Relation Emotional Intelligence and Nurse Performance in the Emergency Departement

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Abstract. Nurses' performance is a crucial indicator of healthcare service quality, particularly in Emergency Departments, which are characterized by high workload and stress levels. Emotional intelligence is considered a psychological factor that may influence nurses' performance in managing such demands. This study aimed to analyze the relationship between emotional intelligence and nurses' performance based on respondent characteristics in the Emergency Department of dr. Soekardjo Regional Hospital, Tasikmalaya. This study employed a quantitative observational analytic design with a cross-sectional approach. The sample included all Emergency Department nurses, totaling 45 respondents, selected using total sampling. Data were collected using the Wong and Law's Emotional Intelligence Scale and the Six Dimensions of Nursing Performance instrument. Data analysis consisted of univariate analysis and Spearman's rank correlation test. The results showed that most respondents had high emotional intelligence (93.3%) and good performance (97.8%). Statistical analysis revealed no significant relationship between emotional intelligence and nurses' performance ($p = 0.793$). This non-significant finding may be attributed to the homogeneity of respondent characteristics and the Emergency Department work environment, which emphasizes strict adherence to standard operating procedures. Nevertheless, emotional intelligence may still play an indirect role in supporting nurses' performance.

Keywords: *Emotional intelligence, Nurse Performance.*

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A. Introduction

Nurse performance refers to the abilities and skills related to a nurse's job description based on the implementation of nursing care [1].According to World Health Organization (WHO) data, Indonesia is ranked among the five countries with the lowest nurse performance levels [2]. This finding is further supported by a study conducted by Hidayat, which reported that 50% of Indonesian nurses fall into the low-performance category [3]. Low nurse performance can have fatal consequences, ranging from patient dissatisfaction to an increased risk of mortality [4].

The work environment in healthcare settings is often characterized by heavy workloads and high work pressure, which can lead to physical and mental stress and ultimately reduce the quality of healthcare services and nurses' concentration [5]. Therefore, to cope with these stressors, nurses require specific abilities to manage pressure and emotions, namely emotional intelligence. Emotional intelligence plays a crucial role in optimizing nurse performance in high-pressure environments. Nurses with high emotional intelligence are more capable of controlling stress, coordinating effectively with colleagues, and delivering empathetic care.

Several studies have reported a significant relationship between emotional intelligence and nurse performance. A study conducted at RSUP Prof. Dr. R. D. Kandou Manado found a significant association between emotional intelligence and nurse performance [6]. Similarly, research conducted at RSUD Buleleng Regency revealed that emotional intelligence contributed significantly to nurse performance, accounting for 28.31% of performance effectiveness [7]. In contrast, a study conducted in the North West of Iran reported no significant relationship between emotional intelligence and nurse performance [8].

Previous studies have widely examined the relationship between emotional intelligence and nurse performance. However, a research gap remains, as most studies were conducted in general inpatient units rather than in Emergency Departments (EDs), which have distinct work dynamics and higher stress levels. Studies specifically investigating this relationship in ED settings, particularly in West Java, remain limited.

This study also contributes to the achievement of the Sustainable Development Goals (SDGs), particularly Goal 3 (Good Health and Well-being), which strongly depends on the optimization of healthcare workers [9]. Enhancing nurses' emotional intelligence has the potential to improve service quality, reduce work-related stress, and support the delivery of effective healthcare services. Therefore, the objective of this study is to analyze the relationship between emotional intelligence and nurse performance based on respondents' characteristics.

B. Method

This study adopted a quantitative observational analytic design with a cross-sectional approach to analyze the relationships among variables at a single point in time. The research was conducted in the Emergency Department (ED) of RSUD dr. Soekardjo, Tasikmalaya City, from February to December 2025. The study population comprised all nurses working in the Emergency Department. Sample selection was carried out using a total sampling technique; therefore, all nurses who met the inclusion and exclusion criteria were included in the study, resulting in a total of 45 respondents. Primary data were collected using a digital questionnaire (Google Form), which consisted of the Wong and Law Emotional Intelligence Scale (WLEIS) to measure emotional intelligence and the Six Dimensions of Nursing Performance (SDNP) to assess nurse performance.

Data analysis was conducted sequentially, beginning with univariate analysis to describe respondents' characteristics. Data normality was tested using the Shapiro Wilk test due to the relatively small sample size. The results of the normality test subsequently determined the use of bivariate analysis employing the non-parametric Spearman's rank correlation test to examine the significance and strength of the relationships between variables, with the level of statistical significance set at a p-value < 0.05.

C. Result and Discussion

Result

Table 1. Characteristics of respondents

Demographic		Frequency (n=45)	Percentage (%)
Gender	Male	22	48,9
	Female	23	51,1

Demographic		Frequency (n=45)	Percentage (%)
Age	26 – 35 tahun	18	40
	36 – 45 tahun	21	46,7
	46 – 55 tahun	6	13,3
Educational Background	DIII	16	35,6
	DIV/S1	28	62,2
	S2	1	2,2

Source: Processed Research Data, 2025.

Based on Table 1 showing the respondents' characteristics, the majority of respondents were female, totaling 23 nurses (51.1%). Regarding age distribution, most Emergency Department nurses were aged 36–45 years, accounting for 21 respondents (46.7%). In terms of educational background, the largest proportion of ED nurses held a Diploma IV/Bachelor's degree (DIV/S1), with 28 respondents (62.2%).

Table 2. Overview of Emotional Intelligence

Emotional Intelligence	Frequency (n=45)	Percentage (%)
High	42	93,3
Moderate	2	4,4
Low	1	2,2
Total	45	100

Source: Processed Research Data, 2025.

Based on Table 2 describing the level of nurses' emotional intelligence, the majority of respondents were classified into the high category, totaling 42 nurses (93.3%).

Table 3. Overview of Nurse Performance

Nurse Performancee	Frequency (n=45)	Percentage (%)
Good	44	97,8
Moderate	1	2,2
Poor	0	0
Total	45	100

Source: Processed Research Data, 2025.

Based on Table 3 describing nurse performance, the majority of respondents were classified into the good category, totaling 44 nurses (97.8%).

Table 4. The Relation between Emotional Intelligance and Nurse Performance

Emotional Intelligance	Nurse Performance				Total		P value
	Good		Moderate				
	N	%	N	%	N	%	
High	41	91,1	1	2,2	42	93,3	0,793
Moderate	2	4,4	0	0	2	4,4	
Low	1	2,2	0	0	1	2,2	
Total	44	97,8	1	2,2	45	100	

Source: Processed Research Data, 2025..

Based on Table 4 showing the relationship between emotional intelligence and Emergency Department nurse performance, among the 42 nurses with high emotional intelligence, 41 demonstrated good nurse performance. All nurses with moderate and low levels of emotional intelligence also showed good performance. Statistical analysis indicated that there was no significant relationship between emotional intelligence and Emergency Department nurse performance ($p = 0.793$; $p > 0.05$).

Nurses Emotional Intelligence

According to Goleman, emotional intelligence is an individual's ability to recognize, manage, and utilize emotions effectively to enhance interpersonal relationships, which ultimately can improve performance [10]. This perspective is reinforced by Salovey and Mayer, who define emotional intelligence as a cognitive affective capacity involving the recognition of one's own emotions and those of others, as well as the use of emotional information in decision-making and problem-solving processes [11].

Based on the findings of this study, the majority of nurses demonstrated a high level of emotional intelligence, with 42 respondents (93.3%) classified in the high category. Meanwhile, 2 respondents (4.4%) had a moderate level of emotional intelligence, and 1 respondent (2.2%) had a low level. These results indicate that most nurses working in the Emergency Department of RSUD dr. Soekardjo, Tasikmalaya City, during the 2024/2025 period possessed high emotional intelligence, suggesting that ED nurses generally have good emotional intelligence. This finding is consistent with a previous study by Rahayu (2022) entitled The Relationship between Emotional Intelligence and Caring Behavior among Staff Nurses in Inpatient Wards at RSUD Depok City, which reported that 24 nurses (62.8%) had high emotional intelligence [12]. Similarly, a study conducted by Pujiyanto (2022) on Emotional Intelligence and Resilience Levels among Nurses found that 23 nurses (51.1%) demonstrated high emotional intelligence [13]. That study also explained that nurses with high emotional intelligence tend to have better resilience when facing work-related stress and heavy workloads. Furthermore, high emotional intelligence enables nurses to exercise self-control, demonstrate positive behavior, and communicate effectively when providing care to patients and interacting with patients' families, colleagues, and supervisors [14].

Based on the literature review, several factors influence emotional intelligence, one of which originates from individual characteristics [15]. Previous studies have shown that demographic characteristics such as age, gender, educational level, and work experience play a role in emotional regulation and the development of emotional maturity [16].

In this study, the majority of nurses were female, totaling 23 respondents (51.1%) out of 45 nurses working in the Emergency Department. This finding is in line with a study by Pratiwi (2022) on The Relationship between Emotional Intelligence and Burnout among Emergency Department Nurses at Ari Canti Hospital, Gianyar, which reported that 22 respondents (52.4%) were female and 20 respondents (47.6%) were male [17]. One reason why women dominate the nursing profession is that nursing work relies heavily on intuition and sensitivity, which are considered natural strengths more commonly associated with women than men [18]. In contrast, a study conducted by Regina (2024) reported that male respondents had higher emotional intelligence scores (88.62) compared to female respondents (87.2) [19]. Differences in emotional intelligence between males and females may be influenced by several factors, including biological and physiological characteristics as well as parental upbringing, which can shape emotional development [20]. Thus, gender may influence certain aspects of emotional intelligence, but it is not the sole or most dominant determinant.

In addition to gender, age is another factor that influences emotional intelligence. In this study, the majority of nurses were aged 36–45 years, with a total of 21 respondents. This result is consistent with a study by Siallagan (2022) entitled The Relationship between Emotional Intelligence and Performance among Female Nurses in Inpatient Units at RSUD Dr. Pirngadi, which found that most respondents were aged 31–40 years, totaling 45 nurses (39.1%) [21]. According to the Indonesian Ministry of Health, the age range of 36–45 years is classified as late adulthood [22]. Based on Hurlock's developmental theory, emotional intelligence tends to increase with age and experience, as individuals become more capable of regulating emotions, evaluating situations rationally, and responding to pressure in a more adaptive manner [23].

Furthermore, educational background also plays a role in shaping the emotional intelligence of nurses at the Emergency Department of RSUD dr. Soekardjo. The majority of respondents held a Diploma IV or Bachelor's degree (DIV/S1), totaling 28 nurses (62.2%). Higher educational attainment generally enhances an individual's ability to optimally apply knowledge and skills in the workplace. In line with Ahmadi (2020), higher educational achievement can encourage individuals to utilize their knowledge and expertise more effectively in professional settings [24]. Therefore, education contributes not only to the improvement of technical competence but also to the development of nurses' emotional intelligence.

Nurse Performance

Performance is a central concept in human resource management and healthcare services because it is directly related to the achievement of organizational goals and the quality of services delivered. Gibson defines job performance as the final outcome of individual activities that contribute to the achievement of organizational objectives, encompassing aspects of quality, efficiency, and effectiveness [25]. Handoko views performance as a series of organizational activities aimed at evaluating or assessing individual work achievement [26], while Dessler emphasizes performance as the attainment of tangible work outcomes through comparison between actual outputs and predetermined work standards [27].

In this study, the majority of nurses demonstrated good performance, with 44 respondents (97.8%) classified as having good performance, 1 respondent (2.2%) categorized as having moderate performance, and none (0%) categorized as having poor performance. These findings are consistent with a study conducted by Hia (2023) on The Relationship between Nurse Performance and Patient Satisfaction at Bethesda Serukam General Hospital, which reported that 46 respondents (82.1%) had good nurse performance [28]. Similarly, a study by Budhiana (2022) entitled The Relationship between Job Satisfaction and the Performance of Staff Nurses at RSUD Al-Mulk, Sukabumi City found that 13 respondents (38.2%) were categorized as having good performance [29]. That study also identified several factors influencing nurse performance, including age, educational level, and length of work experience.

Nurse performance is influenced by various interacting factors, including individual, psychological, organizational, work environment, health-related, and family background factors. Individual factors include ability, skills, educational background, work experience, and demographic characteristics [30].

Based on age distribution in this study, most respondents were within the 36–45 year age range, which is classified as late adulthood according to the Indonesian Ministry of Health [22]. In terms of educational background, the majority of nurses held a Diploma IV or Bachelor's degree (DIV/S1). These findings are in line with a study conducted by Wulandari (2025) entitled The Effect of Competence and Compensation on the Performance of Inpatient Nurses at Dr. Hasri Ainun Habibie Hospital, Parepare City, which reported that most nurses had a bachelor's degree [31]. Higher educational attainment is positively associated with better performance [32]. Therefore, higher levels of education are expected to enhance individual performance and competence, as advanced education broadens cognitive perspectives and improves task efficiency through more effective problem-solving approaches [31]. Nurses are encouraged to pursue higher levels of education to further improve performance and deliver high-quality healthcare services to the community.

In this study, the majority of nurses were female. Globally, women account for approximately two-thirds of the total health workforce, with female nurses alone contributing 79% of all human resources in the healthcare sector [33]. According to Taslim (2023), men tend to exhibit more aggressive traits, whereas women are more likely to display nurturing characteristics [34]. Based on this perspective, it can be assumed that female nurses may be more capable of providing compassion and emotional warmth when delivering patient care.

Relationship Between Emotional Intelligence and Performance

Emotional intelligence is one of the psychological factors that plays an important role in determining nurse performance, particularly in healthcare settings that demand intensive interpersonal interactions, rapid decision-making, and the ability to cope with high work pressure [35]. Emotional intelligence encompasses an individual's ability to recognize, understand, and manage both personal emotions and the emotions of others, including skills related to self-motivation, stress control, mood regulation, and the demonstration of empathy [10], [36]. These abilities enable nurses to deliver holistic nursing care using a bio-psycho-social-spiritual approach in accordance with established nursing practice standards [12]. From a performance theory perspective, Gibson states that performance is influenced by individual, psychological, and organizational factors [27]. Emotional intelligence is classified as a psychological factor that contributes to how individuals respond to job demands and work environments [27].

Based on the results of statistical testing, no significant relationship was found between emotional intelligence and nurse performance in the Emergency Department (ED). Analysis based on respondents' characteristics indicates that the homogeneity of individual characteristics such as the

predominance of late-adulthood age, relatively high educational levels, and a majority of female nurses contributed to low variability in both emotional intelligence and performance. This condition made the relationship between the two variables difficult to detect statistically. In addition, the characteristics of the ED work environment, which emphasize strict adherence to standard operating procedures (SOPs) and rapid service delivery, cause nurse performance to be more strongly determined by structural and organizational factors rather than individual psychological factors [37]. In this context, emotional intelligence plays a greater role in non-technical aspects such as stress management, team communication, and patient satisfaction, rather than serving as a direct determinant of quantitatively measured performance.

Several previous studies have reported a significant relationship between emotional intelligence and nurse performance. A study conducted by Meta at Fatmawati Regional General Hospital, South Jakarta, found that nurses with higher levels of emotional intelligence demonstrated better performance, particularly in aspects of empathy and effective communication with patients [35]. This study emphasizes the role of emotional intelligence in enhancing the quality of therapeutic interactions and the effectiveness of nursing services. Similar findings were reported by Christian, who stated that emotional intelligence helps nurses cope with work pressure, adapt to changes in the work environment, and maintain service quality despite heavy workloads [35]. Nurses with high emotional intelligence tend to provide more responsive and patient-centered care.

Another study conducted by Ansar, Ahmil, and Siauta among Emergency Department nurses at RSUD Anutapura Palu showed a significant correlation between emotional intelligence and nurse performance. The study also revealed that lower emotional intelligence was associated with lower educational levels [38]. Higher educational attainment provides broader learning experiences and insights that can influence thinking patterns, professional attitudes, emotional regulation, and adaptability in complex work situations [38]). Thus, education plays a role not only in enhancing technical competence but also in fostering the development of nurses' emotional intelligence. These findings are reinforced by a study conducted by Zainaro in the inpatient wards of Alimuddin Umar Hospital, West Lampung Regency, which reported a significant relationship between emotional intelligence and nurse performance [39]. Although most respondents in that study had relatively low levels of emotional intelligence and performance, statistical analysis showed that nurses with high emotional intelligence were 11.733 times more likely to demonstrate good performance compared to those with low emotional intelligence [39]. These results highlight the strategic role of emotional intelligence as an important determinant of nurse performance.

Based on findings from various studies, emotional intelligence generally shows a strong and consistent relationship with nurse performance. However, this relationship does not always appear as a dominant factor, as it is influenced by other psychological variables that act as intermediaries, such as coping strategies, self-efficacy, and emotional labor. Coping strategies refer to individuals' behavioral and cognitive efforts to manage psychological pressure so that it does not develop into stress [40]. Coping strategies are divided into problem-focused coping, which emphasizes resolving the source of stress, and emotion-focused coping, which aims to regulate emotional responses to stressful situations [40]. The effectiveness of coping strategies influences nurses' ability to maintain performance under high work pressure [40]. Self-efficacy refers to an individual's belief in their ability to manage and accomplish tasks or overcome challenges [41].Individuals with high self-efficacy tend to demonstrate greater motivation, resilience, and adaptive thinking patterns that support optimal performance [41]. Conversely, low self-efficacy is associated with avoidance of challenges, pessimism, and low work engagement [41]. Emotional labor refers to nurses' ability to manage and display emotions in accordance with organizational demands and professional roles [42]. Emotional labor includes deep acting, which involves aligning internal emotions with displayed expressions, and surface acting, which involves displaying expected emotions without genuinely experiencing them [42]. Effective management of emotional labor contributes to the quality of nurse–patient interactions and the overall performance of nursing services.

Therefore, the absence of a significant relationship between emotional intelligence and nurse performance in this study does not negate the importance of emotional intelligence. Rather, it suggests that its influence is indirect and highly dependent on the work context as well as intermediary psychological variables.

D. Conclusion

The majority of nurses in the Emergency Department of RSUD dr. Soekardjo, Tasikmalaya City, demonstrated high levels of emotional intelligence and nurse performance. This condition was influenced by relatively homogeneous respondent characteristics, particularly late adulthood age, a Diploma IV/Bachelor's (DIV/S1) educational background, and the predominance of female nurses, resulting in low variability in emotional intelligence and performance among respondents. Statistical analysis revealed no significant relationship between emotional intelligence and nurse performance, indicating that in the Emergency Department context, nurse performance is more strongly determined by structural and organizational factors, such as adherence to standard operating procedures and the demands for rapid service delivery, rather than individual psychological factors. Nevertheless, emotional intelligence remains indirectly important through intermediary psychological factors, including coping strategies, self-efficacy, and emotional labor, which contribute to nurses' ability to manage work-related stress, maintain the quality of interactions, and sustain nursing service performance.

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