Original Article

Inculcating Compassion and Emotional Intelligence in Nursing Students: Building a Foundation for Empathetic Care

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ABSTRACT

Objective: To examine the impact of a comprehensive educational program on emotional intelligence and compassion among nursing students at The University of Lahore.

Study Design: A quasi-experimental study

Place and Duration of Study: This study was conducted at the at Lahore School of Nursing, The University of Lahore, Pakistan from 20th March 2025 to 31st December 2025.

Methods: The study was a quasi-experimental study was conducted among 108 nursing students chosen using a universal sampling methodology. The participants were split into experimental (n=54) and control (n=54) groups. The experimental arm was given a structured learning intervention that included 60 minute sessions twice per week which included lectures, role plays, videos and scenario based learning on emotional intelligence and compassion, whilst the control group was not provided with anything. The Emotional Intelligence Evaluation Scale and the Compassion Scale were used to evaluate outcomes and the pre and post intervention scores were compared between the groups.

Results: There was a statistically significant change in emotional intelligence (p=0.007) and compassion (p=0.015). The experimental group had better scores in post-intervention EI (3.43±0.61) than the control group (3.06±0.64). Likewise, the scores in compassion were greatest in the experimental group (4.02±1.13) than in the control (3.05±0.62) and pre-intervention (3.33±0.53).

Conclusion: The educational intervention was structured and found to be highly effective at enhancing emotional intelligence and compassion amongst nursing students, as well as at promoting crucial competencies to provide empathetic and patient-centered care to patients.

Key Words: Compassion, Emotional intelligence, Nursing students, Educational intervention

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INTRODUCTION

Compassionate care has gained growing acknowledgment as a crucial aspect of nursing practice. Traditionally, Florence Nightingale has placed emphasis on compassion as a key ethical virtue and a necessity to good nursing. Compassion as a professional value is also supported by the International Council of Nurses in modern healthcare, which has an impact on clinical decision-making and providing high-quality and patient-centered care.

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Compassion is a profound level of understanding the suffering of patients and a strong wish to help patients, which is the basis of caring and therapeutic relationships. The nursing practice is by nature a pressure situation where nurses are exposed to critical illness, death, demanding workloads and time constraints. All these difficulties make emotional stress and emotional regulation and resilience among nurses significant.[1] Emotional intelligence (EI) as the capacity to perceive, understand and control personal and other people emotions is an important aspect of nursing practice. It improves interpersonal communication, promotes clinical decision-making, and improves patient outcomes through developing effective nurse-patient relationships.[2] Moreover, EI helps nurses to withstand stressful situations at work, adjust to the changing clinical setting, and stay psychologically healthy.[3]

There is evidence indicating that compassion and emotional intelligence are both critical determinants of clinical competence, because they combine knowledge, skills, values, and attitudes to efficient nursing care.[2] These attributes are however affected by personal and organizational factors such as training, role modeling,

and work environment.[4] Although it is important, research has shown that nursing students tend to show moderate levels of compassion and emotional intelligence, which is why special educational interventions are needed.[5] Furthermore, it was revealed that emotional intelligence can serve as a buffer to compassion fatigue and burnout, prevalent among healthcare professionals who are under the considerable influence of emotional stress over an extended period.[6] Structured training programs, role-play and learning through simulation have been suggested as educational methods of improving these competencies among nursing students.[5]

Considering the increased focus on patient-centered care and the emotional aspects of clinical practice, structured interventions that will help to foster compassion and emotional intelligence in nursing education are inevitable. Thus, the purpose of the current study is to examine the impact of a designed didactic intervention on compassion and emotional intelligence in nursing students.

METHODS

The quasi-experimental study was carried at Lahore School of Nursing, The University of Lahore from 20th March 2025 to 31st December 2025 in a sample of 108 nursing students of 3rd year who were selected using the universal sampling method. The participants were separated into experimental (n=54) and control (n=54) groups. The experimental group underwent a designed educational intervention, comprising of 60 minutes sessions with twice a week, involving lectures, role plays, videos, and scenario based learning about emotional intelligence and compassion, whereas the control group did not receive any intervention. The inclusion Criteria was 3rd year BSc students. Nursing students who cleared their 2nd year examination, have basic communication skills to actively engage in intervention plan activities. The exclusion criteria were 3rd year nursing students who are away or absent longer time i.e. 01 week during the course, diagnosed with psychological illness before. Individuals who have undergone previous training/certifications on compassion/emotional intelligence to ensure the ability to retain baseline level to be used with intervention evaluation. The educational process was aimed at the improvement of the emotional intelligence and compassion and included 60-minute sessions that were performed twice a week. The intervention involved some structured lectures about emotional intelligence and compassion, and the role they can play in clinical practice. Along with didactic instruction, interactive techniques like role-plays, video-based learning, and scenario-based discussions were included to promote experiential learning and the development of skills. Standardized and validated instruments were used to perform the outcome assessment. To assess emotional intelligence, the Emotional Intelligence Evaluation Scale created by Hall[7] was used and it has 30 items in five subscales, which are emotional awareness, emotion management, self-motivation, empathy, and social skills. Compassion was measured based on the Compassion Scale created by Pommier[8], comprising of 24 items divided into six sub scales: kindness, indifference, common humanity (intentional sharing), separation, mindfulness (conscious awareness) and disengagement. The two tools are found to be good in reliability with Cronbachs alpha of 0.89 in emotional intelligence and 0.85 in compassion reported in earlier validation of the two tools among the nursing students.[8,9] Pre-intervention and post-intervention data were taken and compared to the control group and experimental group to measure the impact of the educational program on the levels of emotional intelligence and compassion. SPSS version 27 was used to analyze the data. The Kolmogorov Smirnov test was used to test the normality of the data distribution. Kruskal Wallis H test was used to compare pre- and post-intervention within groups. A p-value of below 0.05 was taken to be statistically significant.

RESULTS

Most of the participants were between the ages of 18 and 22 (82.4%), which showed that the group of participants was mostly young. The percentage of males (58.3%) was slightly higher than the percentage of females (41.7%). The majority of participants were middle socioeconomic group (76.9%), nuclear families (68.5%), indicating a fairly homogenous background. On the issue of career motivation, family influence was the most frequently used reason (36.1%) then the personal interest (22.2%) and the need to be employed early (19.4%). These results show that socio-demographic variables as well as external factors are influential in determining career decisions by nursing students. (Table 1)

Table 2 demonstrates statistically significant differences among the pre-intervention, control, and experimental groups for both emotional intelligence and compassion scores. For emotional intelligence, a significant difference was observed (p=0.007). The experimental group showed higher mean scores (3.43±0.61) compared to the control group (3.06±0.64), indicating a positive effect of the intervention. Although the pre-intervention mean was higher (4.05±0.82), the post-intervention improvement in the experimental group relative to the control group suggests the effectiveness of the educational program. Similarly, for the Compassion Scale, a statistically significant difference was found (p=0.015). The experimental group achieved the highest mean score (4.02±1.13), exceeding both the pre-intervention (3.33±0.53) and control group scores (3.05±0.62).

Table No. 1: Sociodemographic characteristics of study participants (n=108)

Variable	Category	No.	%
Age (years)	18-22	89	82.4
	23-27	16	14.8
	28-32	3	2.7
Gender	Male	63	58.3
	Female	45	41.7
Family type	Nuclear	74	68.5
	Extended	34	31.5
Socioeconomic status	Lower class	18	16.6
	Middle class	83	76.9
	Upper class	7	6.4
Reason for Choosing Nursing	Family wish	39	36.1
	Personal interest	24	22.2
	Quick profession	21	19.4
	Job availability	18	16.6
	Health-related field	3	2.7
	To serve humanity	3	2.7

Table No. 2: Overall mean difference and score comparison of control and experimental groups with Kruskal–Wallis Test

Components	Groups	Size	Score	Mean±SD	Sig (*p*-value)
Emotional Intelligence	Pre-Intervention	N = 108	121.64	4.05±0.82	0.007
	Controlled	N = 54	70.31	3.06±0.64	
	Experimental	N = 54	185.57	3.43±0.61	
Compassion Scale	Pre-Intervention	N = 108	80.01	3.33±0.53	0.015
	Controlled	N = 54	73.31	3.05±0.62	
	Experimental	N = 54	120.57	4.02±1.13	

Overall, these findings indicate that the structured educational intervention significantly improved both emotional intelligence and compassion among nursing students compared to the control group.

DISCUSSION

The current research has shown that a well-designed education program had a significant positive effect on the emotional intelligence and compassion levels in nursing students. The results indicated statistically significant difference between groups in emotional intelligence (p=0.007) and compassion (p=0.015) with high mean scores being recorded in the experimental group compared to the control group. The findings emphasize the usefulness of specific educational interventions in improving the key psychosocial skills needed in patient-centered care. The high level of improvement in compassion that was found in this study is in line with the recent literature. One study done in Iran found out that empathy-based educational intervention led to significant increase in compassion among nursing students and both cognitive and affective elements of empathy were significantly improved after the intervention.[10]

Equally, Xue et al[11] showed that professionalism, empathy, and humanistic care skills among nursing students were significantly enhanced through structured compassion-focused training, compared to controls, supporting the importance of educational interventions in cultivating compassionate care. Such results are consistent with the present research since the intervention group demonstrated a greater level of compassion which proves the effectiveness of structured training in the development of empathetic interaction in clinical practice. In terms of emotional intelligence, this study has found the same results as the other studies conducted in this area that show that educational and simulation-based interventions are effective in improving emotional intelligence in nursing students. The group of Arrogante et al[12] showed large improvements in emotional attention, clarity, and regulation after high-fidelity simulation training, which makes the role of experiential learning in the development of emotional skills a priority. Ko et al[13] discovered that structured interventions yielded durable emotional competence improvement over time and the effect was significant at the follow-up assessments. These results can be compared to those of the current study, in which the experimental group exhibited much greater emotional intelligence scores than the control group, which proves the beneficial influence of planned educational programs. Moreover, our findings are backed by the fact that a strong connection was

observed between emotional intelligence and decreased stress, burnout, and compassion fatigue among health care workers. Filipponi et al[14] found out that the better emotional intelligence, the less compassion fatigue and better coping strategies, which corresponds to the protective nature of emotional intelligence in clinical practice. This highlights the need to incorporate emotional intelligence training in nursing programs to improve professional abilities, as well as, psychological health. The results of this research indicate that the intervention was especially effective in improving cognitive and behavioral levels of compassion and emotional intelligence. Learning approaches such as role-play, scenario learning, and interactive sessions could have led to better self-awareness, empathy, and emotional regulation of the participants. These results reinforce the importance of incorporating experiential and student-centered learning approaches in nursing education.

CONCLUSION

The systematic learning program greatly enhanced emotional intelligence and compassion in nursing students. Experimental scores were greater than control ones, which evidenced the adequacy of specific educational tools to promote the main competencies in empathetic and patient-centered care.

Author's Contribution:

Concept & Design or acquisition of analysis or interpretation of data:	Syeda Aatika Batool, Madiha Mukhtar
Drafting or Revising Critically:	Syeda Aatika Batool, Azeem Kaleem
Final Approval of version:	All the above authors
Agreement to accountable for all aspects of work:	All the above authors

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