

Contributions of emotional intelligence in facing leadership challenges in nursing

Fernanda Tavares de Mello Abdalla¹  Maria Elisa Gonzalez Manso¹  Renata Laszlo Torres¹  Mariana Almeida Rocha¹ 
Maria Fernanda Terra² 

¹Centro Universitário São Camilo – CUSC. São Paulo/SP, Brasil.

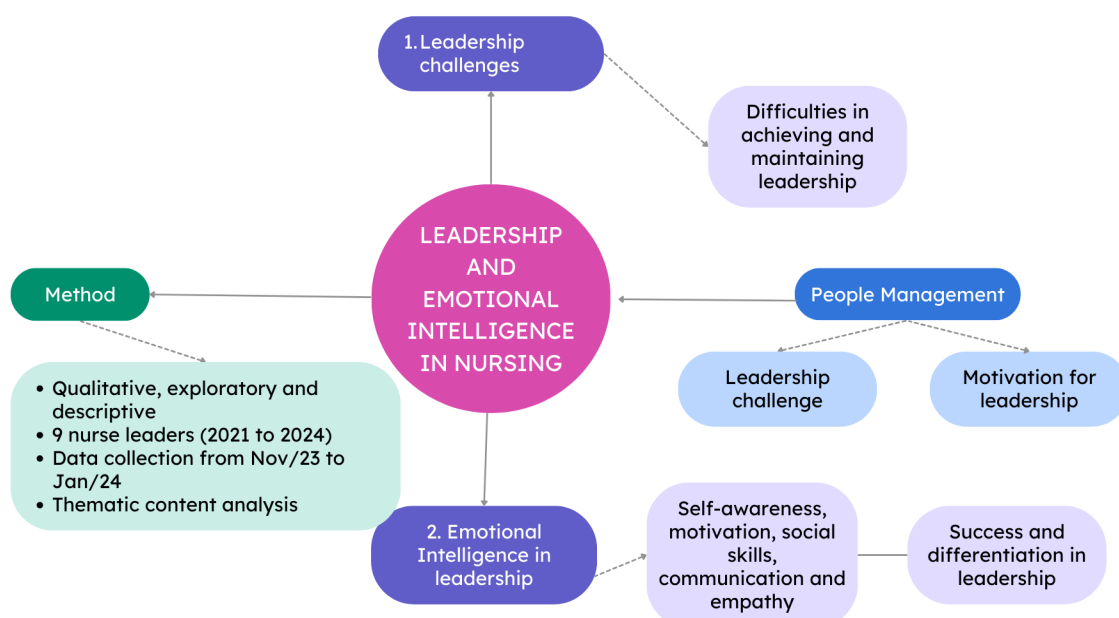
²Departamento de Enfermagem em Saúde Coletiva, Escola de Enfermagem, Universidade de São Paulo – ENS/EE-USP. São Paulo/SP, Brasil.

E-mail: fernanda.abdalla@prof.saocamilo-sp.br

Graphical Abstract

Highlights

- Qualitative study with nine nurse leaders between 2021 and 2024.
- People management was identified as the main leadership challenge.
- The pleasure of dealing with people motivated the choice of leadership positions.
- Emotional intelligence stood out as an essential factor for leadership.
- Self-knowledge, social skills, empathy, communication and motivation were key competencies cited.



Abstract

This study aims to analyze nurses' perceptions regarding leadership challenges and the elements of emotional intelligence necessary for professional practice. It is a qualitative, exploratory, and descriptive study, with the participation of nine nurses who held leadership positions between 2021 and 2024. Data collection took place between November 2023 and January 2024 through remotely conducted semi-structured interviews. Thematic analysis resulted in two categories: *Leadership Challenges in Nursing* and *Emotional Intelligence in Leadership Practice*. It was identified that achieving and maintaining leadership positions is a challenge, especially in people management, with the pleasure of dealing with people being the main motivator for assuming such a position. Among the elements of emotional intelligence, self-awareness was highlighted as a source of motivation for leadership, but also as a challenge within the leadership process. Other aspects considered essential included social skills, motivation, empathy, and communication. It is concluded that emotional intelligence is a differentiating factor for success in nursing leadership, with people management being the greatest challenge and, at the same time, the main motivation for leading. The most frequently cited elements - self-awareness, social skills, motivation, empathy, and communication - were recognized as fundamental for the exercise of leadership.

Keywords: Emotional Intelligence. Leadership. Health Management. People Management. Nursing.

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INTRODUCTION

Discussions about leadership in nursing are present in different areas of nurses' professional practice^{1,2}, as leading is an inherent part of this professional's role. A nurse leader directs and influences teams based on ethical principles, technical and scientific competence, as well as communication and conflict management skills³. Effective leadership influences team engagement to achieve positive outcomes in safe and quality care⁴.

Nurse leadership represents a challenge, as it involves the management of people and health services. During the Covid-19 pandemic, especially in 2020 and 2021, significant changes occurred in the work processes of nurse leaders, including alterations in the modality and sizing of the workforce, as well as a substantial increase in working hours in the healthcare sector. In Portugal, among healthcare professionals - predominantly women - psychosocial factors and high levels of burnout were identified, such as physical fatigue, cognitive fatigue, and emotional exhaustion⁵. Globally, a prevalence of 39% for insomnia and 23% for depression and anxiety among healthcare professionals during the pandemic was observed⁶, highlighting the urgency of strategies to care for these workers.

The pandemic period required nurse leaders to increasingly rely on emotional skills to coordinate teams, highlighting that the nature of nursing work is complex in any context and demands these competencies more intensely than in other professions. Daily challenges, such as active listening, effective communication, understanding the emotions of others, and establishing professional relationships, reinforce the importance of emotional intelligence for assertive performance⁷.

Goleman⁸ emphasizes that emotional awareness contributes to the development of emotional intelli-

gence, defining it as the ability to recognize, understand, and manage one's own emotions and those of others. The author delved into the pillars of emotional intelligence, which include self-awareness, self-management, self-motivation, empathy, and social skills, linking leadership success to the presence of these competencies⁹.

In addition to technical knowledge, leading requires social skills that translate into a people management model based on considering emotions, identifying that emotional intelligence contributes to the exercise of leadership¹⁰. By applying emotional intelligence, it is possible to have better leaders with emotional management skills, contributing to communication, team motivation, and the development of processes in an innovative way¹¹.

Leadership is a major professional challenge, and it is considered that the nurse's role goes beyond technical and cognitive aptitudes, requiring the enhancement of social and emotional skills in professional practice, as nurses are constantly interacting with patients and healthcare professionals. In this sense, the elements of emotional intelligence can contribute to the success of nurses' leadership and serve as a differentiating factor in facing the daily challenges of professional practice, assisting in the development of self-awareness, self-management, self-motivation, empathy, relationship management, and practices for personal well-being¹².

Given this, it is essential to understand, from the perception of nurses, what the leadership challenges are and what elements of emotional intelligence are involved in professional practice. The present study aims to capture the leadership challenges and the elements of emotional intelligence used in professional practice from the perspective of nurses.

METHODOLOGY

This is a qualitative, exploratory, and descriptive study, derived from the research project *"The Challenges Experienced by Women Leaders in the Health Sector and Aspects of Emotional Intelligence"*, presented to the People Management Program at ES-ALQ/USP in 2024. The study analyzed nurses' perceptions regarding leadership challenges, gender issues, and the use of emotional intelligence.

The sample was selected by convenience, considering the time available for the study¹³. The eligibility criteria were defined as being a woman with a nursing degree and experience in leadership positions, current or previous. The participants were nurses with postgraduate education (*lato sensu* and/or *stricto sensu*) who held leadership positions between 2021 and 2024, covering the three years

prior to data collection. Participants were invited through individual messages sent via WhatsApp® and LinkedIn®, including both known and unknown contacts of the researcher. The Informed Consent Form (ICF) was made available digitally through Google Forms® for reading and signing before the interviews. The interviews, scheduled in advance, were conducted remotely using the Google Meet® platform.

Data collection took place between November 2023 and January 2024 through semi-structured interviews with open-ended questions developed by the researcher. The script included questions about the participants' profiles (age, educational background, current position, weekly workload, type of institution, work format, time spent in leadership roles, types of activities performed, and whether leadership and emotional intelligence topics were addressed in their education), as well as questions about leadership challenges and the use of emo-

tional intelligence elements. A total of nine interviews were conducted, with an average duration of 30 minutes. Only the researcher and the participant were present during the interviews, which were recorded with the participants' consent, transcribed into Word® documents, and organized into Excel® spreadsheets.

The data were analyzed using Thematic Content Analysis¹⁴, following the stages of material exploration, transformation of raw data to identify the core themes of the text, and treatment of the results. Two thematic categories emerged: *Leadership Challenges in Nursing and Emotional Intelligence in Leadership Practice*.

The study was approved by the Research Ethics Committee (REC) through the Plataforma Brasil system (CAAE: 70441323.80000.9927; Approval Number: 6.341.712). To ensure the anonymity of the participants, the statements are identified by codes corresponding to the sample group, from E1 to E9.

RESULTS

Nine nurses (E1 to E9) participated in the study, all residing in the State of São Paulo, Brazil, with a mean age of 39 years (ranging from 31 to 60 years) and holding postgraduate education (lato sensu and/or stricto sensu). Seven worked in private institutions and two in public institutions, with a predominantly weekly workload of between 36 and 40 hours; two reported working more than 40 hours per week. Four performed their duties in a hybrid format, three in person, and two in a home office format. The average leadership experience was four years (ranging from 1 to 17 years), with seven nurses holding leadership positions during the 2020 and 2021 pandemic period. Five participants combined leadership activities with direct care duties. The thematic analysis of the data resulted in two categories: *Leadership Challenges in Nursing and Emotional Intelligence in Leadership Practice*.

Leadership Challenges in Nursing

The process of becoming a leader is complex and influenced by factors that shape the journey of achieving and maintaining leadership positions. Some participants reported negative experiences that impacted their health:

It was painful. Because it's something I had always wanted, you know, to move into a leadership position. I was steering my career in that direction. How-

ever, I had one leader in particular who destroyed my life and my career. I experienced burnout, and since then I have had severe aftereffects to this day [...] so it's very hard, despite the results, for me to accept that I am a good leader [...] (E6).

[...] at the time, I really became ill. I had to see a psychiatrist, and I started having anxiety attacks because of all the challenges I was facing there as a leader (E1).

On the other hand, leaders who recognize potential and promote professional development make the process enriching:

[...] my manager at another point, and she was someone who helped me grow a lot in my leadership journey [...] (E6).

Motivations such as liking people and contributing to their professional growth were highlighted:

People, I like people [...] so training people, developing people, giving people opportunities [...] with the amount of training and experience I have, working on mentoring, helping and supporting [...] (E2).

In addition, care for healthcare professionals, patients, and families was also mentioned:

For me, the strongest part is that I really like tak-

ing care of the people who are at the base [...] *I really like taking care of those who take care of others* (E9).

I think the main motivation is being able to help people because you have, let's say, a kind of power [...] *you are able to have access. I'll give you an example: we need some item, some material, for a patient who is really, really underprivileged. Then you coordinate [...]* (E8).

The idea that nurses are already leaders upon graduation also emerged, indicating that assuming leadership roles early in one's career can be challenging due to a lack of management preparation:

I graduated very young, I started college at 17 and by 21 I was already a graduate, it wasn't easy, it was really hard [...] I also felt that my education prepared me for care, for assistance, but not for management (E8).

Seven participants identified people management as both their greatest challenge and motivation:

People's resistance to learning new things [...] (E1).

People's mindset, because managing people involves conflict management, dealing with personalities, the habits that people bring with them, the conflicts between the new ones and the older ones, you know [...] so I think the biggest challenge is managing people (E8).

Aligning leadership with company goals was identified as a fundamental strategy:

First, it's about understanding the company's goals, understanding the goals of the organization where you work, knowing whether your own purposes are aligned with those goals, so that you can lead and guide your team accordingly [...] (E2).

Self-awareness was also mentioned as essential for organizing work and leading effectively:

[...] about changing that mindset, moving from a technical perspective to thinking about people management, so I no longer need to be at the forefront of the process because I have a team, and I have to trust this team to deliver the results we aim for (E4).

When the leadership role is combined with direct care activities, organizing all the demands becomes challenging, which can lead to work overload:

[...] how much we dedicate ourselves to the leadership role, especially when it is combined with direct care, it goes far beyond what is contractually expected (E3).

The Covid-19 pandemic brought new challenges to nursing. In remote work, difficulties arose in developing processes and adapting routines to the virtual format. In on-site work, the main challenges included the daily workforce sizing. In both modalities, maintaining mental health and leading amid fear of the virus were widely highlighted:

[...] and with the pandemic, we didn't know anything [...] employees broke down, became ill, lost their partners, lost their relatives, lost their friends, came here crying, were afraid to care for patients, it was a tremendous emotional strain (E8).

Emotional Intelligence in Leadership Practice

The most frequently cited elements of emotional intelligence were self-awareness, social skills, motivation, empathy, and communication. For the nurses, the use of emotional intelligence by leaders strengthens teamwork and facilitates conflict management:

So a leader who has emotional intelligence, who knows how to deal with problems, their team will also know how to do that through mirroring (E6).

Self-awareness is related to understanding oneself and self-control, establishing boundaries between the individual and others, and also involves understanding the role of the leader and the expectations regarding their team:

[...] so maybe if we don't have that ability of self-control, self-awareness, of knowing a little about who we are as leaders [...] (E5).

Social skills were cited by nurses as a leadership practice, as they frequently engage in interpersonal relationships, mediate conflicts, and guide the team, especially when there is a common goal to be achieved:

All the time, you have to have technical knowledge, know how to manage your relationships, and have all the emotional skills necessary to channel the energy needed to achieve your goals and bring people along [...] (E2).

I remember that I had on my team [...] one of the most wonderful nurses [...] she was extremely resistant [...] she was a very strong influence on the team [...] I said, "Look [...] you impact people because you have a unique quality, very few people are capable of influencing others, but we have to think about how we are influencing [...]" and she changed completely, like night and day [...] (E9).

Empathy stands out as a fundamental element

in the nurse's training, present daily in leadership, in relationships with team members, and in problem-solving:

[...] everyday empathy, really, getting to know people [...] I always try with the people I work with [...] (E2).

There are developments related to the element of empathy, such as self-compassion, which strengthens healthcare professionals, allowing them to lead and care for their own mental health:

Empathy, I would highlight that it's an empathy directed toward oneself [...] (E7).

[...] so knowing how to be grateful for being the way you are, for having your family, having people around you, being thankful for the day, I think it brings, at least for me, a kind of mental peace that allows me to work throughout the day [...] (E4).

Communication was mentioned as a crucial element for dealing with conflict and stress within the

team, being part of social skills. In conflict resolution, communication tools such as nonviolent communication, a culture of feedback, and the pursuit of immediate problem-solving are fundamental:

What really helped me was understanding more about nonviolent communication [...] so you use nonviolent communication by applying the feedback tool [...] (E4).

The need to strengthen communication to avoid different interpretations emerged, especially considering that communication often occurs digitally. However, the importance of face-to-face communication, which can strengthen the relationship between leader and team member, was also emphasized:

Most of the time when we have a conflict situation in our unit, it's related to communication - whether it's how we listen, how we write, how we interpret, or how we fail to listen [...] so we realize that for them, my presence to listen is always very important (E5).

DISCUSSION

The development of leadership is a complex process, influenced by both positive and negative experiences, which makes management exercised by nurses a challenging endeavor. Throughout their professional careers, nurses exercise the competence of leading teams, making it necessary to foster the development of these professionals within healthcare organizations.

Positive leadership styles that foster change are necessary for the team's self-development and for ensuring that the care provided reaches levels of excellence⁴. Proposing strategies to address interpersonal conflicts, by encouraging nurses to adopt a participative and dialogical leadership style, reinforces collectivity as the essence of care¹⁵. Similarly, responsible and ethical leadership that recognizes both individual and collective contributions helps create opportunities for personal and professional growth¹⁶. In a way, leaders who achieve better outcomes are those who do not rely on a single leadership style but are able to adapt different styles to different work situations⁹.

In this sense, continuous learning about leadership^{16,17} becomes fundamental, both in the practice of care techniques and in the development

of social skills and people management. The use of strategies such as discussion forums, tutorials, escape rooms, extension projects, and workshops^{18,19,20} can significantly contribute to the education of future professionals and those already in the workforce.

Emotional intelligence has been shown to be present in the practice of nurses when exercising leadership. High levels of a leader's emotional intelligence foster trust, encourage healthy risk-taking, and promote learning, while low levels create a climate of fear and anxiety in the workplace⁹. Thus, the leader influences the culture, the professional environment, and the entire work process, helping to make the team's journey toward achieving proposed goals lighter and more effective.

When reflecting on professional education, elements of emotional intelligence effectively contribute to the development of nurse leaders who are skilled in managing their own emotions, strengthening interpersonal relationships, managing work, and fully exercising care²⁰. From the perspective of undergraduate nursing students, there is a superficial understanding of emotional intelligence related to leadership, highlighting the importance of addressing these topics during

education. Therefore, it is necessary to create spaces for dialogue about emotional intelligence during undergraduate studies, involving professors and students, especially within nursing programs, in order to prepare students to face the challenges of professional life^{20,21}.

In this study, the challenge most cited in exercising leadership was also the greatest motivator: managing people. People management involves mediating conflicts and guiding team actions to achieve goals, both for the leader and for the institution. When leaders use elements of emotional intelligence in their professional practice, they are better able to understand the problems faced by their team members, think of ways to assist them, and develop skills to better address everyday challenges.

It was observed that the nurses in this study use social and emotional skills to care and lead, understanding that these are integral parts of professional practice. Enhancing social and emotional skills is essential due to the specific nature of the profession and the complexity of nursing work, which places the individual - whether healthy or ill - at the center of care²².

For healthcare managers, it is noted that emotional intelligence is highly relevant in healthcare environments, both public and private, as it promotes professional performance, teamwork, and humanized care²³. Organizations and professionals play a fundamental role in supporting the development of an emotionally intelligent organizational culture by implementing strategies such as training sessions, workshops, feedback, and well-being policies to better address work demands²⁴.

The element of self-awareness, cited in the study, is fundamental to the exercise of leadership, being related to self-awareness and self-management, with the aim of directing attention inward to understand one's own limits and possibilities. Self-awareness allows nurses to recognize their strengths and weaknesses, while in self-management, they develop the ability of self-control, focusing on balance - not repressing emotions but identifying and understanding feelings in the present moment²⁵.

Motivation, in turn, is related to social skills, and motivated individuals tend to be optimistic and collaborative⁹. In this sense, self-motivation seeks to channel emotional energy toward achieving goals and objectives, making it essential for nurse leaders to be self-motivated and have clarity about their life purposes in order to achieve the expected

results²⁵.

In professional relationships, empathy is a fundamental element for recognizing both others and oneself, as it involves the ability to understand how another person perceives the world. There are three types of empathy: cognitive empathy, which refers to perceiving another's thoughts; emotional empathy, which resonates with another's feelings; and empathic concern, which is expressed by helping according to the person's needs⁹. Empathy is related to self-awareness, as identifying one's own emotions makes it easier to understand the emotions and feelings of others²⁵. In a recent study, more empathetic and ethical leadership was shown to enhance positive effects on nursing teams and to create a welcoming and collaborative work environment, promoting organizational well-being²⁶.

Another pillar of emotional intelligence is relationship management, which involves building bonds with others and guiding and addressing conflicts in professional practice²⁵. Thus, social skills aim to guide people toward the desired direction, and socially skilled professionals possess broad interpersonal knowledge and develop affinities with others, thereby facilitating teamwork. In an emergency service setting, it was observed that nurses need to develop skills that enable effective communication, as communication failures were the most common cause of conflict. In this regard, leadership plays the role of managing interpersonal relationships and mediating conflicts in the best possible way²⁷.

The social skills of nurse leaders are related to horizontal communication, more assertive and effective decision-making, and negotiations²⁵. In this sense, nonviolent communication has proven to be essential for mediating conflicts, as it refers to a process based on language skills that reformulates the way individuals express themselves and listen to others. Nonviolent communication has four components: observation, feelings, needs, and requests. This process emphasizes awareness in responding respectfully and empathetically, providing the opportunity to understand people's needs, which can contribute to conflict mediation and resolution²⁸.

The study highlighted weaknesses in the experiences reported by the nurses, such as the influence of negative leadership, mental health issues, and the overload between managerial and care functions, resulting in physical and emotional exhaustion. Indeed, professionals leading as unit

managers, for example, face the challenge of being versatile, taking on numerous managerial and care responsibilities, which creates a dilemma in trying to balance these practices²⁹.

In addition to everyday challenges, unexpected situations such as the Covid-19 pandemic brought emotional exhaustion related to work overload, difficulties in managing conflicts, and the fear of falling ill, as reported by nursing professionals³⁰. Consequently, leadership can contribute to the team's emotional strain, especially when the development of understanding and effective communication is not possible³¹. Thus, the nurse

manager plays the role of mentor and role model for their team, making emotional competence skills crucial for the success of care delivery and professional health³².

However, it is essential to reflect on these weaknesses, seeking to understand how institutional and healthcare system factors, as a whole, can contribute to the illness and demotivation of professionals. It is understood, therefore, that not only is there individual responsibility in developing coping skills, but also that institutional support is fundamental to preserving the well-being of healthcare professionals.

CONCLUSION

The study showed that the use of emotional intelligence is a differentiating factor for leadership success in the nurses' work processes, with people management identified as a challenge. The perception of leadership challenges, such as professional relationships and conflict mediation, was discussed from the perspective that being a leader requires strong performance in both management and technical-care competencies, recognizing that social and emotional skills are integral parts of the leadership role.

The nurses indicated that emotional intelligence is an essential part of this process and that leaders influence team development, the work environment, and health care delivery. The elements of self-awareness, social skills, motivation, empathy, and communication were highlighted as fundamental for effective leadership and people management. Furthermore, care for one's own health, for

the team, for patients, and for the community were mentioned as relevant points that can be strengthened through the use of emotional intelligence.

However, it is essential to foster broader discussions within academic training and in the workplace of healthcare professionals about the contribution of emotional intelligence to leadership, in order to preserve individuals' well-being and keep them motivated to provide care. It becomes relevant to initiate this approach early in professional education and to extend it throughout the professional career, so that nurses become increasingly skilled at dealing with professional challenges.

In this sense, emotional intelligence, as an innovative topic in the healthcare field, can contribute to strengthening leadership and making work processes lighter. The study's limitation was related to the participant inclusion profile and the time frame in which the research was conducted.

CRedit author statement

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Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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