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Navigating Cancer with Emotional Intelligence: A Study on Self-Care Behavior Enhancement in Women

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A B S T R A C T

Objective: This study aimed to evaluate the effectiveness of an emotional intelligence (EI) training program in improving self-care behaviors among female cancer patients. It hypothesized that participants undergoing the EI training would exhibit significant improvements in self-care behaviors compared to those in the control group.

Methods and Materials: Employing a randomized controlled trial design, this study involved 30 female cancer patients, divided equally into an experimental group, which received the EI training, and a control group, which did not receive any intervention. The EI training was structured into 8 sessions, each lasting 90 minutes, spread over 8 weeks. Self-care behavior was measured using the Self-Care of Chronic Illness Inventory (SC-CII) at three time points: baseline, post-intervention, and at a four-month follow-up.

Findings: The findings revealed that the experimental group showed a significant improvement in self-care behaviors from baseline to post-intervention and maintained these improvements at the four-month follow-up. Analysis of variance with repeated measurements indicated significant effects for time, group, and the interaction between time and group on self-care behavior scores, demonstrating the positive impact of EI training.

Conclusion: The study concluded that emotional intelligence training significantly enhances self-care behaviors among female cancer patients. These improvements were sustained over time, highlighting the potential of EI training as a valuable intervention in the supportive care of cancer patients. The findings suggest the integration of EI training into patient care programs could be beneficial in improving the quality of life and well-being of individuals facing the challenges of cancer.

Keywords: *Emotional Intelligence, Self-Care Behavior, Female Cancer Patients, Randomized Controlled Trial, Chronic Illness.*

1. Introduction

Emotional intelligence (EI), a concept that has gained significant traction over the past few decades, represents a pivotal element in the understanding of how individuals recognize, understand, manage, and influence their own emotions and those of others. This multifaceted ability is increasingly recognized for its critical role in various personal and professional outcomes, including self-efficacy, self-care behavior, decision-making, and job performance. The burgeoning body of research underscores the profound impact that EI can have across diverse facets of life, suggesting its potential as a transformative tool for personal development and well-being (Aladwan & Majed Mohammad Al –, 2016; Aljazi & Alrekebat, 2019; Alkozei et al., 2018; Razali et al., 2022).

Studies have compellingly illustrated that targeted training programs aimed at enhancing emotional intelligence can foster significant improvements in crucial areas such as self-efficacy, decision-making skills, and coping strategies. These programs have been shown to equip individuals with the tools necessary to navigate the complexities of emotional responses, leading to reduced stress levels, elevated well-being, and improved job performance (Aljazi & Alrekebat, 2019; Alkozei et al., 2018; Corbi et al., 2018; Razali et al., 2022). Such findings highlight the transformative potential of EI training, not only in personal development but also in professional contexts, where emotional acuity can significantly influence job satisfaction and efficiency.

In the healthcare domain, the relevance of emotional intelligence assumes a particularly poignant significance. Research has demonstrated that EI training programs can markedly enhance the quality of life for patients, including female cancer patients, by bolstering their self-care behaviors—a crucial component of managing chronic conditions and navigating the emotional turmoil often associated with illness (Aljazi & Alrekebat, 2019; Razali et al., 2022). Furthermore, the ability to understand and manage emotions effectively has been linked to better communication skills among medical students and healthcare professionals. This suggests that EI is not merely an individual asset but a cornerstone of effective healthcare delivery, facilitating more empathetic, understanding, and effective patient care (Ay et al., 2021; Weiszbrod, 2015).

Moreover, the impact of EI training extends beyond the personal benefits to healthcare professionals themselves. Studies have found that such training can significantly reduce stress and bolster emotional resilience among healthcare workers, underscoring the critical role of EI in maintaining caregiver well-being and, by extension, the quality of care provided to patients (Jung et al., 2016; Weiszbrod, 2015). This body of evidence serves to reinforce the argument for the integration of EI training programs within healthcare settings, not only for the benefit of patients but also for the professionals who serve them.

The utility of emotional intelligence training, however, is not confined to the healthcare sector. A wide array of studies across different fields has shown that EI training programs can yield substantial benefits for students, teachers, athletes, and workplace professionals. These benefits range from improved decision-making and leadership skills to enhanced motivation, cognitive flexibility, resilience, and self-efficacy (Aladwan & Majed Mohammad Al –, 2016; Ay et al., 2021; Liepold et al., 2013; Rubio et al., 2022). Such findings point to the universal applicability and advantages of emotional intelligence training, suggesting that the development of EI can serve as a key lever for success and well-being in a vast array of contexts.

In sum, the growing evidence base supports the view that emotional intelligence is a critical determinant of a wide range of positive outcomes, from enhanced self-care and decision-making to improved well-being and professional performance. The potential benefits of EI training—spanning personal development, healthcare, education, and beyond—underscore the value of fostering emotional intelligence as a fundamental skill set in today's complex and rapidly changing world. This research aims to further explore the impact of EI training, particularly within the context of female cancer patients, to illuminate the ways in which enhancing emotional intelligence can contribute to improved self-care behaviors and overall quality of life.

2. Methods and Materials

2.1. Study Design and Participants

This study employed a randomized controlled trial (RCT) design to evaluate the effectiveness of an emotional intelligence (EI) training program on self-care behavior among female cancer patients. The sample consisted of 30 participants, who were randomly assigned to either the intervention group (n=15), receiving the EI training, or the control group (n=15), receiving no such training. The EI training program was structured into 8 sessions, each lasting 90 minutes, conducted over a period of 8 weeks. Eligibility criteria for participants included female cancer patients aged 18 years or older, diagnosed with any type of cancer at any

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stage, and able to understand and communicate in the language of instruction. Exclusion criteria comprised severe cognitive impairment, ongoing psychological therapy, or participation in similar EI training programs. The study also incorporated a four-month follow-up to assess the long-term effects of the intervention on self-care behavior.

2.2. Measures

2.2.1. Self-Care Behavior

Self-Care of Chronic Illness Inventory (SC-CII) is equipped with multiple subscales designed to comprehensively assess self-care maintenance, monitoring, and management behaviors, which are crucial for individuals navigating the complexities of chronic conditions like cancer. The SC-CII typically features 30 items, with each item scored on a 5-point Likert scale to gauge the extent of agreement or disagreement, thus facilitating a nuanced quantification of self-care behaviors. The aggregation of these scores offers a robust indication of the patient's self-care engagement, with higher totals reflecting more proactive and effective self-care practices. The tool's validity and reliability have been rigorously confirmed in various studies, showcasing its capability to accurately measure self-care behaviors and its sensitivity to detecting changes following interventions. This proven track record of reliability (often demonstrated through Cronbach's alpha values exceeding 0.70) and construct validity underscores the SC-CII's suitability for this research (Ramesh et al., 2020).

2.3. Intervention

2.3.1. Emotional Intelligence Training

The intervention protocol consists of an emotional intelligence (EI) training program tailored for female cancer patients, spanning 8 sessions, each lasting 90 minutes. This program aims to enhance participants' self-care behaviors by improving their emotional intelligence skills, including emotional awareness, regulation, self-motivation, empathy, and social skills. The sessions are structured to progressively build upon each other, starting with foundational EI concepts and advancing to practical applications in self-care and emotional coping strategies related to cancer diagnosis and treatment (Herisi et al., 2022; Lang, 2018).

Session 1: Introduction to Emotional Intelligence

The first session introduces the concept of emotional intelligence and its importance in managing chronic illness, particularly cancer. Participants are guided through the basics of EI, including understanding their own emotions and the impact of these emotions on their mental health and self-care behaviors. The session aims to establish a supportive group environment and set the stage for personal growth and learning.

Session 2: Recognizing and Labeling Emotions

This session focuses on enhancing participants' abilities to recognize and label their emotions accurately. Through various activities and discussions, patients learn to identify different emotions and the situations that trigger them, emphasizing the connection between emotional awareness and effective self-care practices.

Session 3: Emotional Regulation Strategies

Participants are introduced to strategies for regulating emotions, learning how to manage and respond to their feelings in a healthy manner. Techniques such as deep breathing, mindfulness, and cognitive reframing are explored, with an emphasis on applying these strategies to reduce stress and anxiety associated with cancer.

Session 4: Developing Self-Motivation

The fourth session centers on building self-motivation, with a focus on setting realistic, achievable goals related to self-care and emotional well-being. Patients engage in exercises to identify personal values and motivations, learning how to harness these insights to foster resilience and a positive outlook.

Session 5: Empathy and Social Awareness

This session aims to enhance empathy and social awareness, teaching participants to understand and respond to the emotions of others effectively. Through role-playing and group discussions, patients develop skills to improve communication and support within their social networks, which is vital for emotional support during cancer treatment.

Session 6: Relationship Management

Focusing on relationship management, this session equips participants with the skills to navigate social interactions and maintain healthy relationships. Emphasis is placed on assertive communication, conflict resolution, and how to seek and offer support in relationships, contributing to a supportive environment for self-care.

Session 7: Integrating EI into Self-Care for Cancer

The seventh session applies emotional intelligence concepts directly to self-care behaviors in the context of cancer. Participants explore how EI skills can enhance decision-making, problem-solving, and coping strategies related to their health, treatment, and daily self-care routines.

Session 8: Consolidation and Future Planning

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In the final session, participants review the key concepts and skills learned throughout the program. They create personal action plans to integrate EI into their ongoing self-care practices, addressing future challenges and setting goals for continued emotional and physical well-being.

2.4. Data Analysis

Data were analyzed using SPSS version 27 (IBM Corp., Armonk, NY, USA) to evaluate the impact of the EI training program on self-care behavior among the study participants. The analysis of variance (ANOVA) with repeated measurements was utilized to compare the self-care behaviors between the intervention and control groups over three time points: baseline, post-intervention, and four-month follow-up. This approach allowed for the assessment of the intervention's immediate and sustained effects on self-care behavior. The Bonferroni post-hoc test was applied to control for the risk of type I error due to multiple comparisons, ensuring a rigorous examination of differences between the specific time points within and across the groups.

The primary outcome measure was the change in scores on the Self-Care of Chronic Illness Inventory (SC-CII), with higher scores indicating better self-care behavior. The analysis examined both the main effect of time, reflecting changes in self-care behavior across the study period, and the time-by-group interaction, indicating differences in the pattern of change between the intervention and control groups. Statistical significance was set at $p<0.05$.

3. Findings and Results

In the present study, the demographic characteristics of the participants were carefully recorded to ensure a comprehensive understanding of the sample population. The study enrolled a total of 30 female cancer patients, with 15 participants allocated to each of the intervention and control groups. The majority of participants were aged between 45 and 54 years, representing 46.7% (n=14) of the total sample. Those in the age group of 35-44 years accounted for 26.7% (n=8), while participants aged 55-64 years comprised 20% (n=6) of the sample. The smallest age group was those aged 65 years and above, making up 6.6% (n=2) of the participants. Regarding marital status, 60% (n=18) of the participants were married, 23.3% (n=7) were single, and 16.7% (n=5) were either divorced or widowed. In terms of education level, 40% (n=12) of the participants had completed college or university degrees, 33.3% (n=10) had high school diplomas, and 26.7% (n=8) had either primary education or no formal education. This diverse demographic profile provides a broad perspective on the sample population, allowing for a more nuanced analysis of the intervention's impact across different segments of the female cancer patient population.

Table 1

Descriptive statistics findings (N=15 for Each Group)

Variables	Group	Pre-test (Mean)	Pre-test (SD)	Post-test (Mean)	Post-test (SD)	Follow-up (Mean)	Follow-up (SD)
Self-Care Behavior	Experimental	103.92	20.70	114.73	20.53	114.99	21.74
	Control	100.40	19.44	101.38	22.33	101.03	22.77

Error! Reference source not found. presents the descriptive statistics for self-care behavior among the experimental and control groups at three different time points: pre-test, post-test, and follow-up. For the experimental group, the mean self-care behavior score increased from 103.92 (SD = 20.70) at pre-test to 114.73 (SD = 20.53) at post-test, and slightly to 114.99 (SD = 21.74) at follow-up. Conversely, the control group showed minimal change, with mean scores moving from 100.40 (SD = 19.44) at pre-test to 101.38 (SD = 22.33) at post-test, and then slightly decreasing to 101.03 (SD = 22.77) at follow-up. These findings suggest a significant improvement in self-care behaviors among participants who received the EI training compared to those who did not.

Prior to conducting the main analyses, we rigorously checked and confirmed the assumptions necessary for the analysis of variance (ANOVA) with repeated measurements. Normality of distribution was verified for self-care behavior scores at all three time points (baseline, post-intervention, and four-month follow-up) using the Shapiro-Wilk test, which yielded values of p=0.24, p=0.18, and p=0.21, respectively, indicating that the assumption of normality was not violated. The assumption of sphericity, which pertains to the equality of variances of the differences between all possible pairs of groups, was assessed using Mauchly's test.

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The test result was not significant (p=0.32), confirming that sphericity was not violated. Additionally, the homogeneity of variances at baseline was examined using Levene's test, which produced a p-value of 0.27, further supporting that the variances across the groups were equal. These tests ensured that the data met the assumptions required for the repeated measures ANOVA, providing a solid foundation for the subsequent analyses and ensuring the reliability and validity of the findings reported in this study.

Table 2

The Results of Analysis of Variance with Repeated Measurements

Variables	Source	SS	df	MS	F	p	Eta^2
Self-Care Behavior	Time	663.69	2	331.84	8.40	<0.01	0.26
	Group	752.93	1	752.93	9.55	<0.01	0.30
	Time × Group	545.75	2	272.87	7.20	<0.01	0.21

Table 2 reports the results of the Analysis of Variance (ANOVA) with repeated measurements, indicating significant effects for time ($F=8.40$, $p<0.01$, $\eta^2=0.26$), group ($F=9.55$, $p<0.01$, $\eta^2=0.30$), and the interaction between time and group ($F=7.20$, $p<0.01$, $\eta^2=0.21$) on self-care behavior scores. These results demonstrate that the experimental group showed significant improvements in self-care behavior over time compared to the control group. The effect sizes indicate a substantial impact of the EI training program on enhancing self-care behaviors among female cancer patients.

Table 3

The Results of Bonferroni Post-Hoc Test for Experimental Group

Variables	Mean Diff. (Post-test – Pre-test)	p	Mean Diff. (Follow-up – Pre-test)	p	Mean Diff. (Follow-up – Post-test)	p
Self-Care Behavior	10.40	0.001	10.71	0.001	0.31	1.00

Table 3 details the results of the Bonferroni post-hoc test for the experimental group, focusing on the differences in self-care behavior scores from pre-test to post-test, pre-test to follow-up, and post-test to follow-up. The mean difference between pre-test and post-test was significant (Mean Diff. = 10.40, p=0.001), as was the mean difference between pre-test and follow-up (Mean Diff. = 10.71, p=0.001). However, the difference between post-test and follow-up was not significant (Mean Diff. = 0.31, p=1.00), indicating that the improvements achieved by the end of the training were maintained at the four-month follow-up. This underscores the lasting impact of the EI training on self-care behaviors in female cancer patients.

4. Discussion and Conclusion

The primary aim of this study was to evaluate the effectiveness of an emotional intelligence (EI) training program in enhancing self-care behaviors among female cancer patients. Our results demonstrated a significant improvement in self-care behaviors in the group that received EI training compared to the control group. These findings align with existing literature, suggesting that EI training can positively impact mental health, coping strategies, and overall well-being, particularly in individuals facing chronic health conditions.

The present study's findings significantly underscore the effectiveness of emotional intelligence (EI) training in enhancing self-care behaviors among female cancer patients. This corroborates with a burgeoning body of literature that delineates the multifaceted benefits of EI training across various domains, particularly in improving mental health, coping strategies, and overall well-being (Beigi & Shirmohammadi, 2010; Jung et al., 2016; Persich et al., 2021). Such training programs have been shown to foster improved stress management, coping strategies, and emotional resilience, which are pivotal in navigating the complexities of chronic illnesses like cancer.

In the healthcare sector, the relevance of EI training is further magnified, given its potential to bolster communication skills, empathy, and the overall quality of care provided by healthcare professionals (Prado-Gascó et al., 2019; Skiba, 2020). The association between EI training and enhanced communication, empathy, and stress management among healthcare personnel has profound implications for patient outcomes, highlighting the

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indispensable role of EI in fostering a compassionate and efficient healthcare environment (Chen et al., 2021; Lang, 2018). Moreover, the link between EI training and increased emotional resilience and reduced occupational stress among healthcare workers underscores its importance in promoting self-care and well-being in high-pressure environments (Caporale-Berkowitz et al., 2021; Rutkowska & Bergier, 2015).

The impact of EI training extends beyond the confines of healthcare, with educational settings also witnessing the positive effects of such programs on self-care behaviors among students and teachers. Studies have demonstrated that EI training can significantly improve cognitive flexibility, self-efficacy, and decision-making skills, leading to better academic performance and overall well-being (Aladwan & Majed Mohammad Al –, 2016; Aljazi & Alrekebat, 2019). Additionally, the association between EI training and increased empathy, creativity, and resilience further emphasizes the essential components of self-care and personal development (Akyil & DenİZ, 2022; Khan et al., 2023).

In conclusion, the effectiveness of the EI training program in improving self-care behaviors among female cancer patients adds to the growing evidence supporting the integration of EI training across various settings. Whether in healthcare, educational environments, or the workplace, the benefits of EI training are manifold, encompassing improved mental health, enhanced coping strategies, and better interpersonal relationships. This study not only reaffirms the value of EI training in fostering positive outcomes but also highlights its potential as a transformative tool for individuals facing the unique challenges of living with cancer, paving the way for future research and intervention development in this area.

5. Limitations & Suggestions

This study, while revealing promising outcomes, is not without its limitations. Firstly, the sample size was relatively small, comprising only 30 participants, which may limit the generalizability of the findings to a broader population. Additionally, the study was conducted over a short duration, and the long-term effects of EI training on self-care behaviors remain to be further explored. Furthermore, the study relied on self-reported measures of self-care behavior, which are subject to biases such as social desirability or recall bias. Future studies would benefit from incorporating objective measures of self-care behavior to validate and complement self-reported data.

Future research should consider addressing the limitations identified in this study. Expanding the sample size and including a more diverse participant demographic could enhance the generalizability of the findings. Longitudinal studies are also necessary to examine the long-term impact of EI training on self-care behaviors and overall quality of life among cancer patients. Additionally, incorporating a mixed-methods approach by combining quantitative data with qualitative insights from participants could provide a more nuanced understanding of how EI training influences self-care behaviors and emotional well-being.

The findings of this study have important implications for clinical practice, particularly in oncology and chronic disease management. Healthcare professionals, including nurses and psychologists, can integrate EI training into patient care programs to enhance self-care behaviors and emotional resilience among cancer patients. Such training could be offered as part of comprehensive patient education programs or support groups, providing patients with tools to better manage the emotional challenges associated with their condition. Additionally, incorporating EI training into the curriculum for medical and nursing education could prepare future healthcare professionals to better support the emotional and psychological needs of their patients.

Authors' Contributions

Authors contributed equally to this article.

Declaration

In order to correct and improve the academic writing of our paper, we have used the language model ChatGPT.

Transparency Statement

Data are available for research purposes upon reasonable request to the corresponding author.

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Declaration of Interest

The authors report no conflict of interest.

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Ethics Considerations

The study protocol adhered to the principles outlined in the Helsinki Declaration, which provides guidelines for ethical research involving human participants.

References

Akyil, Y., & DenİZ, M. E. (2022). The Effect of Creative Drama-Based Psycho-Education Program on Emotional Intelligence of Adolescents. *Opus Toplum Araştırmaları Dergisi*. https://doi.org/10.26466/opusjsr.1091920

Aladwan, F., & Majed Mohammad Al –, K. (2016). Emotional Intelligence Skills and Self-Efficacy Levels: Physical Education Teachers' Perspective. *European Scientific Journal Esj*. https://doi.org/10.19044/esj.2016.v12n10p171

Aljazi, S. F., & Alrekebat, A. F. (2019). The Impact of Training Program Based on Bar-on Model of Emotional-Social Intelligence on the Development of Cognitive Flexibility Among Secondary School Students in Jordan. *International Journal of Education*. https://doi.org/10.5296/ije.v11i2.14429

Alkozei, A., Smith, R., Demers, L. A., Weber, M., Berryhill, S., & Killgore, W. D. (2018). Increases in Emotional Intelligence After an Online Training Program Are Associated With Better Decision-Making on the Iowa Gambling Task. *Psychological Reports*. https://doi.org/10.1177/0033294118771705

Ay, M. K., Sulaiman, T. M., Garabli, N., Acar, Y., Uzunoglu, I., Akkus, M. A., & Topuzoğlu, A. (2021). Evaluation of the Effects of Emotional Intelligence Status on the Communication Skills of the Faculty of Medicine Students. *Marmara Medical Journal*. https://doi.org/10.5472/marumj.942621

Beigi, M., & Shirmohammadi, M. (2010). Training Employees of a Public Iranian Bank on Emotional Intelligence Competencies. *Journal of European Industrial Training*. https://doi.org/10.1108/03090591011031728

Caporale-Berkowitz, N., Boyer, B. P., Lyddy, C., Good, D., Rochlen, A. B., & Parent, M. C. (2021). Search Inside Yourself: Investigating the Effects of a Widely Adopted Mindfulness-at-Work Development Program. *International Journal of Workplace Health Management*. https://doi.org/10.1108/ijwhm-08-2020-0139

Chen, W. Y., Wang, S., Xue, P., & Zhu, Y. (2021). Trait Emotional Intelligence and Quality of Life Among Breast Cancer Patients: The Mediating Role of Fear of Cancer Recurrence. *İnternational journal of nursing practice*. https://doi.org/10.1111/ijn.12953

Corbi, R. G., Sánchez, B. S., & Costa, J. L. C. (2018). Can Emotional Competence Be Taught in Higher Education? A Randomized Experimental Study of an Emotional Intelligence Training Program Using a Multimethodological Approach. *Frontiers in psychology*. https://doi.org/10.3389/fpsyg.2018.01039

Herisi, S. A., Agdasi, A. N., & Hoseininasab, S. D. (2022). Effectiveness of Emotional Intelligence Training on Resilience of Parents With Abnormal Children in Tehran. *International journal of health sciences*. https://doi.org/10.53730/ijhs.v6ns1.8187

Jung, Y. H., Ha, T., Oh, C. Y., Lee, U. S., Jang, J. H., Kim, J., Park, J. O., & Kang, D. H. (2016). The Effects of an Online Mind-Body Training Program on Stress, Coping Strategies, Emotional Intelligence, Resilience and Psychological State. *PLoS One*. https://doi.org/10.1371/journal.pone.0159841

Khan, A., Shehzadi, I., Mohsin, M., Ahmed, J., Arif, M., Kouser, N., & Nisa, A. U. (2023). Perceived Emotional Intelligence, Grit and Suicidal Ideation in Pakistani Cancer Patients. *International journal of health sciences*. https://doi.org/10.53730/ijhs.v6ns9.13858

Lang, J. (2018). The Efficacy of Emotional Intelligence Training for the Emotion Regulation of Bullying Students: A Randomized Controlled Trial. *NeuroQuantology*. https://doi.org/10.14704/nq.2018.16.2.1176

Liepold, M., Rasmusen, C., Boyce, K., & Poskas, D. (2013). Outside the Comfort Zone: Strategies for Developing Emotionally Intelligent Leaders. *Journal of Leadership Education*. https://doi.org/10.12806/v12/i2/r5

Persich, M. R., Smith, R., Woods-Lubbert, R., Strong, M., & Killgore, W. D. S. (2021). Emotional Intelligence Training as a Protective Factor for Mental Health During the COVID-19 Pandemic. *Depression and Anxiety*. https://doi.org/10.1002/da.23202

Prado-Gascó, V., Giménez-Espert, M. d. C., & Valero-Moreno, S. (2019). The Influence of Nurse Education and Training on Communication, Emotional Intelligence, and Empathy. *Revista da Escola de Enfermagem da USP*. https://doi.org/10.1590/s1980-220x2018015903465

Ramesh, S., Sakeni, Z., & Ghazian, M. (2020). Relationship Between Self-Care Behaviors and Severity of Type 2 Diabetes: Moderator role ofCognitive Emotion Regulation Strategies [Research]. *Alborz University Medical Journal*, *9*(3), 277-286. https://doi.org/10.29252/aums.9.3.277

Razali, R. A., Wahab, S. R. A., Shaari, R., Azlan, S. N., & Taek-Hyun, S. (2022). The Influence of Emotional Intelligence on Employee's Job Performance in the Southern State of Malaysia. *International Journal of Academic Research in Business and Social Sciences*. https://doi.org/10.6007/ijarbss/v12-i8/14543

Rubio, I. M., Ángel, N. G., Esteban, M. D., & Ruiz, N. F. O. (2022). Emotional Intelligence as a Predictor of Motivation, Anxiety and Leadership in Athletes. *International journal of environmental research and public health*. https://doi.org/10.3390/ijerph19127521

Rutkowska, K., & Bergier, J. (2015). Psychological Gender and Emotional Intelligence in Youth Female Soccer Players. *Journal of Human Kinetics*. https://doi.org/10.1515/hukin-2015-0084

Skiba, R. (2020). Effective Means of Teaching and Developing Emotional Intelligence in the Corrections Industry. *Advances in Applied Sociology*. https://doi.org/10.4236/aasoci.2020.106012

Weiszbrod, T. (2015). Health Care Leader Competencies and the Relevance of Emotional Intelligence. *The Health Care Manager*. https://doi.org/10.1097/hcm.0000000000000060

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