EMOTIONAL INTELLIGENCE: ITS RELATIONSHIPS TO STRESS, ANXIETY, AND DEPRESSION AMONG TRANSCULTURAL NURSING STUDENTS

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ABSTRACT
The Main objective of the study is to examine the relationships between emotional intelligence, stress, anxiety and depression among transcultural nursing. The Sample of present study is comprised of 100 male and female (students) of ages 25 to 40 years. The mean age 31.64 and SD is 2.837. Participants of the study were selected from College of Nursing Quetta by applying systematic random sampling technique. The measures used, are: Personal information form, Trait Emotional Intelligence Questionnaire-Short Form (TEIQue-SF; Petrides, & Furnham, 2006), and depression, anxiety and stress Scale- 21 (Lovibond & Lovibond, 1995).

Results of present study indicated that there are negative relationships between in emotional intelligence anxiety and depression among healthcare students.

Findings of the present study revealed that transcultural nursing is most complex because bilingual and cultural barriers generate complications for nursing.

Key words: Transcultural nursing, Trait emotional intelligence, Depression, Stress and anxiety.

INTRODUCTION
Nursing is an important profession in healthcare discipline. Nursing education develop an understanding to comprehensive nursing care of individuals, focusing on physical emotional and social needs. Nursing skills concerns to provide care for medical, surgical, mental health and rehabilitation of patients. Most obvious changes in nursing is the demand of nursing with specialized technical skills and judgment which is necessary to provide continues and intensive nursing observation. Orem, (1980) has been reported that nursing’s form or structure is derived from actions deliberately. Nurses perform their services to help individual or group care to maintain or change conditions according to their environmental obligations which is one of the important challenges in clinical nursing practices however transcultural nursing support them to do this. Transcultural nursing pattern is find out the most significant challenge for the nursing profession in 21st century (Ryan,
Leininger (1997-2000) & Brown (1970) have been reported that transcultural nursing is an area of study and practice that emphasis on virtual culture ethics, the value and practices of individuals or groups related or dissimilar cultures. Their study encompasses cultural care symbols, expressions, and meanings. Nursing increase and inclusive outlook contained in nursing practice in a globe of mutual support for inhabitants. Research on transcultural nursing focuses on discovering largely unknown and vaguely known cultural care and health concerns from two perspectives: This view focal point of local, indigenous, and insider's culture. Sharon, (2006) investigated that transcultural nursing draws on a large field of information, stretching beyond nursing to use research from many health sciences disciplines. Marriner (1975) nursing process focuses on clients their culture and family. Styles (1982) nursing is faithfully scenario for the struggling professions, but in its own inimitable way. Balochistan is stunning with natural properties and borders an image of harmony in variety but the people including the patients, except some urban well developed districts, are passing a very difficult life due to less developed health care arrangement and lack of basic health services of life at their accesses. Their behaviors are inclined due to their traditional views and ecological deviations, because this region is associated various other countries, but due to lack of possessions and tentative condition the usual patients are not firm and easy. Baluchistan is traditionally and ethnically more fertile because multilingual and semi tribal societies are reside there. There are multiple tribes and groups. Their culture and values are dissimilar. Due to connected border area of Afghanistan and Iran majority Afghans and Irani patients visit there for treatment. Influx of local and outside patients is increasing responsibility and work burden for doctors and paramedical staff. They face challenges regarding treatment, language and cultural barriers. It is complicated to work together those patients whose culture values are different and their understanding ability and perception has different (Anne, 2004).

Anthropologists express their beliefs that nurses will have a very active role in national and international health work in future. Margaret & Birum (1973) Spalding & Notter (1970) suggested that true responsibility is dependent upon knowledge, discretion, judgment and ability to make decision about one’s work nurses responsibility to patients. Anxiety and stress faced by the nursing profession. Kristin and Elisabeth, (2007) reported transcultural nursing enhance nursing skills and provide understanding about patient’s background which help them for professional development in health care settings, while emotional intelligence in nursing leads to more positive attitudes, greater adaptability, improved relationships and increased orientation towards positive values and outcomes. Transcultural nursing guide students about various skills such as communication and interpersonal relationships, empowerment various: assertiveness, group dynamics, critical, reflective thinking and trends in multiple cultural nursing and interventions for better treatment. The competencies to managing emotions perception, understanding, utilizing effectively in the self and others comprise the core of emotional intelligence. According to seley stress is nonspecific response of the body to any demand made on it. Burgess (1978).
Mitchell (1940) reported anxiety and subjectively experienced by feelings of vague, unexplained discomfort and apprehension. Anxiety is an energy which is not directly observed. It is translated into observable behavior. This behavior cues may be utilized by the nurse to infer the presence of anxiety (Schutte et. al. 2013).

Tannous & Matar, (2010) Stress is unavoidable in throughout academic life where most student struggle for their achievement. (Momina et. al. 2016) It is evident that extensive strain is placed on healthcare systems and economies due to stress (Rosch, 2001). Unfortunately, stress may also exacerbate risk for numerous mental illnesses (such as depression and anxiety) as well as hypertension and heart disease (Barker, 2007; Chu, Williams, Harris, Bryant & Dressler, 1984). Indeed, the possible deleterious consequences of stress clearly hinder human health; thus, the discovery of viable options to better prepare or protect individuals is essential. Along those lines, psychologists have increasingly turned their attention to studying stress and its management.

Significance of emotional intelligence by literature review concludes that the modern day demands of nursing depend on the skills of emotional intelligence to achieve a patient centered care. Literature proved that emotional intelligence is associated with health importance and health behavior. In health care context, Arora et al. (2010) suggested that emotional intelligence contributed towards many of the skills that helped medical professional achieves these core competencies. Descriptive survey researched current practices in nursing curricula in the United States regarding Emotional intelligence is include a straight relation has important for nurses and nurse educators to understand the concept of EI and be aware of the research and theoretical constructs upon which it is based. Furthermore, the application of EI in pre-registration nursing may provide fresh insights into nursing recruitment, retention and ultimately patient/client concepts been reveal between EI and both physical and psychological health (Slaski & Cartwright, 2003; Tsaousis & Nikolaou, 2005). Healthcare work by nature is inherently stressful. Health workers frequently confront illness, dying, trauma, challenging behaviors, suicide, violence and a whole range of other inherently stressful situations. (Bamber, 2006) Nursing is regarded as a demanding and stressful profession (Jones & Johnson, 2000; Watson et al., 2008) several studies have contributed to feelings of inadequacy, self-doubt, lowered self-esteem, irritability, depression, somatic disturbance, anxiety, sleep disorders and burnout (Chang et al., 2005; Watson et al., 2008).

Maier-Lorentz (2008) Transcultural nursing is an essential aspect of healthcare today. The ever-increasing multicultural population in the United States poses a significant challenge to nurses providing individualized and holistic care to their patients. This requires nurses to recognize and appreciate cultural differences in healthcare values, beliefs, and customs. Nurses must acquire the necessary knowledge and skills in cultural competency. Culturally competent nursing care helps ensure patient satisfaction. Emotional abilities are important and unique contributor to Psychological adjustment.
METHOD

Sample
Sample of the present study consist 100 nursing students of BSc N (Bachelor of Science in nursing (22 male and 78 female) from 25 to 40 years age group. All the participants were selected from Nursing College Quetta and they were also professionals and performing their duties in various hospitals.

Measure
The measures, was used a) Trait Emotional Intelligence Questionnaire-Short Form (TEIQue-SF; Petrides, & Furnham; 2006) and, b) Depression Anxiety and Stress Scale (Lovibond & Lovibond, 1995).

Procedure
Sample was collected from Nursing College Quetta situated at Sandmen Provincial hospital Quetta. First of all the Principal were approached for the purpose of data collection. After getting consent briefed about the important of the study and assured them that data will used for study and never discussed with others then test was individually administrated to students. During test administration of them were interested to discuss their issues related to studies and profession. Then “Trait emotional intelligence (TEIQue-SF) and Depression Anxiety and Stress Scale-21: (Lovibond & Lovibond, 1995).

RESULTS
Table 1
Descriptive of the total samples on financial status and living standers of Trans Cultural Nursing Students (N=100)

<table>
<thead>
<tr>
<th>Financial status</th>
<th>Percentage</th>
<th>Living status</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>7</td>
<td>Hostile</td>
<td>74.4</td>
</tr>
<tr>
<td>2</td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>50</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>8</td>
<td>Home/paying guests</td>
<td>25.6</td>
</tr>
<tr>
<td>Total</td>
<td>100.0</td>
<td></td>
<td>100.0</td>
</tr>
</tbody>
</table>
Table 1 show the overall participants issues with respective percentage. Participants more inclined to hostile as well as home/paying guest. The main objective of the study was to find out the relationship between stress, depression and trait emotional intelligence.

**Table 2**  
*Correlation of Depression Scale and Emotional Intelligence Questionnaire (TEIQue), (N=100)*

<table>
<thead>
<tr>
<th>depression</th>
<th>Correlation Coefficient</th>
<th>1.000</th>
<th>-.078</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sig. (2-tailed)</td>
<td></td>
<td></td>
<td>.441</td>
</tr>
<tr>
<td>N</td>
<td></td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

*Note: p=.05, p=.01*  
Table 2 results indicate the negative correlation of depression (-.078) with *p*-value.441.

**Table 3**  
*Correlation of Trait Emotional Intelligence Questionnaire (TEIQue) of anxiety Scale (N=100)*

<table>
<thead>
<tr>
<th>Anxiety</th>
<th>Correlation Coefficient</th>
<th>1.000</th>
<th>-.196</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sig. (2-tailed)</td>
<td></td>
<td></td>
<td>.051</td>
</tr>
<tr>
<td>N</td>
<td></td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>

*Note: p=.05, p=.01*  
Results of table 3 shows the negative correlation with anxiety and Trait emotional intelligence (-.196). while *p*-value is .05.
Table 4
Correlation between Stress and emotional intelligence

<table>
<thead>
<tr>
<th>Stress</th>
<th>Correlation Coefficient</th>
<th>Sig. (2-tailed)</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stress</td>
<td>1.000</td>
<td>-.293(***)</td>
<td>100</td>
</tr>
<tr>
<td>TEIQue</td>
<td>.003</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

Result indicates the significant value -.293 with P-value .003.

DISCUSSIONS

The purpose of present study was an examination of treatment in dissimilar culture’s patients. Demographic information showed that 50% Participants were financially sound because they are doing jobs and not dependent on their families. They are permanent employee’s government of Balochistan and taking salary as pay scale classified by government of Pakistan. Majority of them belongs from different areas of Pakistan therefore 74.4% are living in nursing hostiles and 25.6 are resides in homes or as paying guests. Participant’s mean age is 32.22 and SD= 2.34. Transcultural nursing simply bring awareness, stimulates and knowledge about different culture. However nurses always try to provide better services and perform their responsibilities during this effort most of them provoke anxiety, depression and stress.

Results further indicate that value of depressions is -.078 with p-value =.441. Scores did not reveal that significant relationship with emotional intelligence and depression among participants. It is found that during practice of transcultural nursing students or practitioner’s relationships between emotional intelligence and depression is negative. During application of transcultural nursing maintenance of stable and high emotional intelligence is challenging assignment to prevent depression, anxiety and stress, because emotional intelligence is core skill for health care students and professionals. While Present difficulties of transcultural nursing depend on the abilities of emotional intelligence to realize patients care. But Finding revealed that current knowledge on nursing practice strategies and their effectiveness, provide to enhancing their coping skills to reduce work burden while depression seems to be effective and comprehensive which cannot easily manage or cope
because they are continues practicing at same environment with same responsibilities. Due to this depression and emotional intelligence are negative.

Previous researches have also found non-significant relationships between emotional intelligence and depression. Rosenbaum (1989) Depression relates to clinical observations in the community and acute care settings of persons of diverse cultural backgrounds but emotional intelligence not always support or modification this. Ferrie et. al (2002) job insecurities associated with perceived anxiety and perceived depression among nurses working in private hospitals in started that chronic perception of job insecurity is associated with depression. Skinner et. al (1993) the relationship of self-esteem, assertiveness and anxiety to depression is studied in a group of female nurses. Recognizing predisposing factors in this high-risk group can begin a process to treat this illness. Trans culture teaching strategies for health professionals is an important learning of health care professionals. Among the different intervention strategies, Transcultural nursing is seem to be operational and broad. While emotional intelligence enhances their coping skills. A well understanding about nursing is enhancing their coping skills to reduce stress, depression and anxiety and provide an opportunity to enhance professional’s skills. Although when student get low success and interact with different patients and specially with those who are less educated and lack of awareness they become depressed. Relationship between anxiety and emotional intelligence is \( r = -0.196 \) which shows that inverse effect, result revealed that transcultural nursing facilitate nurses’ knowledge and care for patients but emotional intelligence has no anxiety relation during in current scenario. Result indicates that \( r = -0.293 \) which illustrate that among stress and emotional intelligence there is weak inverse effect but P-value is significant. Finding revealed that assignment, governance, elegance, professional clash and emotional cost from concerned have been the main causes of nurse’s sufferings, but there is correspondence as to extent of their impact. Mostly they were satisfied because they are doing jobs. Health workers in general, and midwives and nurses in particular, experience high levels of stress/distress due to the nature of their work and workplaces; and, their socialization into ways of working that minimizes the likelihood of self-care (Cohen-Katz, Wiley, Capuano, Baker, & Shapiro, 2004). Absence of incentive and transcultural working also is shifting some of the other matters in demand of position. Healthcare interventions are directed at most but not all of these causes and their success are probably limited. Student reinforced, but this is stuck by without understanding of how causes of stress fluctuate between different practice and a lack of accepting ideas and healthcare dynamics interrelation. Thus it proved that there is no proper guidance and funding from authorities to conduct workshops or seminars about transcultural learning or training in healthcare disciplines.

Present study also helps to researches to have some analysis related to trans culture nursing or education. However previous studies usually discourse to at the level of general nursing but domain in specific transculture learning, which is associated to specific healthcare where different population or ethnic groups are, resides together and avail health services. Emotional intelligence is core skill for health care students and professionals. These findings carried the current knowledge on nursing teaching and practice strategies and their effectiveness, while emotional intelligence enhances their
coping skills. A well understanding about nursing is enhance their coping skills to reduce stress, depression and anxiety and provide an opportunity to enhance professionals skills.

Baluchistan’s deprived aspects are creating emotional instabilities among patients, which is massive problem of the healthcare professionals. Due to this nurses are facing massive difficulties consequently anxiety, depression and stress initiate. However transcultural nursing are found with credit of kindness in their behaviors, genuineness to services. Nurses are always prominent by preferring and trying to achieve important requirements for their existence through support of other. Transculture nursing is in Balochistan give to culturally compatible nursing maintenance, and to provide culture particular and entire nursing care practices for the wellbeing and comfort of people or to assistance them in facing adverse social and tribal circumstances during treatment.

Conclusions, Limitation & Recommendations

On the basis of our findings, it may be concluded that transculture teaching strategies is an important learning of health care professionals. Among different intervention strategies, Transcultural nursing is seem to be effective and comprehensive. Balochistan have least resources, weak infrastructure and depraved law and order situation, while multicultural society is there due to this health professional’s nursing have challenges.

Data for the present research was collected from those nursing students who are doing their jobs also. It would be required future development for nursing practice and teaching strategies and additionally acquire data and information from nurses.

Many researchers have been found that transcultural nursing is an important part of nursing profession and they suggested to healthcare professionals for nursing trainings. In Pakistan it is not done like other countries. It is recommended to conduct further researches on same issue because healthcare concerns and transcultural nursing is essential part of treatment which is fully planned and equipped by authorities. In current scenario Pakistan have different challenges therefore stakeholders should develop better facilities for health professionals.
REFRENCES


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