Relationship between self-compassion and emotional intelligence in nursing students

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INTRODUCTION

Nursing focuses on meeting the physical, social and emotional health-care needs of individuals, families and society. In health care, nurses directly communicate with patients and try to empathize with them. Nurses give care under emotionally intense conditions where the individual undergoes pain and distress. Research is aimed at analysing the correlation of self-compassion and emotional intelligence of nursing students. The population of the research consisted of all the undergraduate students (571 students) of the 2010–2011 fall semester of the department of nursing. An information form, Self-compassion Scale and Emotional Intelligence Assessment Scale were utilized to obtain data for the research. For the assessment of the findings of research, Statistical Package for Social Sciences 16.0 for Windows was utilized for statistical analysis. Results indicated that there is a correlation between self-compassion and emotional intelligence and that emotional intelligence, which includes the individual perceiving one’s emotions and using the knowledge one gained from them to function while directing thoughts, actions and professional applications, has positive contributions to the features of nurses with developed self-compassion.

Key words: emotional intelligence, nursing, nursing education, nursing students, self-compassion.
undergoes pain and distress. Nurses need to be in contact with the individual, be open towards his/her emotion, be supportive in accepting his/her emotions, be affectionate and approach the mistakes and lapses without prejudice during the time when they provide care. In relevant studies, it is indicated that this situation increases depression, decreases job satisfaction and causes psychosocial problems in nurses where in time, they are desensitized towards the people they meet, feel emotionally exhausted and lose their sense of personal success and sufficiency. Hence, the quality of life and self-compassion of nurses are adversely affected. However, nurses need to notice the truth about individual failures and realize that negative emotions and thoughts result from such an attitude towards life and need to show consciousness to keep it on balance. This situation requires nurses to be professional members with developed self-compassion and emotional intelligence, which are crucial elements for rendering caregiving. Self-compassion is the ability to be compassionate to oneself, without this ability nurses might not be prepared to be compassionate to patient/individuals/family. One aspect of the role of the professional nurse in practicing humanizing nursing is being aware of his/her self as a variable in the nurse–patient relationship. It is proposed that students and nurses to be sensitive to their own feelings and encouraged in the development of this self-awareness. Although both self-compassion and emotional are important concepts in nursing little is known about these characteristics in nursing students. So, it is most important to be developed nursing students’ self-compassion and emotional intelligence.

**Background**

A variety of different concepts intended for the individual to develop healthy attitudes towards oneself, maintain his/her mental health, cope with stress and establish healthy relationships have been defined by many psychologists. Self-esteem, self-efficacy, personal character and self-compassion are among few to name. Self-kindness, mindfulness and common humanity.

Self-kindness is the ability to treat oneself with care, rather than harsh self-judgment and self-criticism. Common humanity is recognizing that failure, suffering and hardship are shared aspects of the human experience in general, rather than feeling socially alienated and isolated by these imperfections. It states the acknowledgement of the fact that one’s happy or distressful experiences are not solely distinct to oneself and that all other human beings have similar experiences. Mindfulness is the discernment that aids an individual in accepting the hardest and saddening emotions of life without letting oneself be carried away by the exaggerated storyline of distress. In other words, it can be defined as balancing the feelings and thoughts of suffering and hardship, not avoiding them, and accepting them without being over-identified with them or exaggerating them. Although these three dimensions of self-compassion conceptually differ from each other and are phenomenologically experienced on different levels, they interact with, engender and enhance one another.

Studies also demonstrated that self-compassion is negatively associated with self-criticism, depression, anxiety, rumination and thought suppression and positively associated with social relationship, acceptance, awareness, self-improvement, emotional intelligence and self-determination. The term ‘emotional intelligence’ has been coined by Salovey & Mayer to define the ability to understand feelings of oneself and other people, choose among them and apply this knowledge in one’s actions. Goleman defines emotional intelligence as the ability to understand one’s own feelings, empathize with other people’s feelings and arrange to enrich experiences and holds a five-dimension approach towards it, consisting of awareness of one’s feelings (self-awareness), control over one’s own feelings (self-management), self-motivation, empathy and social awareness. Self-awareness is the ability to recognize and construe one’s emotions, values, aims, strengths, weaknesses and skills. Self-management is the ability to have internal control over oneself; to adapt to unexpected conditions and change; to be receptive of new ideas, approaches and knowledge; to take responsibility for the consequences occurred; to question oneself; and to cope better with the problematic aspects of life. Self-motivation is the ability to direct one’s emotions in order to achieve goals, recognize opportunities and act upon difficulties to change them into opportunities and to be more productive and active despite all shortcomings.
Empathy is the skill of understanding other individual’s emotions, recognizing their points of view, developing susceptibility in this sense and caring for their feelings without being judgmental or defensive. Social awareness is the ability to understand and control the emotions and thoughts of other individuals along with one’s own; to provide negotiation and solutions in cases of disagreement, directing the behaviours of other individuals towards one’s demands; to arrange healthy relationships in one’s environment; and, in result of these, lead a successful and happy life.²³,²⁴

Emotional intelligence can be considered in terms of what the individual contributes to the world with an effective self-management, how much sensitivity he/she has towards his/her own opinions and emotions as well as others’, whether he/she has a developed interrelationship and the willingness to do a self-criticism to find a solution to personal, developmental and emotional problems.²⁵ Thus, emotional intelligence and self-compassion can be thought to be two basic characteristics that have a reciprocal interaction.

Self-compassion can be considered as a multiple-phased beneficial emotional arrangement strategy. Being aware that distressful and saddening emotional experiences are common to all people, an individual with self-compassion would encourage oneself with a gentle and kind attitude rather than avoid these experiences. Thus, an individual with self-compassion gains a clear comprehension of the vitality of one’s current situation by transforming the negative emotions to a more positive perception and can govern the actions that could help oneself or one’s environment to a more suitable and productive structure. In this sense, self-compassion can be considered as a crucial element of emotional intelligence that includes the individual’s perception of emotions and utilization of the following knowledge from these emotions to function for producing thoughts and actions.⁷,¹²–¹⁴,²¹,²²

It is observed that the studies on self-compassion and emotional intelligence in Turkey are evaluated separately. No study was found concerning the correlation of self-compassion and emotional intelligence.⁶,²⁶–³¹ Self-compassion is analysed in terms of self-esteem, satisfaction in life, positive and negative moods, motivation and fatigue,³³ success tendencies,¹⁴ submissive behaviour⁴⁴ and interpersonal cognitive distortions.¹⁵

Although self-compassion and emotional intelligence are important qualifications for nursing, little is known about these qualifications in nurses. It will be possible for students especially those who are thought to be nurses to provide care for individuals with different individual and socio-cultural characteristics and develop an efficient training period if they improve themselves about emotional intelligence and self-compassion. Both emotional intelligence and self-compassion are thought to be the qualifications that nurses need to have in order to develop more effective relationships with individuals, families and the community in the future, be good role models, cope with problems that they could encounter with individuals from a variety of age groups and maintain a healthy private life with their friends, families and spouses. Furthermore, as an adult, realizing one’s own emotions, expressing them in different ways, controlling stressful situations, motivating oneself for compatible behaviour instead of being harshly self-judgmental or self-condemning will improve their emotional intelligence and contribute their self-compassion in terms of identifying, understanding, expressing and managing their emotions. It is vital to assess the current situation and develop educational programmes according to the results for the training of nurses with high self-compassion and emotional intelligence and for enhancing these qualities.¹,²⁶–²⁸,³⁵–³⁷ This study holds significance in terms of its contribution to the literature and opening a new door into further related studies.

Nursing education in Turkey
In Turkey, nursing education was based on elementary schools until 1959. The Health Ministry maintained these programmes, which lasted 4 years following 8 years of basic education. Students learned nursing courses in addition to general high school courses. At the end of this programme, students were given a diploma and the title of nurse. Baccalaureate degree programmes started in 1955, and soon, the baccalaureate degree became required for entry into professional nursing practice in Turkey. There were various other programmes in nursing education until 1977 including: a high school diploma programme, an associate degree programme and a baccalaureate programme. Admission requirements for baccalaureate programmes until 2007, included satisfactory scores in the ÖSS (Examination for Student Selection) (general exam to get into universities) and also obligation to be female. Since April of 2007, men have been accepted into nursing programmes. Until 1990, only five universities in Turkey offered nursing programmes. However, the number of baccalaureate programmes increased rapidly meanwhile associate-degree programmes were
closed. Today, nursing education is provided in 4-year programmes in universities following high school graduation. Eventually in 1997, all nursing education was undertaken in universities where the nursing schools commenced offering a 4-year university education. There are now 85 nursing schools offering baccalaureate programmes, most of which are in state universities. Master of Science degree (Msc) programmes in Turkey started in 1968. Nursing doctoral programmes started in 1972, and today nine nursing schools offer a doctoral programme. By 1986, Turkey was one of only five European countries providing nursing education based upon university level. Nursing doctoral education in Turkey began as a single nursing programme; today, it is divided into eight branches: Fundamentals of Nursing, Medical Nursing, Surgical Nursing, Women’s Health and Obstetrics, Children’s Health and Diseases, Mental Health and Psychiatry, Public Health and Education in Nursing and Management in Nursing. The nursing faculty, which this research was carried out, has no self-compassion and emotional intelligence courses. However, there is Human Behaviours and Relationships, Assertiveness Training and Critical Thinking.

The study aim
The aim of this research is to analyse the correlation of self-compassion and emotional intelligence of nursing students.

The research was carried out in definitive and cross-sectional quality.

The answers to the following questions were sought in this research:
1. What is the self-compassion of nursing students?
2. What is the emotional intelligence of nursing students?
3. Do the self-compassion and emotional intelligence of nursing students differ according to socio-demographic characteristics?
4. What is the correlation of self-compassion and emotional intelligence of nursing students?

METHOD
Sampling
This study is a descriptive correlational study. The research consisted of all the undergraduate students (571 students) of the 2010–2011 fall semester of one Nursing Faculty. Research was carried out with the 476 students who accepted to contribute. Five forms were excluded owing to missing information. Thus, the sample for this study included 471 students. The data were collected voluntarily on written consent of the students.

Tools
A questionnaire form, the Self-compassion Scale, and the Emotional Intelligence Assessment Scale were utilized to obtain data for the research.

Questionnaire form
It was developed by the researchers in the light of literature. Questions consisting of the grade, age, sex, high school, main living location and current location of the nursing students were asked in the form.

Self-compassion Scale
The Self-compassion Scale, developed by Neff and a Turkish study of validity and reliability done by Akın, Akın and Abacı, consisted of 27 items and six subscales of self-kindness (five items), self-judgment (five items), common humanity (four items), alienation/isolation (four items), awareness (five items) and over-identification (four items). The options of response for the scale that had been prepared according to the five-point Likert scale were ‘always’ (5), ‘very often’ (4), ‘sometimes’ (3), ‘rarely’ (2) and ‘never’ (1). Internal consistency coefficients of the scale were between 0.72 and 0.80, and test–retest reliability coefficients of the scale were between 0.56 and 0.69. The points scored on the scale indicated the following self-compassion levels: 1–2.5 points, poor; 2.5–3.5 points, fair; and 3.5–5 points, good. Every subscale, the individual scored high on demonstrated that the individual held the qualities that the particular subscale measured. Grading of the scale was performed separately for each subscale. Total Cronbach’s alpha values 0.87 was obtained from this research (see Table 1).

Emotional Intelligence Assessment Scale
Developed by Hall and a Turkish study of validity and reliability done by Ergin, the Emotional Intelligence Assessment Scale consisted of 30 items and five subdimensions of self-awareness (six items), self-management (six items), self-motivation (six items), empathy (six items) and social awareness (six items). The response options of the scale that had been prepared according to the six-point Likert scale were ‘completely agree’ (6), ‘mostly agree’ (5), ‘slightly agree’ (4), ‘slightly disagree’ (3), ‘mostly disagree’ (2) and ‘strongly
The total of Cronbach’s alpha of the scale was detected a 0.84. No reversed expressions were used in evaluation.44

Total Cronbach’s alpha values 0.94 was obtained from this research (see Table 2).

The forms were distributed to students in groups after getting the adequate permissions from first the faculty principle and then the responsible faculty member. They were asked to fill out the forms after necessary explanations were announced and verbal consent was received.

**Data analysis**

The data were analysed using SPSS for Windows (version 11.0; SPSS Inc., Chicago, IL, USA) for statistical analysis. Socio-demographic characteristics of events were given in number, percentage, arithmetic mean and standard deviation values. Mann–Whitney, Kruskal–Wallis, and Spearman correlation tests were used in order to assess the levels of relationship between the scale scores. The results were assessed in the reliability range of 95% and \( P < 0.05 \) level.

Limits of the research

This study involved one nursing faculty education only, with a small sample size. The results cannot, therefore, be generalized to all other nursing school. Results might not be representative of the wider nursing student population.

**FINDINGS**

Findings concerning the identified qualities of nursing students, the factors that affect self-compassion and emotional intelligence and the correlation of self-compassion and emotional intelligence are shown in Tables 3–6.

1. Students’ socio-demographic characteristics

Of the students comprising the research 25.9% first, 23.1% second, 25.3% third, 25.7% fourth graders contributed; 71.1% of them were Anatolian High School or high school graduates, 83.4% were women and 16.6% were men. The age range of the students was minimum of 17 to maximum of 28, and their mean age was \( 20.65 \pm 1.35 \). 53.1% of the students stated that their main living location was the city, 40.8% stated to be accommodating at dormitory (Table 3).
2. Self-compassion and Emotional Intelligence of Nursing Students

According to Table 4, from Self-compassion Scales of students, the highest average was on self-judgment (3.59 $\pm$ 0.73), the lowest average was on common humanity (2.97 $\pm$ 0.75) and the Self-compassion Scale total score average was measured as 3.28 $\pm$ 0.51. According to the assessment of the scale, the students had a fair level of self-compassion.

According to Table 5 from Emotional Intelligence Assessment Scales of students, the highest average was on self-awareness (26.5 $\pm$ 6.69) and the lowest average was on self-management (24.3 $\pm$ 6.63). According to the scale assessment, the students were found to have a fair level of emotional intelligence.

3. Correlation of Self-compassion and Emotional Intelligence of Nursing Students

A fair level of significant positive association was assigned between the self-compassion and emotional intelligence of students ($r = 0.400, P > 0.01$).

It was assessed that the awareness, common humanity and self-kindness subdimensions of self-compassion were positively (good) related with the self-awareness, self-management, self-motivation, empathy and social-awareness subdimensions of emotional intelligence. It was found that there is positive correlation between the overidentification and isolation subdimensions of self-compassion, and the self-management and self-motivation subdimensions of emotional intelligence; that there is a negative correlation between the overidentification and isolation subdimensions of self-compassion, and the social awareness sub dimension of emotional intelligence; that there was no correlation between the overidentification and isolation subdimensions of self-compassion, and the self-awareness and empathy subdimensions of emotional intelligence. It was found that the self-judgment subdimension of self-compassion was positively correlated with the self-awareness, self-management, self-motivation and empathy subdimensions of emotional intelligence, whereas it was not correlated with the social awareness subdimension of emotional intelligence (Table 6).

4. Self-compassion and Emotional Intelligence of Nursing Students According to Their Socio-demographic Characteristics

No significant distinction on the statistical level was assessed between the grade and self-compassion of the students ($F: 6.058, P: 0.109$), significant differences were found between their grades and emotional intelligence ($F: 8.859, P: 0.031$). A Kruskal–Wallis test analysis indicated that the difference between the grade and emotional intelligence of the students was welded starting from the third grade; it was assessed that the emotional intelligence levels of the third-grade students were significantly low compared with students in other grades ($P > 0.05$).

No statistically significant distinction was found between the age, sex, high school, main living location and current location and self-compassion ($P > 0.05$) and emotional intelligence scores.

**DISCUSSION**

This research was carried out in order to assess the correlation of the self-compassion and emotional intelligence of nursing students; it is compared with a limited number of studies as there is no known research on the correlation of the self-compassion and emotional intelligence of nursing students in Turkey or elsewhere.

This research indicates the fair level of self-compassion of the students (Table 4). Başaran et al., Çiftçi et al., Nazik & Arslan, and Kurt et al. have shown in their studies with nursing students that they have a fair level of self-compassion.

Table 4 Average scores of students on the Self-compassion Scale and its subscales ($n$: 471)

<table>
<thead>
<tr>
<th>Subdimensions of Self-compassion</th>
<th>$X \pm SS$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-kindness</td>
<td>2.98 $\pm$ 0.70</td>
</tr>
<tr>
<td>Self-judgement</td>
<td>3.59 $\pm$ 0.73</td>
</tr>
<tr>
<td>Common humanity</td>
<td>2.97 $\pm$ 0.75</td>
</tr>
<tr>
<td>Isolation</td>
<td>3.48 $\pm$ 0.82</td>
</tr>
<tr>
<td>Awareness</td>
<td>3.14 $\pm$ 0.74</td>
</tr>
<tr>
<td>Overidentification</td>
<td>3.50 $\pm$ 0.77</td>
</tr>
<tr>
<td>Total</td>
<td>3.28 $\pm$ 0.51</td>
</tr>
</tbody>
</table>

Table 5 Average scores of students on the Emotional Intelligence Assessment Scale and its subscales ($n$: 471)

<table>
<thead>
<tr>
<th>Emotional Intelligence Subdimensions</th>
<th>$X \pm SS$</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self-awareness</td>
<td>26.5 $\pm$ 6.69</td>
</tr>
<tr>
<td>Self-management</td>
<td>24.3 $\pm$ 6.63</td>
</tr>
<tr>
<td>Self-motivation</td>
<td>25.5 $\pm$ 6.45</td>
</tr>
<tr>
<td>Empathy</td>
<td>26.4 $\pm$ 6.37</td>
</tr>
<tr>
<td>Relationship control/social awareness</td>
<td>25.6 $\pm$ 7.31</td>
</tr>
</tbody>
</table>
self-compassion. The Emotional Intelligence Scale score averages of the students indicate that they have a fair level of emotional intelligence (Table 5). This research result supports the results of the researches carried out by Altuntaş, Akyıl & Burkay, Kaya & Keçeci, Kuzu & Eker, and Ünsar et al. Self-compassion and emotional intelligence are the basic elements of nursing care. These qualifications play an important role in relationship and communication between nurses, patients and families. Emotional intelligence and self-compassion advanced nurses themselves, their patients and other individuals are perceived more accurately and clearly and their care is stressed individuals exhibit sensitivity. These results point out that nursing student do not qualify for the required levels of self-compassion and emotional intelligence and that they could encounter communication problems in understanding the emotions of patients and their families during care giving.

A fair level of significant positive relationship was identified between the self-compassion and emotional intelligence of students (Table 6). Studies carried out by Heffernan et al., Akin, Neff, Rude & Kirkpatrick and Akin, Akın & Abacı also indicated a positive significant correlation between self-compassion and emotional intelligence. Study findings reveal that self-compassion and emotional intelligence affect each other. In the literature, self-compassion, monitoring and tracking information obtained from the individual’s emotions to guide thoughts and actions, including the use of functional form, is actually an important component of emotional intelligence. These results led to a conclusion that any educational activity in nursing education aiming at the development of either self-compassion or emotional intelligence could enhance both features positively and for that reason, these features could be considered integrated. The aim of the study is to show that one should be able to regulate his/her own negative emotions and see them with clarity through the processes that involve giving one self-compassion.

When the differences in grades were studied, it was assessed that there was no distinction between grades concerning self-compassion, whereas there was a significant difference of emotional intelligence to the detriment of third-grade students. The study carried out by Kaya & Keçeci with the nursing students also showed that third-grade students have lower emotional intelligence levels compared with other graders. These results weigh on the fact that there is no significant change among grades concerning self-compassion but at the third grade, some problems are encountered preventing emotional intelligence development; however, the increasing average in the fourth grade indicates that the problem is partially solved. However, it is decided that these reasons should be studied in qualitative researches.

**CONCLUSION AND SUGGESTIONS**

The results of study indicated that nursing students have fair self-compassion and emotional intelligence and there

| Table 6 The correlation of self-compassion and emotional intelligence of students (n: 471) |
|---------------------------------------|-----------------|-----------------|-----------------|-----------------|-----------------|
|                                      | Self-awareness  | Self-management | Self-motivation | Empathy         | Social awareness |
| Overidentification                   | 0.049           | 0.241**         | 0.136**         | 0.034           | −0.006          |
|                                      | 0.287           | 0.000           | 0.003           | 0.464           | 0.896           |
| Awareness                            | 0.350**         | 0.412**         | 0.410**         | 0.303**         | 0.233**         |
|                                      | 0.000           | 0.000           | 0.000           | 0.000           | 0.000           |
| Isolation                            | 0.069           | 0.185**         | 0.099*          | 0.040           | −0.015          |
|                                      | 0.132           | 0.000           | 0.032           | 0.391           | 0.745           |
| Common humanity                      | 0.285**         | 0.297**         | 0.298**         | 0.234**         | 0.236**         |
|                                      | 0.000           | 0.000           | 0.000           | 0.000           | 0.000           |
| Self-judgement                       | 0.147**         | 0.180**         | 0.156**         | 0.118           | 0.048           |
|                                      | 0.001           | 0.000           | 0.001           | 0.011           | 0.302           |
| Self-kindness                        | 0.312**         | 0.357**         | 0.332**         | 0.217**         | 0.179**         |
|                                      | 0.000           | 0.000           | 0.000           | 0.000           | 0.000           |

Pearson correlation. * P > 0.05; ** P > 0.01.
is a positive correlation between self-compassion and emotional intelligence. So, the results of this study suggest that nursing students’ self-compassion and emotional intelligence characteristics should be developed. A suggestion for future research would be to include representatives from differing professions in the same age group. Additional studies on ways to improve self-compassion are needed.

Necessary actions that support the improvement of self-compassion and emotional intelligence should be taken through both university courses blended with related content and seminars that could be held within the scope of individual development.

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