses to master themselves, the second trait of emotional intelligence. Nurses with self-mastery will rarely verbally attack others, make rushed or emotional decisions, stereotype people, or compromise their values (White & Grason, 2019).

Furthermore, managing emotions means dealing with feelings so that feelings can be expressed appropriately, a skill that greatly depends on self-awareness (Goleman, 2009). A self-regulated individual can resist emotional impulses. This individual thinks before acting (Manna, 2019). People are not motivated by those who lash out, tear down, or disempower others through a lack of self-regulation. This is particularly true when speaking of nurses “eating their young”. Often experienced nurses say things that cause the novice nurse to feel incapable of being a professional nurse and thus lessen his/her motivation to learn and grow up in the profession. If a person is open to their own emotions, certainly, he will be skilled at reading other people’s feelings (Raeissi et al., 2019).

The next dimension of emotional intelligence is self-motivation where the average results show a good category. The good category means that nurses with good self-motivating abilities have an internal driving force that allows them to focus on the task at hand and survive to achieve the desired goals (Manna, 2019). Another emotional intelligence is empathy. Empathy is the ability to understand personalities and relate to their feelings. By understanding the personalities of others, an individual is better equipped to act on those behaviors and successfully respond to their needs (Manna, 2019).

The last dimension is social skills; people who are capable of social relationships are emotionally intelligent. People with good emotional intelligence will be able to build relationships with other people. They can enjoy friendship with sincerity (Goleman, 2009).

The research results also showed that the mean value of the communication skill of nurses is displayed in the category ‘sufficient’. This category indicates that the area of communication skills needs more consistent attention. The communication skill indicator being used in the evaluation is the interpersonal communication of the nurses which comprises the skill of sending clear messages, listening, giving and receiving feedback, and of handling emotional interactions. The skill of effective interpersonal communication between a health care provider and a patient is one of the most significant factors for improving the patients’ satisfaction, compliance, and overall health (Kourkouta & Papatheanosio, 2014). When a nurse communicates effectively with kind attention, listens actively, and shows compassion, patients are likely more tended to report their experiences as positive, even at times of distress and ill health. Patients who understand the details of their illness and of its treatment as well as those who feel and believe that the provider is concerned about their well-being, often show greater satisfaction with the care received and are more likely to follow their medication therapy (Norouzinia et al., 2016).

The results of multiple linear regression analysis show that of the five dimensions of emotional intelligence, the dimensions of self-awareness and self-motivation have a significant effect on the communication skills of nurses. Emotional intelligence consists of five dimensions that describe different meanings. The positive influence of the dimensions of self-awareness on nurses’ communication skills can occur because, with good self-awareness, a person will be able to know the situation within oneself, recognize one’s own emotions, know one’s strengths, self-limitations, belief in one’s abilities and positive feelings towards oneself (Goleman, 2009). If we are aware of the existence of these emotions, then we will manage emotions rationally, so that someone will be able to communicate well between individuals. Lack of awareness about aspects of yourself will affect the process of communicating with others (Rumahorbo, 2019).

A positive effect also occurs between the social skill dimensions on nurses’ communication
skills. Social Skill is the ability to manage, influence, and inspire the emotions of others. Emotional intelligence in fostering social relationships is a fundamental skill essential for successful teamwork and leadership. Once personalities and needs are identified, strong social skills are needed to develop and maintain a good job. In establishing interpersonal communication, social skills such as listening skills, conflict management, leadership, and collaboration are needed (Manna, 2019). Nurses who seek to have good relations with others exhibit emotional intelligence and provide a canvas for others to feel cared for. Excellent relations must be intentional and not expected to happen organically. Nurses must strive to engage with others, not merely tolerate others. Engagement fosters communication and allows practicing self-evaluation and self-regulation. When nurses engage with others, they can empathize as needed with others (White & Grason, 2019). Therefore, emotional intelligence plays an important role and affects the way a person communicates. The communication between nurses and patients will run smoothly and effectively if nurses can manage their emotions.

The test results concerning the influence of emotional intelligence on nurses’ communication show that emotional intelligence has a simultaneous and positive effect on their communication skills. The more positive their emotional intelligence value, the higher nurses’ communication skills are. The amount of influence of the emotional intelligence variable on the communication skills of nurses is 20.9%, while the rest is influenced by other factors. This is evident in the total mean value of communication skills in the category ‘sufficient’, while the total mean value of emotional intelligence is in the category ‘good’. The influence of the two variables illustrates that employees with high emotional intelligence are important in interpersonal relationships by making people feel at ease. The reality of feeling at ease in this relationship will avoid emotional tension in the person concerned and makes him or her ability to overcome it. Conversely, employees who have low emotional intelligence are more likely to withdraw from social intercourse or social problems, namely by preferring to be alone, lacking enthusiasm, often being anxious, depressed, and aggressive (Hutagalung, 2014)

The relationship between emotional intelligence and great communication skills impels nurses to be able to implement good communication so that mutually beneficial interactions and cooperation can be established between nurses and patients. As a consequence, advice given by nurses can be accepted and implemented properly by patients. Through good therapeutic communication, nurses are more able to meet the patient’s needs due to the effective exchange of information between nurses and clients (Raeissi et al., 2019)

Emotional intelligence is an important factor for patients’ satisfaction. In a study on the correlation between the emotional intelligence of nurses and patient satisfaction, the results show that as the level of emotional intelligence in nurses increases, the satisfaction in patients increases as well. Therefore, patient satisfaction is affected by the emotional intelligence level of health care providers (Celik, 2017). Other studies on the relationship between Emotional Intelligence and communication skills showed that there is a significant relationship between the two variables in nurses in emergency departments (Raeissi et al., 2019); as well as in healthcare staff working at ambulatory clinics in Shiraz (Amini et al., 2019).

CONCLUSION

Based on this research, it became clear that there is a simultaneous significant influence between emotional intelligence on the communication skills of nurses.

SUGGESTION

Since emotional intelligence has a positive effect on the communication skills of nurses, a hospital manager can enhance emotional intelligence by organizing training sessions and increasing communication skills as a basis for the continuous improvement of hospital services. The leaders and managers of nursing organizations should develop educational programs aimed at increasing the competencies of nurses in emotion control and communication skills.

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CONFLICTS OF INTEREST
The author declares that there are no conflicts of interest with the topic or any associated objects upon the publication of this study.

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