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THE INTERRELATIONSHIP OF EMOTIONAL INTELLIGENCE, CARING EFFICACY, AND SOCIAL SUPPORT IN SHAPING NURSING STUDENTS' CLINICAL COMPETENCY

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Abstract

Background: *In Punjab, Pakistan, the quality of nursing education and clinical practice is critical to preparing competent nurses for a growing healthcare system. Emotional intelligence, caring efficacy, and social support are recognized as key determinants of clinical competency, yet little evidence exists from local nursing institutions.*

Materials and Methods: *A descriptive correlational study was conducted among 140 BS nursing students from 3rd and 4th years enrolled at the College of Nursing, Allama Iqbal Medical College, Lahore, and the College of Nursing, Sir Ganga Ram Hospital, Lahore. Data were collected using a structured questionnaire incorporating validated scales for emotional intelligence, caring efficacy, social support, and clinical competency. Statistical analyses included Pearson correlation and stepwise multiple regression.*

Results: *The study revealed significant positive correlations among emotional intelligence, caring efficacy, social support, and clinical competency ($r = .46–.53$, $p < .01$). Stepwise multiple regression indicated that caring efficacy ($\beta = .27$, $p < .001$), social support ($\beta = .26$, $p < .001$), and emotional intelligence ($\beta = .19$, $p = .001$) were the strongest predictors of clinical competency.*

Conclusion: *These findings suggest that fostering emotional intelligence, caring efficacy, and social support is vital for enhancing nursing students' clinical competency and overall professional readiness.*

INTRODUCTION

The clinical competency of nursing students is a critical determinant of their preparedness for professional practice and quality patient care. Previous studies have highlighted that knowledge, attitudes, and practical performance are foundational to nursing competence, particularly in clinical settings where evidence-based decision-making and critical thinking are essential (Kim & Lee, 2019; Park et al., 2012). Competence is not merely a reflection of technical proficiency but also encompasses cognitive, affective, and behavioral dimensions, enabling nurses to deliver holistic and patient-centered care. In Korea and elsewhere, clinical competence development has been strongly associated with structured education, guided clinical experiences, and reflective learning opportunities (Kim & Choi, 2019).

Recent research underscores that beyond cognitive and technical skills, emotional and interpersonal

dimensions—such as emotional intelligence (EI), caring efficacy, and social support—play a vital role in shaping nursing students' clinical competence. Emotional intelligence enables students to recognize, manage, and utilize emotions constructively in high-pressure clinical contexts, fostering empathy and resilience (Chaung, 2011; Kwon, 2011). Caring efficacy, on the other hand, strengthens nurses' confidence in expressing empathy and compassion effectively, aligning with the caring theories central to nursing education. Social support from peers, faculty, and clinical mentors provides an encouraging environment that enhances self-efficacy, motivation, and adaptive learning behaviors, all of which are essential for competency acquisition (Manoochehri et al., 2015; Park & Han, 2013).

The interrelationship among emotional intelligence, caring efficacy, and social support may therefore create a synergistic framework influencing the overall clinical competence of nursing students. Studies have suggested that higher EI fosters self-directed learning and effective problem-solving (Lee et al., 2011), while social and emotional reinforcement can mitigate clinical stress and enhance learning engagement (Rojo et al., 2020). Exploring these interrelated factors offers valuable insights for educators seeking to develop competency-based curricula that address not only cognitive and technical dimensions but also emotional and relational aspects of nursing education. Understanding this dynamic interplay is thus imperative for preparing nursing graduates who are both clinically competent and emotionally attuned caregivers.

A descriptive correlational design was employed to explore the interrelationship among emotional intelligence, caring efficacy, social support, and clinical competency of nursing students. The study was conducted among 140 BS Nursing students enrolled in 3rd and 4th years at the College of Nursing, Allama Iqbal Medical College and the College of Nursing, Sir Ganga Ram Hospital, Lahore. Participants were selected through convenience sampling, with inclusion criteria requiring completion of at least one semester of clinical practice.

Data were gathered through a structured self-administered questionnaire comprising validated instruments: the Wong and Law Emotional Intelligence Scale (WLEIS) for emotional intelligence, the Caring Efficacy Scale (CES) for caring efficacy, the Social Support Scale by Park JW (modified by Yoon & Kim) for perceived social support, and a Clinical Competence Assessment Tool adapted from Lee et al. and Choi for clinical performance. Each scale demonstrated high internal consistency, with Cronbach's α ranging from .87 to .97, indicating strong reliability.

After obtaining ethical approval and informed consent, data were collected during regular class sessions following COVID-19 precautions. Statistical analyses were performed using SPSS (version 23.0). Descriptive statistics (mean and SD) summarized the variables, while Pearson's correlation examined inter-variable relationships. Stepwise multiple regression analysis identified the most significant predictors of clinical competency among emotional intelligence, caring efficacy, and social support.

1. **Materials and Methods**
2. **Results**

Table 1. Differences in Emotional Intelligence, Caring Efficacy, Social Support, and Clinical Competency by General Characteristics (N = 140)

Variables	Categories	Emotional Intelligence (M ± SD)	t/F (p)	Caring Efficacy (M ± SD)	t/F (p)	Social Support (M ± SD)	t/F (p)	Clinical Competency (M ± SD)	t/F (p)
Academic Year	3rd Year	5.24 ± 0.80	1.35 (.247)	4.30 ± 0.63	2.27 (.133)	4.15 ± 0.54	0.52 (.473)	3.73 ± 0.47	2.58 (.109)
	4th Year	5.12 ± 0.71		4.18 ± 0.63		4.10 ± 0.61		3.83 ± 0.54	

Age (years)	20–21	5.17 ± 0.79	0.30 (.742)	4.24 ± 0.63	0.02 (.979)	4.15 ± 0.54	0.32 (.729)	3.76 ± 0.46	0.25 (.780)
	22–24	5.23 ± 0.73		4.25 ± 0.59		4.09 ± 0.60		3.80 ± 0.53	
	≥25	5.12 ± 0.75		4.26 ± 0.74		4.16 ± 0.60		3.75 ± 0.58	
Academic Performance	High	5.35 ± 0.71	2.02 (.134)	4.46 ± 0.65	**3.21 (.042)** *c* < *a*	4.32 ± 0.61	**5.83 (.003)** *c* < *a*	3.96 ± 0.56	**3.96 (.020)** *c* < *a*
	Middle	5.19 ± 0.78		4.22 ± 0.61		4.13 ± 0.54		3.75 ± 0.48	
	Low	4.99 ± 0.72		4.13 ± 0.69		3.87 ± 0.60		3.67 ± 0.53	
Motivation for Major Selection	Academic score	5.09 ± 0.79	1.08 (.375)	3.96 ± 0.61	3.78 (.056)	4.04 ± 0.63	1.66 (.132)	3.76 ± 0.51	2.05 (.059)
	Aptitude	5.30 ± 0.82		4.46 ± 0.62		4.19 ± 0.58		3.90 ± 0.53	
	High employment rate	5.12 ± 0.71		4.12 ± 0.59		4.13 ± 0.55		3.71 ± 0.47	
	Recommendation	5.22 ± 0.81		4.14 ± 0.66		4.03 ± 0.58		3.74 ± 0.54	
	Service job	5.19 ± 0.82		4.44 ± 0.36		4.39 ± 0.49		3.52 ± 0.32	
	Compensation	5.60 ± 0.59		4.65 ± 0.56		4.45 ± 0.31		3.99 ± 0.52	
Major Satisfaction	Dissatisfied	4.74 ± 0.59	**3.30 (.038)** *a* < *b,c*	3.58 ± 0.51	**9.72 (<.001)** *a* < *b,c*	3.83 ± 0.53	**4.65 (.010)** *a* < *b,c*	3.40 ± 0.32	**9.76 (<.001)** *a* < *c*
	Normal	5.11 ± 0.73		4.15 ± 0.60		4.04 ± 0.55		3.67 ± 0.46	
	Satisfied	5.31 ± 0.80		4.40 ± 0.62		4.24 ± 0.59		3.91 ± 0.53	
Clinical Practice Satisfaction	Dissatisfied	4.63 ± 0.82	**5.69 (.004)** *a* < *c*	3.69 ± 0.45	**10.90 (<.001)** *a* < *b,c*	3.60 ± 0.61	**13.72 (<.001)** *a* < *b,c*	3.42 ± 0.45	**6.73 (.001)** *a* < *c*
	Normal	5.10 ± 0.74		4.13 ± 0.65		4.00 ± 0.54		3.70 ± 0.47	
	Satisfied	5.32 ± 0.76		4.40 ± 0.57		4.29 ± 0.55		3.88 ± 0.52	
Difficult Relationship in Practice	With nurse	5.12 ± 0.78	0.63 (.643)	4.19 ± 0.64	1.77 (.135)	4.08 ± 0.57	1.06 (.376)	3.71 ± 0.50	1.02 (.397)
	With other staff	5.25 ± 0.78		4.19 ± 0.58		4.05 ± 0.53		3.87 ± 0.55	
	With patients/caregivers	5.21 ± 0.81		4.14 ± 0.69		4.18 ± 0.41		3.79 ± 0.49	
	With colleagues	5.34 ± 0.57		4.33 ± 0.55		4.08 ± 0.53		3.79 ± 0.41	

Table 1 presents the differences in emotional intelligence, caring efficacy, social support, and clinical competency among nursing students according to selected general characteristics (N = 140). No significant differences were found in relation to academic year, age, or difficult relationships during practice, indicating that these factors did not influence the key variables. However, academic performance, major satisfaction, and clinical practice satisfaction showed statistically significant differences across multiple domains. Students with higher academic performance demonstrated greater caring efficacy (p = .042), social support (p = .003), and clinical competency (p = .020). Similarly, students reporting higher satisfaction with their major and clinical practice scored significantly higher in emotional intelligence, caring efficacy, social support, and clinical competency (all p < .05).

Table 2. Correlation Coefficients among Emotional Intelligence, Caring Efficacy, Social Support, and Clinical Competency (N = 140)

Variables	Emotional Intelligence	Caring Efficacy	Social Support	Clinical Competency
Emotional Intelligence	1	.46**	.47**	.46**
Caring Efficacy		1	.53**	.52**
Social Support			1	.52**
Clinical Competency				1

Table 2 illustrates the interrelationships among emotional intelligence, caring efficacy, social support, and clinical competency of nursing students (N = 140). All variables demonstrated positive and significant correlations (p < .01), indicating that higher emotional intelligence was associated with greater caring efficacy (r = .46), social support (r = .47), and clinical competency (r = .46). Similarly, caring efficacy correlated strongly with both social support (r = .53) and clinical competency (r = .52).

These findings confirm that students who exhibit stronger emotional awareness, empathy, and supportive interactions tend to perform better clinically, supporting the study's objective of identifying the interconnected role of emotional intelligence, caring efficacy, and social support in shaping nursing students' clinical competency.

Table 3. Factors Influencing Clinical Competency among Nursing Students (N = 140)

Variables	B	SE	β	t (p)	Tolerance	VIF
Constant	1.13	0.22	–	5.25 (<.001)	–	–
Caring Efficacy	0.22	0.05	.27	4.46 (<.001)	.64	1.56
Social Support	0.23	0.05	.26	4.29 (<.001)	.65	1.54
Emotional Intelligence	0.12	0.04	.19	3.27 (.001)	.71	1.40
Satisfaction with Major	0.12	0.05	.12	2.45 (.015)	.94	1.06

Table 3 shows the factors influencing clinical competency among nursing students (N = 140). The regression model identified **caring efficacy (β = .27, p < .001)**, **social support (β = .26, p < .001)**, and **emotional intelligence (β = .19, p = .001)** as significant positive predictors of clinical competency, while **satisfaction with major (β = .12, p = .015)** also had a modest effect. All tolerance values were above .60 and VIF values below 2, indicating the absence of multicollinearity.

Overall, these results suggest that students with higher caring efficacy, stronger social support, and greater emotional intelligence demonstrate better clinical performance, confirming the study objective that emotional and interpersonal competencies play a critical role in enhancing nursing students' clinical competence.

Table 4. Correlations among Emotional Intelligence, Caring Efficacy, Social Support, and Clinical Competency (N = 140)

Variables	Emotional Intelligence	Caring Efficacy	Social Support	Clinical Competency
Emotional Intelligence	1	.46**	.47**	.46**
Caring Efficacy		1	.53**	.52**
Social Support			1	.52**
Clinical Competency				1

Table 4 summarizes the relationships among emotional intelligence, caring efficacy, social support, and clinical competency among nursing students (N = 140). All variables showed **significant positive correlations** ($p < .001$). Emotional intelligence demonstrated strong associations with caring efficacy ($r = .46^*$) and social support ($r = .47^*$), which in turn were significantly related to clinical competency ($r = .52–.53^*$).

Additionally, within each construct, subdimensions were highly interrelated—indicating internal consistency and reinforcing that students with higher emotional regulation, empathy, and social connectedness exhibit greater competence in clinical performance, communication, and professional development. These findings confirm the model assumption that emotional intelligence, caring efficacy, and social support collectively enhance clinical competency among nursing students.

3. Discussion

The present study explored the interrelationship of emotional intelligence, caring efficacy, and social support in influencing nursing students' clinical competency. The findings revealed significant positive associations among these variables, demonstrating that higher emotional intelligence and caring efficacy are linked with stronger clinical performance. This result supports prior evidence emphasizing that emotional regulation and empathy are essential attributes in clinical nursing education (Shen et al., 2020; Lewis et al., 2017). Emotional intelligence helps students manage interpersonal challenges and clinical stress, fostering decision-making and patient-centered care. Kaya et al. (2017) similarly reported that emotional intelligence enhances critical thinking and adaptability, contributing to improved problem-solving and clinical judgment — qualities reflected in the high competency levels observed in this study.

Caring efficacy emerged as one of the strongest predictors of clinical competency, aligning with Ghane and Esmaeili's (2019) observation that empathy and caring behaviors directly influence the quality of patient-centered nursing. Nursing students with higher confidence in their caring abilities tend to demonstrate effective communication, emotional sensitivity, and collaborative practice — essential components of clinical excellence (Hartley et al., 2020). The current findings also resonate with Jeong and Kim (2019), who found that empathy education significantly enhances caring and interpersonal abilities among nursing students. As Coates (1998) emphasized, caring efficacy represents nurses' belief in their capacity to form meaningful therapeutic relationships — a key element of competent, holistic care.

Social support was also a significant determinant of clinical competency, consistent with Lee and Pak (2016), who noted that supportive professional

environments and collegial relationships improve psycho-social well-being and patient care ability. Students who received higher emotional and evaluative support from peers, instructors, and family exhibited greater confidence and motivation in clinical settings. Rafati et al. (2017) further suggested that social support serves as a coping resource, mitigating stress and enhancing performance during clinical placements. This study's results reinforce that emotional intelligence, caring efficacy, and social support work synergistically to improve nursing students' clinical competence — a finding consistent with previous models linking psychological resilience and relational support to professional effectiveness (Kim, 2019; Lee et al., 2011).

4. Conclusion

Enhancing nursing students' emotional intelligence, caring efficacy, and social support is essential for strengthening their clinical competency and ensuring high-quality patient care. Nursing education programs should incorporate empathy training, mentorship systems, and supportive learning environments to promote emotional growth, interpersonal effectiveness, and professional competence among future nurses.

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