

The Relationship between Emotional Intelligence and Employment Retention among Nurses of Private Hospitals in Sulaymaniah

Liya Saman Hasan¹, Irmawati Norazman^{2*}, Wan Zhalkiatul Aida Ishak³, Lavan Talib⁴, Azlineer Sarip⁵, Rabeatul Husna Abdull Rahman⁶

^{1,3,4}Qaiwan International University, Sulaymaniyah Kurdistan, Iraq, ^{2,5}Faculty of Social Sciences & Humanities, Universiti Teknologi Malaysia, 81310, Skudai, Johor Bahru, Malaysia,

⁶UiTM Arau, 02600 Arau, Perlis

*Corresponding Author Email: irmawati@utm.my

DOI Link: <http://dx.doi.org/10.6007/IJARBSS/v15-i12/27176>

Published Date: 09 December 2025

Abstract

The purpose of this paper is to examine the relationship between emotional intelligence and employee retention among nurses working in private hospitals in Sulaymaniah, Kurdistan, Iraq. Emotional intelligence, particularly self-awareness, emotional regulation, and empathy is believed to be connected to how nurses cope with stress and maintain commitment to their professional roles. This quantitative study examined nurses from five private hospitals and employed structured questionnaires to measure emotional intelligence and employee retention level, as well as the relationship between these two variables. The findings indicate that while nurses reported high emotional intelligence, their retention levels were only moderate. The analysis further revealed a weak but statistically significant negative correlation between emotional intelligence and employee retention. This suggests that although emotionally intelligent nurses may cope effectively with stress, they may also exhibit heightened sensitivity to workplace challenges, which could be connected to their intention to remain in the organization. The study highlights the importance of integrating emotional intelligence development with supportive organizational practices to enhance retention outcomes.

Keywords: Emotional Intelligence, Employee Retention, Nurses, Private Hospitals, and Emotional Regulation

Introduction

In today's globalized and highly competitive healthcare landscape, retaining a skilled and motivated workforce is critical for ensuring the delivery of consistent, high-quality patient care. Healthcare organizations face significant challenges in maintaining their nursing staff,

who are essential for sustaining operational efficiency and ensuring positive patient outcomes (Lee et al., 2019). High turnover rates among nurses not only disrupt care continuity but also impose substantial financial burdens related to recruitment, training, and lost productivity (Hesford et al., 2016). While traditional retention strategies have focused on salary, benefits, and job security, recent research highlights the growing importance of emotional intelligence in influencing employees' intentions to stay or leave (Judeh, 2013). Emotional intelligence (EI) refers to the capacity to perceive, understand, express, and regulate one's own emotions and the emotions of others — a broad mental ability that supports problem solving and adaptive functioning (Larguinho et al., 2025; Piccerillo et al., 2025). Key of EI components such as self-awareness, self-regulation, intrinsic motivation, empathy, and social skills enhance employees' capacity to navigate stress, build effective relationships, and maintain commitment under challenging conditions (Ugoani et al., 2015; Szczygiel & Mikolajczak, 2018). In healthcare settings, particularly among nurses who frequently encounter emotional exhaustion and high job demands, developing emotional intelligence can mitigate burnout and improve retention outcomes (Maniscalco et al., 2024; Zhang et al., 2023).

This study investigates nurses employed in five private hospitals in Sulaymaniah, Kurdistan, namely Anwar Sheikha Medical City, Faruk Medical City, Baxshin Hospital, Asia International Hospital, and Smart Health Tower, where retention challenges are intensified by staffing shortages, organizational pressures, and limited resources (Anwar & Shukur, 2015). By examining the relationship between emotional intelligence and nurse retention within this local context, the study aims to generate actionable insights for healthcare administrators and policymakers. Specifically, understanding how dimensions of emotional intelligence, such as self-focused and other-focused emotional appraisal and regulation, relate to nurses' intentions to remain in their positions can inform the design of targeted interventions to strengthen workforce stability. The significance of this study lies in bridging the gap between emotional competencies and practical retention strategies. Enhancing nurses' emotional intelligence has the potential not only to improve individual well-being and job satisfaction but also to sustain organizational performance and patient care quality. Therefore, this research contributes to both theoretical understanding of workforce sustainability and offers practical implications for healthcare institutions aiming to reduce turnover through emotionally supportive work environments. The objectives of this research are as follows

1. To determine the level of emotional intelligence among nurses working in private hospitals in Sulaymaniah.
2. To determine the level of employee retention among nurses working in private hospitals in Sulaymaniah.
3. To examine the relationship between emotional intelligence and employee retention among nurses working in private hospitals in Sulaymaniah.

Literature Review

Emotional intelligence (EI)

Emotional intelligence (EI), initially conceptualized by Salovey and Mayer (1990) as the ability to perceive, understand, and manage emotions, has been extensively studied for its impact on individual and organizational outcomes. Goleman (1995) popularized the concept in the workplace, while Bar-On (1997) developed the emotional-social intelligence model,

incorporating key competencies like self-awareness, adaptability, and stress tolerance. These skills enable employees to navigate complex emotional demands, resolve conflicts, and promote psychological well-being, particularly in high-pressure environments such as healthcare (Nespereira-Campuzano & Vázquez-Campo, 2017; Joseph & Newman, 2010; Harms & Credé, 2010).

Self-Determination Theory (Deci & Ryan, 1985, 2000, 2007) provides a complementary framework for understanding how emotional intelligence relate and influences workplace behavior. It emphasizes autonomy, competence, and relatedness as fundamental psychological needs. Emotional intelligence supports these needs by fostering emotional regulation, strong interpersonal relationships and self-directed motivation (Perreault et al., 2014). Employees with higher EI tend to exhibit better coping mechanisms and are more intrinsically motivated, which contributes to their retention and overall job satisfaction (Houghton et al., 2012; Johnson et al., 2009).

Employee Retention

Meanwhile, employee retention has emerged as a critical challenge across industries, particularly in the healthcare sector, where workforce shortages are especially pronounced. According to Ghani et al. (2022), retention involves creating supportive environments that enhance job satisfaction and encourage long-term commitment. In this context, the Theory of Planned Behavior (Ajzen, 1991) explains how employees' attitudes, perceived norms, and behavioral control influence their intention to stay or leave. Studies by Hemsworth et al. (2024) show that job satisfaction, shaped by these psychological factors, can significantly reduce turnover intentions.

Relationship between Emotional Intelligence and Employee Retention

Recent studies emphasize the strong relationship between EI and reduced turnover. For example, Giao et al. (2020) found that emotional intelligence mitigates work-family conflict and burnout, while Zeidan (2020) and Alzyoud et al. (2019) confirmed that EI dimensions directly influence job satisfaction and organizational loyalty. Emotional intelligence promotes psychological stability and a sense of belonging, thereby reducing employees' likelihood of turnover. Coronado-Maldonado and Benítez-Márquez (2023) argued that in sectors like healthcare, emotionally intelligent professionals are better prepared to cope with chronic stress and demanding work conditions. Moreover, research has demonstrated that emotionally intelligent leadership and high-quality leader-member exchange (LMX) relationships reduce turnover intentions by cultivating supportive and empathetic work climates (Zhang et al., 2022; Jordan & Troth, 2014). Drigas and Papoutsi (2019) and Dođru (2022) further reinforce the role of EI in enhancing interpersonal dynamics, boosting morale, and increasing resilience in emotionally demanding contexts.

Viewed through the complementary lenses of Self-Determination Theory and the Theory of Planned Behavior, the accumulated evidence shows that emotional intelligence fortifies job satisfaction, stress management, and collegial relationships, factors repeatedly linked to lower turnover intentions (Deci & Ryan, 2000; Ajzen, 1991; Zhang et al., 2022). These findings underscore the strategies value of cultivating emotional intelligence at both the individual and leadership levels to retain talent in demanding settings such as healthcare.

Methodology

This study was conducted to examine the relationship between emotional intelligence and employee retention among nurses working in private hospital in Sulaymaniah, Kurdistan Region of Iraq. The research targeted five major private hospitals, Anwar Sheikha Medical City, Faruk Medical City, Baxshin Hospital, Asia International Hospital, and Smart Health Tower. A total population of 589 nurses was identified and using Krejcie and Morgan's (1970) sampling table, a sample size of 234 nurses was determined. A simple random sampling method was used to ensure equal selection opportunity and minimize bias (Sekaran & Bougie, 2016). The research adopted a quantitative, correlational, and cross-sectional design, which allowed data collection at a single point in time and supported analysis of relationships between variables. Data was gathered using a structured questionnaire consisting of three sections, demographic information, emotional intelligence, and employee retention.

Emotional intelligence was measured using the 28-item scale by Pekaar, Bakker, Van Der Linden, and Born (2018), which evaluates four dimensions, self-focused emotion appraisal, other-focused emotion appraisal, self-focused emotion regulation, and other-focused emotion regulation. Each item was rated on a 5-point Likert scale ranging from strongly disagree (1) to strongly agree (5), and the scale demonstrated high internal consistency, with Cronbach's Alpha values of 0.82, 0.85, 0.80, and 0.82 for each respective dimension. Employee retention was measured using an 8-item scale adapted from Kindyt and Maya (2009), also rated on a 5-point Likert scale. This scale yielded a Cronbach's alpha of 0.91, confirming strong internal reliability.

Data was collected via email, and the questionnaire was made available in both English and Kurdish. Prior to the main study, a pilot test was conducted with 15 nurses to verify the reliability of the instruments. Pilot results showed Cronbach's alpha values of 0.945 for emotional intelligence and 0,92 for employee retention. All responses were treated with confidentiality. The collected data was analyzed using SPSS software, with descriptive statistics used to address the first two research objectives, and Pearson's correlation analysis applied to the third objective to examine the strength and direction of the relationship between emotional intelligence and employee retention. The correlation results were interpreted using the classification system provided by Pallant (20130), which categorizes relationships from negligible to very high based on correlation coefficient values.

Results

Descriptive analysis of the study variables (Table 1) indicated that nurses exhibited high emotional intelligence ($M = 4.10$, $SD = 0.42$) and moderate employee retention ($M = 3.25$, $SD = 0.51$). Within emotional intelligence, self-awareness scored highest ($M = 5.50$, $SD = 0.39$) and emotional regulation lowest ($M = 2.57$, $SD = 0.44$). For employee retention (ER), the item 'linking their workplace' had the highest mean ($M = 3.62$, $SD = 0.44$), whereas 'indifference toward employer' was the lowest ($M = 2.91$, $SD = 0.49$).

Table 1

Level of Emotional Intelligence and Employee Retention

Variables	Mean	Std. Deviation	Level
Self-Awareness	5.50	0.39	High
Emotional Regulation	2.57	0.47	Low
Emotional Intelligence (Overall)	4.10	0.42	High
"Liking their workplace" ER Item	3.62	0.44	Moderate
"Indifference toward employer" ER Item	2.91	0.49	Moderate
Employee Retention (Overall)	3.25	0.51	Moderate

Note: Mean value interpretation: Low = 1.00-2.33; Moderate = 2.34-3.67; High = 3.68-5.00

Pearson correlation analysis was conducted to examine the relationship between emotional intelligence and employee retention. As shown in Table 2, the results indicate a weak but statistically significant negative correlation ($r = -0.249$, $p < 0.01$), suggesting that higher levels of emotional intelligence are associated with a slight decrease in employee retention.

Table 2

Pearson Correlation between Emotional Intelligence and Employee Retention

Emotional Intelligence	Employee Retention	
	r	p
	-0.249	0.000

Discussion and Recommendation

This study investigated the levels of emotional intelligence (EI) and employee retention among nurses working in private hospitals in Sulaymaniah, as well as the relationship between these two variables. The findings underscore the significant role of emotional intelligence in nursing practice, where nurses demonstrated generally high levels of EI, reflecting an awareness of their own emotions and those of patients, which is essential for delivering empathetic and compassionate care. This supports the findings of Szygiel and Mikolajczak (2018), who noted that high trait emotional intelligence helps nurses buffer the effects of negative emotions and reduce job burnout. Despite this strength, the study identified challenges in emotional regulation skills. Which are vital for maintaining professionalism and resilience in high-pressure healthcare environments. Fattah et al. (2023) similarly highlighted that structured emotional intelligence training significantly improves emotional regulation and decreases burnout rates among critical care nurses, emphasizing the importance of interventions such as stress management programs and peer support networks.

Regarding nurse retention, the moderate retention rates observed indicate some degree of loyalty and emotional attachment to their organizations, aligning with Fattah et al.'s (2023) findings that emotional attachment is a key factor in reducing turnover in care professions. However, the study also found that some nurses approach their roles from a transactional perspective, remaining primarily due to job availability rather than satisfaction or commitment. This perspective highlights ongoing challenges related to job satisfaction, career development, and organizational support that must be addressed to improve retention outcomes.

One of the most notable results of this research is the weak but statistically significant negative correlation between emotional intelligence and employee retention. While prior research such as Codier et al. (2009) and Sung et al. (2010) documented positive links between emotional intelligence, nurse performance, and organizational commitment, this study reveals a more complex dynamic. The heightened emotional awareness of nurses with greater EI may make them more sensitive to organizational deficiencies and workplace stressors, prompting a greater likelihood to consider leaving if their professional and emotional needs are unmet. This finding echoes Hutchinson and Hurley's (2013) argument that improving EI alone is insufficient without complementary organizational improvements in work-life balance, recognition, and career advancement opportunities. This counterintuitive relationship between EI and retention underscores the nuanced role of emotional intelligence in nursing workforce stability. Nurses who are emotionally perceptive may possess enhanced interpersonal skills and stress-coping abilities, yet their awareness can also expose them to the realities of systemic shortcomings, potentially leading to turnover. Organizations should integrate EI development with systemic improvements, fostering environments that support emotionally intelligent nurses through adequate recognition, career pathways, and supportive workplace cultures.

This study's recommendations advocate for embedding ongoing emotional intelligence training programs within healthcare organizations to develop skills in emotional awareness, self-regulating, and social competence. Creating an emotionally intelligent workplace can enhance relationships, increase job satisfaction, and motivate nurses to remain committed to their roles beyond transactional employment. Furthermore, future research is encouraged to expand sample sizes and geographic contexts, incorporate other industries and public sectors, and employ mixed methods including qualitative interviews to gain a more comprehensive understanding of how EI affects retention across diverse workplace environments.

Conclusion

In conclusion, this study explored the relationship between emotional intelligence and employee retention among nurses in private hospitals in Sulaymaniah, revealing a nuanced connection. While nurses demonstrated generally high levels of emotional intelligence, particularly in self-awareness and empathy, challenges in emotional regulation persisted, potentially affecting resilience and job satisfaction. Retention levels were found to be moderate, with evidence suggesting that emotionally intelligent nurses may be more perceptive of organizational shortcomings, thus slightly less inclined to remain if their needs are unmet. The weak but statistically significant negative correlation between EI and retention highlights the importance of addressing systemic workplace factors alongside emotional intelligence development. These findings underscore the need for healthcare institutions to foster emotionally supportive environments that combine personal skill development with organizational improvements, ultimately aiming to retain emotionally competent nurses and enhance patient care quality.

References

- Ajzen, I. (1991). *The theory of planned behavior*. *Organizational Behavior and Human Decision Processes*, 50(2), 179-211.
- Al-Hamdan, Z. M., Muhsen, A., Alhamdan, M., Rayan, A., Banyhamdan, K., & Bawadi, H. (2020). Emotional intelligence and intent to stay among nurses employed in Jordanian hospitals. *Journal of Nursing Management*, 28(2), 351–358.
- Al-Oweidat, I., Shosha, G. A., Baker, T. A., and Nashwan, A. J. (2023). The relationship between emotional intelligence and organizational commitment among nurses working in governmental hospitals in Jordan. *BMC Nurs.* 22, 1–12. DOI: 10.1186/ s12912-023-01361-2.
- Alsufyani, A. M., Aboshaiqah, A. E., Alshehri, F. A., & Alsufyani, Y. M. (2022). Impact of emotional intelligence on work performance: The mediating role of occupational stress among nurses. *Journal of Nursing Scholarship*, 54(6), 738-749.
- Anwar, G., & Shukur, I. (2015). Job satisfaction and employee turnover intention: A case study of private hospital in Erbil. *International Journal of Social Sciences & Educational Studies*, 2(1), 73-80.
- Austin, E. J., Saklofske, D. H., & Egan, V. (2005). Personality, well-being and health correlates of trait emotional intelligence. *Personality and Individual Differences*, 38(3), 547-558.
- Backett, M. A., Mayer, J. D., & Warner, R. M. (2004). Emotional intelligence and its relation to everyday behaviour. *Personality and Individual Differences*, 36(6), 1387-1402.
- Bar-On, R. (1997). BarOn emotional quotient inventory (Vol. 40). Multi-health systems.
- Bar-On, R. (2005). The impact of emotional intelligence on subjective well-being. *Perspectives in education*, 23(1), 41-62.
- Barrett, L. F., & Salovey, P. (Eds.). (2002). *The wisdom in feeling: Psychological processes in emotional intelligence*. Guilford Press.
- Barsade, S. G., & Gibson, D. E. (2007). Why does affect matter in organizations?. *Academy of management perspectives*, 21(1), 36-59.
- Biason, Ricardo S. (2020) The Effect of Job Satisfaction on Employee Retention. *International Journal of Economics, Commerce and Management*.
- Brackett, M. A., & Mayer, J. D. (2003). Convergent, discriminant, and incremental validity of competing measures of emotional intelligence. *Personality and Social Psychology Bulletin*, 29(9), 1147-1158.
- Bryman, Alan (2016). *Social Research Methods*. Oxford University Press.
- Cichoń, J., Płaszewska-Żywko, L., & Kózka, M. (2023). Emotional intelligence and coping strategies among intensive care unit nurses. *Nursing in critical care*, 28(2), 322-328.
- Coetzee, M., & Pauw, D. (2013). Staff perception of leader emotional competency as a predictor of satisfaction with retention factors. *Journal of Psychology in Africa*, 23(2), 177–186. <https://doi.org/10.1080/14330237.2013.10820613>
- Coronado-Maldonado, I., & Benítez-Márquez, M. D. (2023). Emotional intelligence, leadership, and work teams: A hybrid literature review. *Heliyon*, 9(10), e20356. <https://doi.org/10.1016/j.heliyon.2023.e20356>
- Creswell, John W. (2003). *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches*. Sage Publications.
- Deci, Edward L., and Richard, M. (2007). "Facilitating Optimal Motivation and Psychological Well-Being across Life's Domains." *Canadian Psychology*, vol. 49, no. 1, pp. 14–23

- Fashafsheh, I. H., Eqtaït, F. A., Hammad, B. M., Ayed, A. J., & Salameh, B. S. (2025). The impact of emotional intelligence on work performance among ICU nurses in Palestine: a cross-sectional study. *BMC nursing*, 24(1), 413.
- Fattah, H. A. A., Sallam, G. K., Hendy, A. S., Abozeid, A., & Rodenhurst, N. (2023). The beneficial effects of emotional intelligence training for critical care nurses on job burnout: a quasi-experimental study. *Iranian Journal of Nursing and Midwifery Research*, 28(3), 300-304.
- Galanis, P., Katsiroumpa, A., Moisoglou, I., Derizioti, K., Gallos, P., Kalogeropoulou, M., & Papanikolaou, V. (2024). Emotional Intelligence as Critical Competence in Nurses' Work Performance: A Cross-Sectional Study. In *Healthcare*, Vol. 12, No. 19, p. 1936, MDPI.
- Ghani, B., Zada, M., Memon, K. R., Ullah, R., Khattak, A., Han & Araya-Castillo, L. (2022). Challenges and strategies for employee retention in the hospitality industry: A review. *Sustainability*, 14(5), 2885.
- Ghani, Bilqees, et al. (2022). "Challenges and Strategies for Employee Retention in the Hospitality Industry: A Review." *Sustainability* (Switzerland), vol. 14, no. 5, MDPI, 1 Mar. 2022,
- Harms, P. D., & Credé, M. (2010). Emotional intelligence and transformational and transactional leadership: A meta-analysis. *Journal of Leadership & Organizational Studies*, 17(1), 5-17.
- Hesford., & James W. (2016). Turnover and Unit-Level Financial Performance: An Analysis of the Costs and Benefits of Voluntary and Involuntary Turnover in Unskilled Jobs. *Advances in Management Accounting*, vol. 26, 2016, pp. 35–65,
- Hong, E., & Lee, Y. S. (2016). The mediating effect of emotional intelligence between emotional labour, job stress, burnout and nurses' turnover intention. *International Journal of Nursing Practice*, 22(6), 625-632.
- Houghton, J. D., Wu, J., Godwin, J. L., Neck, C. P., & Manz, C. (2012). Effective stress management: A model of emotional intelligence, self-leadership, and student stress coping. *Journal of Management Education*, 36(2), 220-238.
- Hutchinson, M., & Hurley, J. (2013). Exploring leadership capability and emotional intelligence as moderators of workplace bullying. *Journal of Nursing Management*, 21(3), 553-562.
- Johnson, S. J., Batey, M., & Holdsworth, L. (2009). Personality and health: The mediating role of trait emotional intelligence and work locus of control. *Personality and Individual Differences*, 47(5), 470-475.
- Jordan, Peter J., and Troth, A. (2010). "Emotional Intelligence and Leader Member Exchange: The Relationship with Employee Turnover Intentions and Job Satisfaction." *Leadership and Organization Development Journal*, vol. 32, no. 3, pp. 260–80.
- Judeh, M. (2013). *Emotional intelligence and retention: The moderating role of job involvement*. In International Conference on Economics, Business and Marketing Management. World Academy of Science, Engineering and Technology. Publications.
- Krejcie, R. V., & Morgan, D. W. (1970). Determining sample size for research activities. *Educational and Psychological Measurement*, 30, 607-610.
- Lahkar Das, Bidisha, and Mukulesh Baruah (2013). Employee Retention: A Review of Literature. no. 2.
- Larguinho, M., Leal, S., & Lopes, R. (2025). The impact of emotional intelligence on the psychological well-being of young graduates in Portugal. *Psychology International*, 7(2), 29. <https://doi.org/10.3390/psycholint7020029>
- Latino, R.J. (2008), *Patient Safety: The PROACT Root Cause Analysis Approach*, FL, Taylor and Francis- CRCPress.

- Lee, H. F., Chiang, H. Y., & Kuo, H. T. (2019). Relationship between authentic leadership and nurses' intent to leave: The mediating role of the work environment and burnout. *Journal of Nursing Management*, 27(1), 52–65
- Li, X., Chang, H., Zhang, Q., Yang, J., Liu, R., & Song, Y. (2021). Relationship between emotional intelligence and job well-being in Chinese clinical nurses: multiple mediating effects of empathy and communication satisfaction. *BMC nursing*, 20, 1-10.
- Maniscalco, L. (2024). "Intention to Leave, Depersonalisation and Job Satisfaction in Physicians and Nurses: A Cross-Sectional Study in Europe." *Scientific Reports*, vol. 14, no. 1.
- Markiewicz, K. (2019). Burnout as a mediator of the interrelations between emotional intelligence and stress coping strategies in nurses. *Acta Neuropsychologica*, 17, 233-244.
- Mayer, J. D. (2000). Test manual for the Mayer, Salovey, Caruso emotional intelligence test: Research version 1.1. Toronto, CA: MHS.
- Mayer, J. D., Roberts, R. D., & Barsade, S. G. (2008). Human abilities: Emotional intelligence. *Annu. Rev. Psychol.*, 59(1), 507-536.
- Mayer, J. D., Salovey, P., & Caruso, D. R. (2002). *Mayer– Salovey–Caruso emotional intelligence test (MSCEIT) item booklet*. Toronto, Ontario, Canada: MHS Publishers.
- Mayer, J. D., Salovey, P., & Caruso, D. R. (2012). The validity of the MSCEIT: Additional analyses and evidence. *Emotion Review*, 4, 403–408.
- Nespereira-Campuzano, T., & Vázquez-Campo, M. (2017). Inteligencia emocional y manejo del estrés en profesionales de Enfermería del Servicio de Urgencias hospitalarias. *Enfermería Clínica*, 27(3), 172-178.
- Pekaar, Keri A. (2018). Self- and Other-Focused Emotional Intelligence: Development and Validation of the Rotterdam Emotional Intelligence Scale (REIS)." *Personality and Individual Differences*, vol. 120, pp. 222–33,
- Dominique, P. (2014). "Internalizing Emotions: Self-Determination as an Antecedent of Emotional Intelligence." *Personality and Individual Differences*, vol. 64, pp. 1–6,
- Phillips, J., Palokas, M., Christian, R., Harris, J., & Hinton, E. (2021). Emotional intelligence in nurse managers as it relates to staff nurse job satisfaction and retention: a scoping review. *JBI evidence synthesis*, 19(12), 3238-3267.
- Piccerillo, L., & Digennaro, S. (2025). Adolescent social media use and emotional intelligence: A systematic review. *Adolescent Research Review*, 10(2), 201–218. <https://doi.org/10.1007/s40894-024-00245-z>
- Schlaerth, A., Ensari, N., & Christian, J. (2013). A meta-analytical review of the relationship between emotional intelligence and leaders' constructive conflict management. *Group Processes & Intergroup Relations*, 16(1), 126-136.
- Schutte, N. S., & Malouff, J. M. (2011). Emotional intelligence mediates the relationship between mindfulness and subjective well-being. *Personality and Individual Differences*, 50(7), 1116-1119.
- Schutte, N. S., & Malouff, J. M. (2013). *Adaptive emotional functioning: A comprehensive model of emotional intelligence*. Handbook of psychology of emotions: Recent theoretical perspectives and novel empirical findings, 469-488.
- Sen, K., and Bhattacharya, A. (2019), "Attracting and managing talent, how are the top three hotel companies in India doing it?", *Worldwide Hospitality and Tourism Themes*, Vol. 11 No. 4, pp. 404-417, doi: 10.1108/WHATT-04-2019-0021

- Smith, K. B., Profetto-McGrath, J., & Cummings, G. G. (2009). Emotional intelligence and nursing: An integrative literature review. *International Journal of Nursing Studies*, 46(12), 1624-1636.
- Sung, Y. H., Hwang, M. S., Kim, K. S., & Chun, N. M. (2010). Influence of clinical nurse specialists' emotional intelligence on their organizational commitment and turnover intention. *Journal of Korean Academy of Nursing Administration*, 16(3), 259-266.
- Szczygiel, D. D., & Mikolajczak, M. (2018). Emotional intelligence buffers the effects of negative emotions on job burnout in nursing. *Frontiers in psychology*, 9, 2649.
- Thanacoody, P. R., Newman, A., & Fuchs, S. (2014). Affective commitment and turnover intentions among healthcare professionals: The role of emotional exhaustion and disengagement. *The International Journal of Human Resource Management*, 25(13), 1841–1857. <https://doi.org/10.1080/09585192.2013.860389>
- Troth, A. C., Jordan, P. J., & Westerlaken, K. M. (2014). *Conflict, emotional intelligence and emotional regulation at work*. In Handbook of conflict management research (pp. 254-269). Edward Elgar Publishing.
- Ugoani & John N. (2015). "Dimensions of Emotional Intelligence and Transformational Leadership: A Correlation Analysis." *Independent Journal of Management & Production*, vol. 6, no. 2.
- Willard-Grace, R., Knox, M., Huang, B., Hammer, H., Kivlahan, C., & Grumbach, K. (2019). Burnout and health care workforce turnover. *The Annals of Family Medicine*, 17(1), 36-41.
- Wu, F., Lao, Y., Feng, Y., Zhu, J., Zhang, Y., & Li, L. (2024). Worldwide prevalence and associated factors of nursing staff turnover: A systematic review and meta-analysis. *Nursing Open*, 11(1), e2097.
- Zhang, Y., Fu, Y., Zheng, X., Shi, X., Liu, J., & Chen, C. (2025). The impact of nursing work environment, emotional intelligence, and empathy fatigue on nurses' presenteeism: a structural equation model. *BMC nursing*, 24(1), 291.
- Zhang, Y., Guo, Y., Zhang, M., Xu, S., Liu, X., & Newman, A. (2022). Antecedents and outcomes of authentic leadership across culture: A meta-analytic review. *Asia Pacific Journal of Management*, 39(4), 1399-1435.