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Association between the Level of Emotional Intelligence and Nurses' Caring Behavior Based on Patients'/Families' Perceptions at RSUD Toto Kabila, Bone Bolango Regency.

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Abstract

Caring behavior is the core of nursing services that enhance human dignity and support recovery, particularly among critically ill patients in intensive care units that depend heavily on nurses. Emotional intelligence is one internal factor influencing caring behavior, referring to the nurses' ability to recognize and manage their own emotions, motivate themselves, understand others' emotions, and build social relationships. This research aims to analyze the association between emotional intelligence and nurses' caring behavior, as perceived by patients and families, in the ICU/ICCU of RSUD (Regional General Hospital) Toto Kabila, Bone Bolango Regency. This research employs a quantitative approach with a cross-sectional design, involving 38 respondents selected through consecutive sampling, and uses instruments that have been tested for validity and reliability, including questionnaires on emotional intelligence and nurses' caring behavior. The results indicate that most nurses demonstrate a high level of emotional intelligence (37 respondents, 97.4%) and that nurses' caring behavior is predominantly rated as good (35 respondents, 92.1%). Based on the Spearman Rank test, a p-value of 0.029 (<0.05) is obtained, indicating a positive association between emotional intelligence and nurses' caring behayon with a moderate level of correlation. In conclusion, a higher level of emotional Intelligence is associated with better caring behavior.

Keywords : Emotional Intelligence; Caring Behavior; Nurses.

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INTRODUCTION

Nursing services encompass the provision of comprehensive nursing care focusing on bio-psycho-socio-spiritual aspects, where nurses provide comfort, attention, affection, empathy, support, and protection to clients so that patients feel more comfortable and connected when receiving support and attention to their individual needs (Yolanda et al., 2025). The implementation of caring behavior is essential in providing nursing care, encompassing knowledge, experience, patience, honesty, trust, humility, hope, courage, as well as respect for others and human life (Watson, 2012, in Karo et al., 2023). Nurses as the caring profession play a crucial role in improving the quality of healthcare services in hospitals (Moo et al., 2022). When nurses demonstrate sincere caring and attention, patients tend to feel more valued and satisfied with the services provided (Pakaya et al., 2022).

Globally, the quality of caring services among nurses remains low, at only 11% in Ireland and 47% in Greece (Sumsualam et al., 2021). Research at Bhayangkara Hospital Makassar showed that only 34 individuals (46.6%) demonstrated caring behavior toward patients, while 39 individuals (53.4%) exhibited a lack of caring behavior (Herman & Deli, 2021). Other studies indicate that 55.2% of caring behavior from staff nurses is perceived as poor by clients, where services are viewed merely as routine medical procedures; consequently, caring behavior is not fully experienced by clients, including a lack of friendliness (Lumbantobing et al., 2019). Based on research results in Internal Medical Ward 1 and Internal Medical Ward 2 of Toto Kabila Regional General Hospital, Bone Bolango Regency, Gorontalo Province, it was shown that 22 (62.9%) nurses were caring and 13 (37.1%) nurses were not caring, some nurses did not display a cheerful attitude toward patients, failed to provide appropriate smiles, and lacked friendliness in their services (Jumardin, 2021).

The improper implementation of caring behavior leads to various consequences. A lack of caring behavior from nurses can cause patients to feel fearful, anxious, and alienated, which prevents interpersonal relationships from being well-established and prolongs the recovery process. Consequently, the quality of nursing care declines, affecting patient satisfaction and the overall quality of healthcare services (Watson, 2005, in Santi et al., 2025).

Several aspects play a role in shaping caring behavior, including intelligence levels, educational background, and the individual character or personality of the nurse. The intelligence referred to, in addition to an individual's intellectual quotient (IQ), also encompasses emotional intelligence (EQ) components. These components influence how nurses establish interpersonal relationships with patients, allowing them to more easily understand patient feelings, empathize,

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and provide effective care (Sunaryo, 2013, in Fajrian et al., 2023).

Emotional intelligence is crucial in the application of caring behavior, as it determines a nurse's positive behavior in daily life, particularly in managing emotions appropriately and demonstrating suitable actions in various situations (Cooper, 1998, in Fajrian et al., 2023). Nurses with low levels of emotional intelligence are at a higher risk of experiencing emotional exhaustion or burnout, difficulty in making wise decisions, and barriers to establishing healthy and effective interpersonal relationships (Dou et al., 2022). Thus, nurses who lack good emotional control will face significant challenges in building caring relationships with patients.

Nurses in intensive care units such as Intensive Care Unit (ICU) and Intensive Cardiac Care Unit (ICCU) face distinct challenges compared to those in regular inpatient wards. Nursing services in the ICU and ICCU demand the provision of total care, where nurses are responsible for delivering comprehensive care that covers all the individual and intensive needs of critically ill patients (Rustini et al., 2023). In the ICU/ICCU, patients exhibit a very high level of dependency on nurses; therefore, caring behavior is essential because every development in a patient's condition can only be identified through thorough and regular monitoring and recording (Puspita & Fatimah, 2022). Furthermore, intensive care patients frequently experience anxiety characterized by worry, restlessness, and physical discomfort, a condition that requires nurses to prioritize caring behavior to ensure patients feel calm and supported throughout the recovery process (Hasan, 2022).

Preliminary observations conducted through interviews on October 31, 2025, at Toto Kabila Regional General Hospital with 6 respondents in the ICU and ICCU revealed that 4 respondents perceived the nurses' performance as sufficiently good in technical aspects, such as responding quickly to calls, monitoring patient conditions regularly, inquiring about patient complaints, and providing care and medication on time. The nurses also attempted to manage their emotions and appeared calm when facing critical situations. However, 2 respondents noted a lack of the 'smile, greet, and welcome' approach and assessed that nurses still provided insufficient comprehensive information regarding the patient's illness, primarily only communicating details related to medication prescriptions.

Based on the data and descriptions above, the researcher is interested in conducting a research titled, “Association between the Level of Emotional Intelligence and Nurses' Caring Behavior Based on Patients'/Families' Perceptions at RSUD Toto Kabila, Bone Bolango Regency”.

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LITERATURE REVIEW

Caring Concepts

1. Definition of Caring

Various nursing experts have provided definitions for the concept of caring. Watson (1979), through the *Theory of Human Caring*, states that caring is an essential form of relationship and interaction between nurses and care recipients aimed at preserving and enhancing the client's dignity as a human being, which ultimately supports the client's recovery process (in Firmansyah et al., 2019). Furthermore, caring is defined as a process encompassing the nurse's understanding of meaningful life experiences, emotional presence, treating others as one would treat oneself, providing information, facilitating life transitions, and fostering the client's trust in navigating their life (Swanson, 1991; Siswantoro & Dwipayanti, 2023).

2. Characteristics of Caring

The characteristics of caring according to Leininger (Siswantoro & Dwipayanti, 2023) consist of three (3) elements:

a. Professional Caring

It is an embodiment of mature thinking abilities. In practice, nurses respond to client needs by relying on their professional knowledge, empathetic attitudes, and mastered skills.

b. Scientific Caring

Every step or decision in providing nursing care is based on the nurse's scientific understanding, ensuring that the actions taken are purposeful and accountable.

c. Humanistic Caring

It is a form of attention and assistance born from a sense of humanity, utilizing an approach that is sensitive and profound from an emotional, intellectual, and philosophical perspective.

3. Factors Shaping Caring Behavior

The ten carative factors and how nurses demonstrate this caring behavior can be explained in the following ways (in Munandar et al., 2023):

a. Forming a humanaltruistic value system.

b. Instilling faith and hope

c. Cultivating a Sensitivity to one’s self and to others

d. Development of a helping–trusting, human caring relationship

e. Promote and acceptance of the expression of positive and negative feelings

f. Systematic use of a creative problem-solving caring process

g. Promotion of transpersonal teaching–learning

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h. Provision for a supportive, protective, and/or corrective mental, physical, societal, and spiritual environment

i. Assistance with gratification of human needs

4. Factors Influencing Caring Behavior

There are three main factors that influence caring behavior (Gibson et al., 2012, in Lestari, 2022), namely:

a. Individual Factors

This factor includes an individual's abilities, skills, background, and demographic characteristics. Furthermore, Ary Ginanjar (2001) emphasizes the importance of emotional intelligence (EQ), intellectual intelligence (IQ), and spiritual intelligence (SQ), as these three play a vital role in supporting a caring attitude (in Ramdhani et al., 2024).

b. Psychological Factors

This aspect encompasses individual attitudes, motivation, and commitment, which can be shaped by family influence, social environment, life experiences, demographic factors, and others.

c. Organizational Factors

Leadership style, the quality of human resources, reward systems, organizational structure, and the division of labor significantly influence caring behavior.

Concepts of Emotional Intelligence

1. Definition of Emotional Intelligence Level

Intelligence is defined as a mental ability that encompasses various cognitive functions, such as thinking, understanding information, learning from experience, and solving problems (Sabulat et al., 2025). Daniel Goleman (1996) explains that emotional intelligence refers to an individual's capacity to recognize, understand, and manage their own emotions as well as the emotions of others. This ability also supports cognitive processes such as decision-making, self-control, and the understanding of social interactions in the professional world. Furthermore, emotional intelligence assists individuals in achieving optimal work performance, resolving conflicts wisely, and establishing positive workplace relationships (in Mukhlisa et al., 2023).

2. Indicators of Emotional Intelligence

Emotional intelligence, according to Daniel Goleman (2015, in Lestari, 2022), is classified into five main elements, namely:

a. Self-Awareness: Self-awareness relates to self-confidence. This confidence provides the impetus for continuous development and belief in one's own abilities.

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b. Self-Management: The ability to control strong feelings and impulses is known as self-management.
c. Motivation: Motivation is an internal drive that encourages an individual to remain positive, take steps toward goals, and persevere in the face of failure.
d. Empathy**:** Empathy is the ability to feel what others feel, understand their problems, see situations from different perspectives, and respect the diversity of emotions and ways of thinking in every individual.
e. Social Skills**:** The ability to manage emotions during interactions, read social situations, and communicate effectively to collaborate and solve problems together.

3. Characteristics of Emotional Intelligence

According to Casmini (2007, in Ariska, 2021), individuals with high emotional intelligence possess the following characteristics:
a. Optimality in maintaining a calm demeanor and a positive outlook when facing life's pressures or personal issues.
b. Proficiency in managing emotions, meaning the individual is skilled in identifying and expressing their own emotions, as well as expressing them appropriately to others.
c**.** Optimality in emotional intelligence skills, which include intentionality, creativity, resilience, and interpersonal relationship skills.
d. Optimality in aspects such as caring for others, inner sensitivity, interpersonal trust, strength of character, and consistency of values.
e**.** Optimality in maintaining physical and mental balance, quality of life, social relationships, and effective performance achievement.

4. Factors Influencing Emotional Intelligence

According to Goleman (2009), several variables influence emotional intelligence, including (in Saputri et al., 2024):
a. Innate (Biological) Factors
b. External Environmental Factors
These consist of two types:
1). Family Environment
2). Environment Outside the Family

RESEARCH METHODS

This research employs a quantitative correlational analytic design with a cross-sectional

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approach to analyze the relationship between emotional intelligence and nurses' caring behavior. The research was conducted in the ICU/ICCU wards of Toto Kabila Regional General Hospital, Bone Bolango Regency, from December 3-December 28, 2025, involving 38 respondents selected through a non-probability sampling technique with a consecutive sampling method. Data were collected using an emotional intelligence questionnaire (22 items) modified from Goleman's theory and the Caring Behavior Inventory (CBI) questionnaire (38 items) to measure caring behavior. Data analysis was performed univariately to observe frequency distributions and bivariately using the Spearman Rank statistical test to examine the significance of the relationship between emotional intelligence levels and nurses' caring behavior based on patient or family perceptions.

RESULT

Univariate Analysis

Characteristic of Respondents Based on Demographic Data

Based on the research conducted, the frequency distribution of respondents by age is obtained as follows:

Table 1. Frequency Distribution Based on Age

No	Age	Quantity	Percentage (%)
1	Late Adolescence 17–25 years	8	21,1
2	Early Adulthood 26–35 years	9	23,7
3	Late Adulthood 36–45 years	10	26,3
4	Early Elderly 46–55 years	8	21,1
5	Late Elderly 56–65 years	2	5,3
6	Seniors ≥ 66 years	1	2,6
Total		38	100

Source: Primary Data, 2025

Based on table 1, it can be observed that the highest frequency of respondents as the sample in this research, based on age, is the 36-45 years age group, with 10 individuals (26.3%).

Table 2. Frequency Distribution Based on Gender

No	Gender	Quantity	Percentage (%)
1	Male	8	21,1
2	Women	30	78,9

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Total	38	100

Source: Primary Data, 2025

Based on the table above, it can be observed that the majority of respondents by gender are female, accounting for 30 individuals (78.9%).

Table 3. Frequency Distribution Based on Last Education

No	Final Education	Quantity	Percentage (%)
1	Elementary School	11	28,9
2	Junior High School	7	18,4
3	Senior High School	16	42,1
4	University	4	10,5
Total		38	100

Source: Primary Data, 2025

Based on the table above, it can be observed that the highest frequency of respondents by education level is Senior High School, accounting for 16 individuals (42.1%).

Table 4. Frequency Distribution Based on Length of Stay

No	Length of Stay	Quantity	Percentage (%)
1	2-4 days	37	97,4%
2	5-7 days	1	2,6%
Total		38	100

Source: Primary Data, 2025

Based on the table above, it can be observed that the highest frequency of respondents by length of stay is 2–4 days, accounting for 37 individuals (97.4%).

Table 5. Frequency Distribution of Nurses' Emotional Intelligence Levels Based on Patients'/Families' Perception

No	Emotional Intelligence Levels	Quantity	Percentage (%)
1	High	37	97,4%
2	Moderate	1	2,6%
Total		38	100

Source: Primary Data, 2025

Based on Table 5, it was found that 37 respondents (97.4%) stated that the nurses'

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emotional intelligence level was in the high category, while 1 respondent (2.6%) stated that the nurses' emotional intelligence level was in the moderate category.

Table 6. Frequency Distribution of Nurses' Caring Behavior Based on Patients'/Families' Perception

No	Caring Behavior	Quantity	Percentage (%)
1	Good	35	92,1
2	Moderate	3	7,9
Total		38	100

Source: Primary Data, 2025

Based on Table 6, it was found that 35 respondents (92.1%) stated that the nurses' caring behavior was in the good category, while 3 respondents (7.9%) stated that the nurses' caring behavior was in the moderate category.

Bivariate Analysis

Table 7. The Relationship Between Nurses' Emotional Intelligence Levels and Caring Behavior Based on Patients'/Families' Perception

Emotional Intelligence Levels	Caring Behavior				Total		*p-value*	*Correlation Coefficient*
	Moderate		Good		Quantity	%		
	N	%	N	%				
Moderate	0	0	1	2,6	1	2,6	0,029	0,355
High	3	7,9	34	89,5	37	97,4		
Total	3	7,9	35	92,1	38	100		

Source: Primary Data, 2025

Based on the table above, it was found that no nurses with a moderate level of emotional intelligence exhibited caring behavior in the moderate category (0%), furthermore, nurses with a moderate level of emotional intelligence with caring behavior in the good category were 1 respondent (2.6%) according to patients'/families' perception. Meanwhile, nurses with a high level of emotional intelligence had caring behavior in the moderate category as many as 3 respondents (7.9%), and a high level of emotional intelligence with caring behavior in the good category as many as 34 respondents (89.5%) according to patients'/families' perception.

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DISCUSSION

Nurses' Emotional Intelligence Levels Based on Patients'/Families' Perception at Toto Kabila Regional General Hospital

The results of the research show that out of 38 respondents, 37 respondents (97.4%) stated that the nurses' emotional intelligence level was in the high category, while 1 respondent (2.6%) stated that the nurses' emotional intelligence level was in the moderate category, and no respondents stated that the nurses' emotional intelligence level was in the low category. From these results, it can be concluded that almost all respondents perceive the nurses in the ICU/ICCU room of Toto Kabila Regional General Hospital as having a very good level of emotional intelligence in interacting and providing health services to patients and families. This research is in line with the study by Misto et al. (2022), which stated that almost all respondents (90.6%) had high emotional intelligence. That study also explained that the majority of nurses were able to use emotions wisely in providing health services to the community.

Emotional intelligence is a term that describes a dimension displaying human emotional and social abilities. This intelligence is capable of forming character within an individual so that they can recognize and manage their own emotions, motivate themselves, recognize the emotions of others, and maintain social relationships with others (Goleman, 2024). This high level of nurses' emotional intelligence is due to respondents stating in the questionnaire that, based on the first indicator of emotional intelligence, namely self-Awareness, the nurses were most frequently rated high for their ability to maintain a calm attitude. Furthermore, in the Self-Management indicator, the highest rating was for nurses showing a friendly attitude even in stressful situations. In terms of Motivation, many respondents assessed that nurses strive to complete their tasks with excellent results and respond quickly to patients/families needs without procrastination. Regarding the Empathy indicator, the highest assessment was that nurses try to understand patients/families feelings and show patience, such as using gentle language. Meanwhile, for the Social Skills indicator, many respondents assessed that nurses easily initiate communication during interactions. Based on the respondents' statements, the indicators of nurses' emotional intelligence most frequently rated high were self-management and social skills.

The self-management indicator of emotional intelligence is the nurse's ability to control emotional feelings and impulses to remain stable; this includes the ability to control negative emotions, maintain trust, be responsible in duties, adapt quickly to changing situations, and remain innovative toward new approaches (Goleman, 2024). Meanwhile, the Social Skills indicator is the ability to manage emotions when interacting, read social situations, and communicate

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effectively to collaborate and solve problems together (Goleman, 2024). This research is consistent with the research conducted by Alfian, Masriadi, and Hardi (2025) showing that the self-management indicator reached 95.8%, where nurses had high self-management in providing nursing services. Self-management refers to an individual's capacity to regulate desires or stimuli that arise (Madjid et al., 2022).

The self-management indicator obtained a high rating because patients and families directly witnessed how nurses were able to stay calm, not panic, and remain consistent in providing nursing care despite being in high-pressure situations. Based on the researcher's observations, when patients experienced anxiety and pain, nurses still approached the patient/family with a calm and patient attitude, listened to the patient's complaints, and provided appropriate interventions so that they were able to relieve pain and reduce the patient's anxiety level.

An individual's ability to manage and control feelings, such as negative emotions, sadness, or anger, plays an important role in forming good emotional intelligence. Individuals with emotional intelligence can place their emotions in the right situations, choose what can provide satisfaction, and manage their moods well (Liyanti & Rifa'i, 2025). The more a nurse is able to exercise self-management in facing emotional pressure, the more it allows the nurse to establish healthy social relationships and adapt to the work environment. The ability to regulate mood is the core of healthy social relationships; if someone can adjust to other people's moods or has empathy, that person tends to have a good level of emotional intelligence and adapts more easily to social life and their environment (Liyanti & Rifa'i, 2025). In the social skills indicator, the high rating from patients and families was influenced by the nurses' ability to build effective communication and good cooperation with fellow nurses, doctors, and patient/families during the provision of nursing care in the ICU/ICCU Room of Toto Kabila Regional General Hospital.

The research results showed that 1 respondent (2.6%) categorized the nurses' emotional intelligence level as moderate. This is because, in the motivation indicator, some nurses had not fully shown initiative in helping patients without waiting for orders, had not optimally completed tasks with good results, were not fast enough in responding to patients/families requests or needs, and had not sought better or more efficient ways in providing services/nursing care.

This is supported by research by Handayani and Irayani (2018), which found that the Motivation indicator was in the low category at 57.1%. Motivation is very important for nurses. Without it, nurse performance tends to decline. Someone who feels motivated will carry out tasks with full responsibility and pay better attention to patient safety; high work motivation can shape

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an individual's way of thinking in carrying out their responsibilities at work (Istiqamah et al., 2025). Similarly, if nurses have good motivation, they will be able to perform nursing tasks optimally and pay more attention to their own safety as well as the safety of the patients they care for. Nurses must have strong Motivation in completing tasks and responsibilities so that no work is delayed and they can complete the work well.

Based on the research results, supporting theories, and previous research, it can be concluded that the level of nurses' emotional intelligence in the ICU/ICCU Room of Toto Kabila Regional General Hospital is generally in the high category according to patient/family perception. This indicates that nurses have been able to manage emotions well in interacting, providing services, and establishing effective social relationships with patients and families. However, there is still a small portion of respondents who assessed the nurses' emotional intelligence level as being in the moderate category. This condition may be influenced by the suboptimal motivation indicator. A lack of work Motivation has the potential to affect the consistency of nurses' emotional intelligence in daily nursing practice.

Nurses' Caring Behavior Based on Patients'/Families' Perception at Toto Kabila Regional General Hospital

The results of the research show that out of 38 respondents, most assessed the nurses' caring behavior in the ICU/ICCU Room of Toto Kabila Regional General Hospital as being in the good category. This can be seen from the 35 respondents (92.1%) who gave a good assessment of the caring behavior they received during the patient's treatment period. This research is in line with the study by Sianturi (2022) regarding patients' perceptions of nurses' caring behavior, where 35 respondents stated it was in the good category (100%), which was demonstrated through the nurses' caring attitude in providing nursing care, friendliness such as smiling during procedures, as well as the support and motivation given to patients during treatment.

The implementation of this good caring behavior is because respondents stated in the questionnaire that, based on the first caring indicator, namely respectful deference to the other, the most frequently performed actions were using a soft and gentle voice when speaking with the patient/family, respecting the patients/families as fellow human beings, providing complete information regarding the patient's condition so that the patient and family could make decisions, and showing respect to the patients/families. Many respondents assessed that in the indicator of assurance of human presence, the most frequent actions performed by nurses were providing care and medication to patients on time, prioritizing patient needs, responding quickly to

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patients/families calls, and showing attention to the patient.

In the assessment of the caring indicator based on positive connectedness, many respondents assessed that nurses made the patients/familes feels physically or emotionally comfortable, helped patients improve their health, and were patient and tireless in serving the patients/families. Regarding the assessment of the caring indicator based on Professional knowledge and skill, patients most frequently gave a good rating, specifically that nurses maintained the confidentiality of patient information and used equipment appropriately when performing procedures. Meanwhile, the assessment of the caring indicator based on Attentiveness to the other's experience showed that many respondents assessed nurses as being sensitive to the patient's condition and providing good physical care. Of the five indicators, the one most frequently performed by nurses was Professional knowledge and skill.

Nurses' caring behavior that is perceived as good by patients describes the patient's experience while receiving nursing services in the hospital. The experiences felt by patients during the treatment period can play a role in improving patient well-being. However, if a nurse displays a bad impression even just once, it can affect the patient's perception of the nurse throughout the treatment process (Kartika et al., 2023).

This research is in line with the study conducted by Sitanggang and Daulay (2023) at the University of North Sumatra Hospital, which found that the highest indicator for nurses was Professional knowledge and skill with an average of 5.32 for decision-making and the improvement of interpersonal learning and teaching. In addition, similar research results were obtained by Muzaiyanah and Mayasari (2019), stating that the highest caring indicators for nurses at a hospital in Banda Aceh were Professional knowledge and skill at 86.7% and responding with respect at 86.7%.

Caring behavior reviewed from the aspect of professional knowledge and skill in the ICU/ICCU Room of Toto Kabila Regional General Hospital reflects high professionalism, which ultimately leaves a positive impression on patients and families during critical care periods. Competent knowledge and skills can positively influence the quality of nursing services provided and the satisfaction of the patients or families (Nilaprapti et al., 2024). When nurses implement these indicators, they also create positive connectedness, where nurses do not only focus on medical actions but are also able to show respect, acknowledge the patient's presence through Assurance of human presence, and show sincere attentiveness to the other's experience regarding what the patient and their family are going through.

This research also found that out of 38 respondents, there were 3 respondents (7.9%) who

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stated that the nurses' caring behavior was moderate. This is because there were still many shortcomings, especially in the indicator of Assurance of human presence, namely encouraging the patients/families to call the nurse if there is a problem and providing a gentle touch to the patient to convey caring. These were the factors that led respondents to state that the nurses' caring behavior was moderate. This research is in line with the study by Firmansyah et al. (2019), which stated that from the perspective of the humanistic and altruistic carative system, nurses' caring behavior was rated as moderate. Firmansyah in his research stated that nurses were lacking in communicating to call the nurse if there were complaints or problems (Firmansyah et al., 2019).

The indicator of assurance of human presence is included in the carative factors of the humanistic and altruistic system. Nurses who possess humanistic and altruistic values are reflected in the way they view themselves, their held beliefs, and how they interact with their culture and personal experiences (Watson, 2012 in Kartikasari et al., 2021). By encouraging the patient/family to call the nurse when there is a problem and providing a gentle touch to the patient, it means the nurse is showing concern for the patient. True caring in Watson's theory states that caring is concern, and concern is important in the healing process. Concern is seen as a moral goal in nursing practice that leads to efforts to protect, enhance, and respect human dignity and worth (Gaper, 2024).

In line with the research by Waladow et al. (2025), nurses' caring behavior is influenced by several factors such as individual factors, psychological factors, and organizational factors. Individual factors include educational background, work experience, and the personal values held by the nurse. Nurses with different educational backgrounds and experiences have varying abilities in understanding patient needs holistically. Psychological factors such as work motivation, stress levels, and the emotional condition of the nurse affect the nurse's ability to be emotionally present while providing nursing care. Nurses with high stress levels or decreased work motivation tend to focus more on completing tasks and technical actions, thus limiting empathic and personal caring interactions.

Organizational factors such as a high workload, dense shift systems, and limited caring training can hinder nurses from implementing caring behavior optimally. This impacts the patient's perception of nurses' caring behavior, which is felt to be less than maximal. Based on research (Firmansyah et al., 2019), a high workload is experienced by nurses in the ICU/ICCU room where nurses must provide complex nursing care ranging from assessment of life-threatening conditions, early detection of complication risks, management of acute critical patients requiring immediate action (life saving) as well as critical patients with chronic conditions, continuous

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hemodynamic monitoring every hour, interpretation and intervention of diagnostic tests, administration of therapy according to the treatment program, and others, so that this work intensity affects optimal caring behavior.

Based on the research by Supriatin (2025), the practice of nurses' caring behavior still faces several significant obstacles, such as the very limited number of nurses compared to the large number of clients (the nurse-to-client ratio is 1:3 or more). Nurses also do not yet understand the meaning of caring, including the definition of caring, the spirit of caring, or the actual actions or manifestations of caring behavior.

Based on the research results, supporting theories, and previous research, it can be concluded that nurses' caring behavior has generally been implemented well according to the assessment of most respondents. However, there is still a small portion of respondents who assessed the nurses' caring behavior as being in the moderate category. This condition can be influenced by several factors, including the suboptimal application of caring indicators affected by individual, psychological, and organizational factors, as well as a lack of understanding and training related to caring, which also affects the consistency of nurses' caring behavior in daily nursing practice.

Association between the Level of Emotional Intelligence and Nurses' Caring Behavior Based on Patients'/Families' Perceptions at RSUD Toto Kabila, Bone Bolango Regency

Based on the results of the statistical test using Spearman Rank, a p-value of 0.029 was obtained, which means it is less than $\alpha = 0.05$. Therefore, the result shows that there is a significant relationship between the level of emotional intelligence and the caring behavior of nurses according to patients'/families' perception at Toto Kabila Regional General Hospital. The research results show $r = 0.355$ with a positive sign, which is interpreted as the higher the emotional intelligence, the higher the nurse's caring behavior. Conversely, the lower the level of emotional intelligence, the lower the nurse's caring behavior. The strength between variables is at a moderate level.

Based on the research results, there was 1 respondent (2.6%) who assessed the nurse's emotional intelligence as moderate but the caring behavior was in the good category. This research indicates that emotional intelligence as an individual factor is not the sole determinant in the formation of nurses' caring behavior. Caring behavior is the result of the interaction of various mutually influencing factors, both internal and external to the nurse, so that nurses with moderate emotional intelligence still have the potential to display caring behavior in nursing

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practice.

From the aspect of psychological factors, caring behavior can be formed through the attitudes, motivation, and professional commitment of nurses, which develop from life experiences, social environments, family values, and previous work experience (Gibson et al., 2012, in Lestari, 2022). Thus, individuals with emotional intelligence at a moderate level can still show good caring behavior if supported by strong intrinsic motivation, an empathic attitude, and high commitment to their role and responsibility as a nurse. In addition, organizational factors also play an important role in shaping nurses' caring behavior. According to Gibson (2012), leadership style, the quality of human resources, reward systems, organizational structure, and division of labor can influence the work behavior of nurses, including caring behavior (in Lestari, 2022). Furthermore, other individual factors can include educational history, knowledge, as well as the character or personality of the individual. In these conditions, nurses can be helped by a positive system and work culture so that caring behavior is still felt by patients and families.

The assessment of nurses' emotional intelligence in the moderate category but with caring behavior rated as good by respondents could be influenced by the low education level of the respondents, specifically the elementary school level. Low education can be influenced by the limitations of respondents in understanding and assessing the concept of emotional intelligence. In this case, respondents tend to assess services based on simple and easily observable indicators, so that more complex aspects have not been fully captured in the respondents' assessment. Besides affecting the assessment of emotional intelligence, the level of education also influences patient perception. The higher a person's education, the more they will understand about health; someone with lower education tends to perceive services as good or have a more positive perception of services than those with higher education (Yanriatuti et al., 2025). Conversely, the higher the patient's education level, the perception of caring behavior tends to be more complex and critical compared to individuals with lower education (Kurniawati et al., 2020).

The research results show that out of 38 respondents, there were 3 respondents (7.9%) who assessed nurses' emotional intelligence in the high category but were in the moderate caring behavior group. This shows that caring behavior is influenced by various internal and external factors such as high workload, work environment, organizational support, and job satisfaction, so that nurses with high emotional intelligence are not necessarily able to show caring optimally if working conditions are less supportive or if tasks are too dense, which impacts their interpersonal response in nursing care (Supriatin, 2025).

The research results obtained that most high emotional intelligence levels had good caring

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behavior, specifically 34 respondents (89.5%). This research is in line with the study conducted by Wibowo et al. (2024), which obtained a p-value of 0.029 < 0.05. The correlation coefficient value obtained was 0.433, indicating that the closeness of the relationship between emotional intelligence and caring behavior is in the moderate category, located in the interval of 0.400-0.599. Nurses who have high emotional intelligence have a high sense of empathy for clients, so they are more caring toward clients in meeting the clients' overall needs. This statement is also in line with what was stated by Goleman (2024), who said that nursing services greatly require nurses who have high emotional intelligence. The higher the emotional intelligence of a nurse, the better their caring behavior will be (Wibowo et al., 2024).

It is important for nurses to possess emotional intelligence, namely the ability to understand oneself and others, have a sense of empathy toward others, be able to control and direct emotions into positive behavior, be able to take appropriate action in various situations, as well as not acting based on emotional impulses and not behaving impulsively (behavior performed without thinking first) (Pinem et al., 2024). Emotional intelligence is needed to be able to face and understand oneself and others; emotions will help a person in exercising self-control, self-esteem, Self-Awareness, social sensitivity, and social adaptation, as well as helping a person grow an attitude of Empathy, concern, love, and affection, and determining their attitude and behavior.

Emotional intelligence is highly needed in interacting with patients, families, fellow nurses, doctors, and other health teams. When nurses interact, an attitude of empathy is highly needed, along with the ability to recognize one's own emotions and the emotions of others, so that a relationship of mutual trust and mutual assistance will be established between the nurse and the patient, the nurse and the family, the nurse and the doctor, and the nurse and other health teams (Harahap et al., 2022). Caring traits such as patience, honesty, humility, an attitude of concern, respect, and valuing others mean giving attention and learning someone's preferences and how someone thinks, acts, and feels, where it is not easy to obtain these traits. Therefore, high emotional intelligence is required to obtain these caring traits (Alfatiha et al., 2023).

Caring behavior is expressed as a feeling to provide a sense of security, change behavior, and work according to standards. The behavior shown by nurses is by providing comfort, attention, affection, care, health maintenance, encouragement, Empathy, interest, love, trust, protection, presence, support, touch, and being ready to help as well as visiting clients; such behavior will encourage clients to change physically, psychologically, spiritually, and socially for the better (Harahap et al., 2022).

Based on the research results, there was a total of 37 respondents (97.4%) for nurses with

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high emotional intelligence levels and 1 respondent (2.6%) with moderate emotional intelligence, with good category caring behavior totaling 35 respondents (92.1%) and moderate category caring behavior totaling 3 respondents (7.9%). In line with the study by Zulfita et al. (2022), it was known that out of 30 respondents (100%) of nurses at Tanjungpura University Hospital Pontianak, those who stated high emotional intelligence with good caring behavior totaled 21 respondents (77.8%), where nurses with high emotional intelligence tend to be able to display better caring behavior in providing nursing care, which is felt directly by patients through attitudes of empathy, attention, and concern during the care process. This is in accordance with the Caring theory from Jean Watson, which emphasizes that caring is the core of nursing practice that is humanistic and transpersonal. Watson (2008) explains that caring involves an authentic interpersonal relationship between the nurse and the patient, where the nurse is emotionally present, shows Empathy, respects the patient's dignity, and creates an environment that supports the healing process. Therefore, to provide holistic nursing care through quality caring behavior can be formed by increasing nurses' emotional intelligence.

Increasing emotional intelligence provides various benefits in nursing practice, including building better interpersonal relationships, more effective communication, as well as the nurse's ability to manage stress and conflict adaptively, especially in high-pressure work situations (Pinem et al., 2024).

Based on the research results, supporting theories, and previous research, it can be concluded that emotional intelligence has a close relationship with nurses' caring behavior, especially in intensive care rooms that demand physical and emotional readiness simultaneously. Nurses with good emotional intelligence will be better able to control emotions, stay calm in facing critical patient conditions, and maintain Empathy and concern despite being in stressful situations. Thus, mastery of emotional intelligence allows nurses to remain focused on providing professional and caring nursing care, so that caring behavior can be displayed consistently and felt tangibly by patients and families in the intensive care unit.

CONCLUSION

The level of nurses' emotional intelligence based on patients'/families' perception is mostly in the high category with 37 respondents (97.4%) and the moderate category with 1 respondent (2.6%).

Nurses' caring behavior based on patients'/families' perception is mostly in the good category with 35 respondents (92.1%) and the moderate category with 3 respondents (7.9%).

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There is a positive association between the level of emotional intelligence and nurses' caring behavior based on patients'/families' perception in the ICU/ICCU room, based on the Spearman Rank test, a p-value = 0.029 < α = 0.05 was obtained with the strength of the relationship in the moderate category and a positive direction of the association.

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