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Original Article

The Influence of Emotional and Spiritual Intelligence on Nurses' Caring Behavior at the Universitas Sumatera Utara Hospital

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Abstract

Aims: This study aims to analyze the influence of nurses' emotional and spiritual intelligences on their caring behavior at the Universitas Sumatera Utara Hospital, Medan, Indonesia.

Design: This research was designed cross sectionally. using simple random sampling, 126 nurses were selected as samples.

Methods: Questionnaires of emotional intelligence, spiritual intelligence and caring behavior were then administered and analyzed using multiple linear regression.

Results: The results showed a positive and significant effect of nurses' emotional intelligence on their caring behavior (p = 0.001 < 0.05) as well as a positive and significant effect of nurses' spiritual intelligence on their caring behavior (p = 0.008 < 0.05). It was found that the most dominant variable that affected caring behavior was the emotional intelligence variable.

Conclusion: The findings of this study indicate that both hospital management and nurses need to carry out a few efforts to increase the nurses' emotional and spiritual intelligence to achieve good caring behavior at the Universitas Sumatera Utara Hospital

Kevwords:

emotional intelligence, spiritual intelligence, caring behavior

INTRODUCTION

While serving and respecting patients, caring is compulsory for nurses who interact for 24 hours with patients (1). Caring is a behavior of giving holistic assisstance to individuals and is the essential part of everyday nursing practice (2). Caring is an ideal moral attitude that nurses need to foster interpersonal relationship and develop human values(3). Caring is also a characteristic of nurses and guides nurses to act (4)(5)

The increased complaints about the given nursing services that are not in line with patients' expectations are because nurses do not care about their patients(5). Nurses' caring behavior expected by patients is such as a friendly attitude, polite, able to communicate, empathy, unhurried, dedicated to the given tasks and fast responsive to the needs of patients by providing nursing care (6).





Ten carative factors proposed by Watson can serve as a reference in applying caring behavior to patients. Nurses who behave caring can positively impact on patients and nurses themselves. Caring behavior within the nurses can lead patients to feel accepted, supported, and protected during hospitalization. This can motivate nurses to treat patients with care and respect (7).

Patients' assessment of nurses such as being lacking in empathy, slowresponsive to the patients' complaints, lack of ability to listen to patients' feelings. Nurses are also burdened with a lot of administrative works. These are both external and emotional factors affecting the attitude of nurses(8)(9).

Emotional control is essential in creating and maintaining a caring-based working environment(10). Therefore, nurses need to develop emotional intelligence, internalize emotional intelligence to establish relationships, empathize with patients, manage emotions in carrying out their roles and carry out caring practices in the provided services(11).

Previous research showed a significant relationship among emotional intelligence, burn out, and caring. Emotional intelligence significantly strong related to nurses' caring behaviour and contributed to reduce nurse fatigue (12)(13)(11). Nursing care provided with good skills but in absence of good emotional attitude are judged by patients as services that are not in line with expectations. Many nurses had high emotional intelligence but some nurses were not good at controlling emotions. The highest score was self-awareness whereas the lowest score was empathy(14).

The importance of having emotional and spiritual intelligence requires nurses to be more committed and have closer working relationships in health care organizations (15). Spiritual intelligence affects the caring behavior of nurses in meeting the basic needs of patients, including their spiritual needs (16). Nurses who have a high level of spiritual intelligence will be happier in life than those with a low level(17). They will avoid actions that can harm themselves and others, and are more responsible and empathetic. With spiritual intelligence, nurses will work according to their roles, love what they do, do a good job, can decide what is good and what is not. They also can think about the possibilities that will happen, and have aspirations to continue to improve themselves(18). But some author revealed spiritual intelligence does not give meaning to nurses' caring behavior (13).

Based on initial observations of the present researchers, some nurses who did not behave caring towards patients, lack of emotional and spiritual intelligence. This was indicated by the lack of information about the conditions and actions taken on the patient. The nurse's face was less friendly, lacked smile, and patient in responding to their patients' complaints. They seemed unhappy while carrying out tasks and also slow responded to patients' complaints(19). Nurses have not been able to manage their own emotions, understand the emotions of others, lack emphaty and not happy while do nursing practice. The Result of this study is trying to show that both of emotional and spiritual intelligence would be treated as important predictors of caring behavior. This will imply for nurses also management of the hospital in the greater needs of nursing practice to improve do caring behavior, with the help of building strong emotional and spiritual intelligence.



METHODS

This quantitative research used cross-sectional design. The sample were 126 nurses selected by using simple random sampling technique. Questionnaires were administered to collect data. To measure the nurses' emotional intelligence, researchers used the Emotional Competence Inventory version 2.0 (ECI-2) questionnaire which consisted of 72 questions. Spiritual intelligence was measured by The Spiritual Intelligence Self - Report Inventory (SISRI 24) questionnaire which consisted of 24 questions. Caring behavior was measured by the Caring Behavior Inventory (CBI) instrument which consisted of 24 questions.

RESEARCH ETHIC

This research use the basic principles of research ethics which respect for human dignity, respect for privacy and confidentiality, respect for justice inclusiveness, and balancing harm and benefits.

RESULTS

Based on gender, 77.8% of respondents were female. Based on age, 71 people (56.3%) were in the age range of 20-30 years. Based on education, 59.5% of nurses were nursing graduates. Based on the length of service, 38.9% of respondents had a working period of 2 - 4 years.

The results of the measurement of the nurses' emotional intelligence at the given hospital showed that 62.7% of the nurses had a moderate level of emotional intelligence. 56.3% of them had spiritual intelligence with the high category. And 63.5% of the nurses had quite caring behavior. Based on the results of the categorization of emotional intelligence indicators, it can be seen in Table 1 that 79 nurses (62.7%) are in the medium category of relationship management dimensions.

Table 1. Frequency Distributions of Emotional Intelligence Indicators (n=126)

Emotional Intelligence	Н	ligh	Mod	erate	L	ow
Emotional Intelligence	f	%	f	%	f	%
self awareness	51	40.5	56	44.4	19	15.1
self management social awareness	59 70	48.4 55.5	56 45	44.4 35.7	11 11	8.7 8.7
Relationship management	36	28.6	79	62.7	11	8.7

The results of the measurement of spiritual intelligence indicators are provided in Table 2 which shows that 56.3% of the nurses have high transcendental awareness. Transcendental awareness can refer to nurses' ability to feel the spiritual dimension of life so that in carrying out their works they can always be responsible for their jobs and prioritize the right actions and feel happy in doing so.



Tabel 2. Frequency Distributions of Spiritual Intelligence Indicators (n=126)

Cuinitual Intelligence	<u>High</u>	<u>Moderate</u>			low		
Spiritual Intelligence	F	%	f	%	F	%	
Critical Existential Thinking	1	56.3	2	41.3	3	2.4	
Personal Meaning Production	52	41.3	70	55.6	4	3.2	
Transcendetal Awareness	71	56.3	0	39.7	5	3.9	
Conscious State Expansion	62	49.2	9	46.8	5	3.9	

The results of the categorization of the dimensions of caring behavior can be seen in Table 3 which shows that the majority of nurses or 63.5% of nurses on the dimension of assurance of human presence are with sufficient category. This dimension is a combination of three of Watson's characteristic factors; namely, the formation of an altruistic-humanistic value system, instilling hopes and growing sensitivity to oneself and others. Nurses must respect clients as human beings and respect their existence regardless of the clients' status. Caring activities in this dimension include helping clients, talking to them, respecting their clients as human beings and responding quickly to their calls.

Tabel 3. Frequency Distributions of Caring Behavior Indicators Caring (n=126)

Caring Behavior	Goo	d	Eno	ugh	le	SS
Caring Denavior	F	%	F	%	F	%
Respectful deference	43	34,1	65	51,6	43	34,1
Assurance of human presence	29	23,0	80	63,5	29	23,0
Knowledge and skill	59	46,8	50	39,7	59	46,8
Positive connectedness	45	35,7	62	50,4	45	35,7

Based on the result of measurement with multiple correlation analysis, it is found that the variables of emotional intelligence and spiritual intelligence explain 73.8% of caring behavior where as the remaining 26.2% is explained by other variables not included in this study. This is based on the number R² which can beseen in Table 4.

Tabel 4. multiple correlation analysis(R2)

Model	R	R Square	Adjusted R Square
1	0.859	0.738	.733

Following the multiple linear regression test, it was found that the emotional intelligence variable was with p-value = 0.001 < 0.05, which means the nurses' emotional intelligence influenced their caring behavior. While the spiritual intelligence variable was with p-value = 0.008 < = 0.05. This indicates that the nurses' spiritual intelligence affected their caring behavior. The details can be seen in Table 4.



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Effect of emotional intelligence on the caring behavior of nurses at the **Universitas Sumatera Utara hospital**

Tabel 5. Regression test results of the influences of emotional intelligence and spiritual intelligence on caring behavior

Coefficients			
Model	В	t	Sig.
(Constant)	-22.019	-3.561	0.001
Emotional intelligence	0.366	10.132	0.001
Spiritual Intelligence	0.283	2.699	0.008

Dependent Variable: Caring Behavior

Based on the result of the regression test in Table 5, it is found that the regression coefficient for the emotional intelligence variable is 0.366 and the spiritual intelligence variable is 0.283. The regression coefficient of both emotional intelligence and spiritual intelligence is positive. This indicates that when emotional intelligence and spiritual intelligence increase, the caring behavior of nurses also increases. Likewise, when the demands of emotional intelligence and spiritual intelligence lower, the caring behavior of nurses also decreases. The increases in emotional intelligence can increase the caring behavior of nurses by 0.366 after being controlled by the spiritual intelligence variable. The increase in spiritual intelligence will increase the caring behavior of nurses by 0.238 after being controlled by the emotional intelligence variable. Based on the unstandardized coefficient Beta, the variable that has the most significant influence on caring behavior is emotionalintelligence.

DISCUSSION

Effect of emotional intelligence on the caring behavior of nurses at the Universitas Sumatera Utara hospital

Based on the results of the present study, it is found that the emotional intelligence of nurses at the Universitas Sumatera Utara Hospital is mostly with moderate emotional intelligence or 52.4%. Based on the result of the emotional intelligence dimension test, 79 nurses or 62.7% of the nurses have moderate emotional intelligence in the relationship management dimension while 70 nurses (55.5%) have high emotional intelligence in the social awareness dimension. The relationship management dimension is a basic ability that nurses need to have good interpersonal relationships and communication to meet patients' care needs and conduct cooperative negotiations with other health teams. The basis of any sort of relationships is communication. Nurses' ability to communicate effectively is considered crucial in emotional intelligence.

Emotional intelligence can lead nurses to understand their co-workers' feelings and respond to them better. Emotional intelligence is also an important aspect for nurses in performing their obligations in nursing practices. Individuals with high emotional





intelligence can adapt and overcome problems that arise in theirworkplace (20). This is important to support nurses to adjust to dynamic changes in their work setting. Nurses who do not have high emotional intelligence can be characterized by high emotional attitudes, quick to act on their emotions, moody and insensitive to the feelings and conditions of others.

Nurses' caring behavior towards their patients and co-workers can include physical and emotional elements. Caring is not only related to physical performance abilities, but also involves a deeper understanding of explicit feelings and emotions. Nurses with high emotional intelligence can be good at understanding the emotionsof others.

This statement is also in line with what was stated by Goleman that to provide nursing services, nurses must have high emotional intelligence. Emotional intelligence is of importance when interacting with patients, families, fellow nurses, doctors and other health-team members. When interacting, empathy is necessary to enable nurses to recognize their own and other people's emotions so that a relationship of trust and mutual assistance can be established between nurses and patients, nurses and families, nurses and doctors, nurses and other health teams. High emotional intelligence can form caring traits such as patience, honesty, humility, caring, respect, appreciation, and attention to others.

This present research is in line with several previous studies. An Investigation by Ardiana (2010) stated that there was a positive relationship between emotional intelligence and caring behavior of nurses according to patients' perceptions in the inpatient room at general hospital of Dr. Koesnadi Bondowoso (21). Lestari (2017) reported that there was a positive and significant relationship between emotional intelligence and the caring behavior of inpatient nurses in hospitals in Jakarta (22). The result of study by Darmini, Susanti, Kamaryati found that the caring behavior influenced by the emotional intelligence of nurses (9).

The forms of nurses caring for themselvesare to have four aspects that need to be prepared by nurses in order to be caring and competent in providing nursing care First, nurses need to have specific knowledge that will be used to meet patient needs. Second, psychological aspects refer to form of feelings, emotions and memories which are part of life experiences. Third, spiritual aspects are in the form of understanding the meaning of something. Fourth, the physical aspects deal with the ability of nurses to maintain their healthy lifestyle in order to take care of themselves and other people (23).

Effect of spiritual intelligence on the nurses' caring behavior at the Universitas Sumatera Utara hospital

This present study finds that 56.3% of nurses at the Universitas Sumatera Utara Hospital had high spiritual intelligence and 2.4% of them had low intelligence. The results of the categorization of the dimensions of caring behavior shows that the majority 63.5% of nurses had quite caring behavior on the dimension of assurance of human presence. Nurses with high spiritual intelligence are considered to capable of placing their behavior and assessing their actions, undertaking solid works, and attempting to do things patiently and responsibly. Spiritual Intelligence allows nurses to



be creative and better understand their situations, considered to possess a quality of life that is on the basis of visions and values such as principles or guidelines for living on truths, so it helps nurses perform difficult tasks and so it make nurses can do caring behavior. Nurses with higher spiritual intelligence are mentally stronger and sensitive to the patient's condition, difficulties in their work perceive as an opportunity to help others and this allows their altruism to get patient satisfaction results.

Nurses with high spiritual intelligence is considered to love their profession and carry out their roles and functions wholeheartedly based on their sense of responsibility. According to Wahab and Umiarso, spiritually intelligent people can maintain harmony in their daily lives and be humane towards other people. The results of the current analysis show that spiritual intelligence is related to nurses' caring behavior, with a positive relationship direction where the higher the spiritual intelligence, the better the nurses' caring behavior. In line with result study Sunaryo, Irwanto & Manan (2017), spiritual intelligence had a positive effect on caring behaviour (24). Result study by Zulfita, Hastuti, and Nurfianti found that there is a relationship between emotional and spiritual intelligence with nurse caring behavior. There is a relationship between emotional and spiritual intelligence with nurse caring behaviour (25). Also in accordance with previous research, spiritual intelligence is something that can be used as an important factor in determining the caring behavior of nurses (26).

Based on the present measurement using the unstandardized coefficient Beta, it is found that the strongest effect on caring behavior was emotional intelligence which is 0.366. This also indicates that emotional intelligence variable has a stronger influence compared to its counterpart. The higher the emotional intelligence of nurses at the Universitas Sumatera Utara Hospital, the better their caring behavior. This result confirms previous investigations that emotional intelligence is strongly related to nurses' caring behavior(12)(13)(11). Interestingly, although both spiritual intelligence and emotional intelligence are interrelated, spiritual intelligence can be used as an important role in determining nurse caring behavior(26).

CONCLUSIONS

This study found emotional intelligence and spiritual intelligence have a positive and significant effect on caring behavior. Emotional intelligence has a more dominant influence on the caring behavior of nurses compared to spiritual intelligence. This shows that the higher the emotional intelligence and spiritual intelligence, the caring behavior of nurses in hospitals will be better.

REFERENCES

- 1. Simamora RH, Purba JM, Bukit EK, Nurbaiti. Penguatan Peran Perawat Dalam Pelaksanaan Asuhan. J Pengabdi Dan Pemberdaya Masy. 2019;3(1):25–31.
- 2. Bakar A, Nursalam N, Adriani M, Kusnanto K, Qomariah SN, Hidayati L, et al. Nurses' Spirituality Improves Caring Behavior. Int J Eval Res Educ. 2017;6(1):23.



- 3. Simms LL, Watson J. Nursing: The Philosophy and Science of Caring. Vol. 79, The American Journal of Nursing. 1979. 2040 p.
- 4. Enns CL, Sawatzky JA V. Emergency Nurses' Perspectives: Factors Affecting Caring. J Emerg Nurs [Internet]. 2016;42(3):240–5. Available from: http://dx.doi.org/10.1016/j.jen.2015.12.003
- 5. Urzia U, Jannah N. Persepsi Pasien terhadap Perilaku Caring Perawat di Rumah Sakit. JIM FKep. 2020;4(2):132–40.
- 6. Simamora RH. Upaya Pembinaan Perawat Di Rumah Sakit Ngesti Waluyo Parakan Temanggung Jawa Tengah. J Keperawatan Soedirman. 2013;8(2):105–19.
- 7. Firmansyah CS, Noprianty R, Karana I. Perilaku Caring Perawat Berdasarkan Teori Jean Watson di Ruang Rawat Inap. J Kesehat Vokasional. 2019;4(1):33.
- 8. Iro-Idoro CB, Ajibare OZ. Emotional Intelligence as a Strategy for Enhancing Nurses' Work Attitude in Ogun State, Nigeria. J Econ Bus Manag. 2017;5(1):50–3.
- 9. Yuliati Darmini A, Dina Susanti N, Putu Kamaryati N. Gambaran Kecerdasan Emosional Dan Perilaku Caring Perawat Di Rumah Sakit Daerah Badung, Bali. J Keperawatan Komprehensif (Comprehensive Nurs Journal). 2017;3(2):94–100.
- 10. Beauvais A, Andreychik M, Henkel LA. The role of emotional intelligence and empathy in compassionate nursing care. Mindfulness & Compassion [Internet]. 2017;2(2):92–100. Available from: http://dx.doi.org/10.1016/j.mincom.2017.09.001
- 11. Rego A, Godinho L, McQueen A, Cunha MP. Emotional intelligence and caring behaviour in nursing. Serv Ind J. 2010;30(9):1419–37.
- 12. Bagus I, Dharmanegara A, Pradesa HA. The Influence of Self-Efficacy and Emotional Intelligence toward Caring Behavior among Nurses in Public Hospital Denpasar Bali. IOSR J Nurs Heal Sci Ver III [Internet]. 2015;4(2):2320–1940. Available from: www.iosrjournals.org
- 13. Kaur D, Sambasivan M, Kumar N. Effect of spiritual intelligence, emotional intelligence, psychological ownership and burnout on caring behaviour of nurses: A cross-sectional study. J Clin Nurs. 2013;22(21–22):3192–202.
- 14. Hidayati L, Rifai F, Ni'mah L. Emotional Intelligence and Caring Behavior Among Muslim Nurse: A Study in Religious-Based Hospital in Surabaya-Indonesia. 2017;3(Inc):137–9.
- 15. King DB, Mara CA, De Cicco TL. Connecting the spiritual and emotional intelligences: Confirming an intelligence criterion and assessing the role of empathy. Int J Transpers Stud. 2012;31(1):11–20.
- 16. Rani AA, Abidin I, Rashid AH, Rashid M, Hamid A. The Impact of Spiritual Intelligence on Work Performance: Case studies in Government Hospitals of East Coast of Malaysia. Macrotheme Rev [Internet]. 2013;2(3):46–59. Available from: http://macrotheme.com/yahoo_site_admin/assets/docs/7RaniMR23.40131338.pdf
- 17. Zohar, Marshall. SQ Kecerdasan Spiritual Danah Zohar, Ian Marshall -Google Buku [Internet].2000. Available from: https://books.google.co.id/books?hl=id&lr=&id=bfhSGrIm7KIC&oi=fnd&pg=P



- A3&dq=kecerdasan+spiritual&ots=n4wfB8rLa3&sig=SHNk-XEvuF56Imuuvt_t70YaGNQ&redir_esc=y#v=onepage&q=kecerdasan spiritual&f=false
- 18. Faribors B, Fatemeh A, Hamidreza H. The relationship between nurses' spiritual intelligence and happiness in Iran. Procedia Soc Behav Sci. 2010;5:1556–61.
- 19. Fedora L. Pengembangan Caring Code di Instalasi Gawat Darurat Rumah Sakit USU Medan. Tesis. 2019;
- 20. Ariga FA, Purba JM, Nasution ML. the relationship of emotional intelligence, workplace culture, and nurse performance in a private hospital in Medan Indonesia. Belitung Nurs J. 2020;6(3):73–6.
- 21. Ardiana A. Universitas indonesia hubungan kecerdasan emosional perawat dengan perilaku. 2010;1–177.
- 22. Lestari, Saiyfa Ayu, Rozali, Yuli Asmi Safitri M. Hubungan Kecerdasan Emosional dengan Perilaku Caring Perawat Rawat Inap RSUD di Jakarta. J Psikol. 2017;011(9):1–8.
- 23. Chiang YC, Lee HC, Chu TL, Han CY, Hsiao YC. The impact of nurses' spiritual health on their attitudes toward spiritual care, Professional commitment, And caring. Nurs Outlook [Internet]. 2016;64(3):215–24. Available from: http://dx.doi.org/10.1016/j.outlook.2015.11.012
- 24. Sunaryo H, Nirwanto N, Manan A. The Effect of Emotional and Spiritual Intelligence on Nurses' Burnout and Caring Behavior. Int J Acad Res Bus SocSci. 2018;7(12):1211–27.
- 25. Zulfita N, Hastuti MF, Nurfianti A. Hubungan Tingkat Kecerdasan Emosional Dan Spiritual Terhadap Perilaku Caring Perawat Pelakasana Di Rumah Sakit Universitas Tanjungpura Pontianak. Tanjungpura J Nurs Pract Educ. 2020;2(2).
- 26. No I, Arbabisarjou A, Hesabi N, Homaei R, Omeidi K. Special Issue 9S: Medical Science and Healthcare: Current Scenario and Future Development The Relationship between Spiritual Intelligence and Emotional Intelligence among Students at Isfahan University of Medical Sciences with a Concentration on Improve. 2016;(9):596–603