

## EMOTIONAL INTELLIGENCE AND CONTEXTUAL PERFORMANCE AMONG NURSING PROFESSIONALS IN JOS METROPOLIS, PLATEAU STATE, NIGERIA

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### Abstract

*One of the factors that affect contextual performance in the modern business environment is emotional intelligence. The linkage between emotional intelligent and contextual performance in organizations in Nigeria (especially the health sector) is yet to be fully studied. This study examined the impact of Emotional Intelligence components on the contextual performance of nursing professionals in Jos metropolis. The study employed survey research design and relied on primary data. Schutte's Self Emotional Intelligence Scale (SEIS) and Koopman's Individual Work Performance Scale (IWPS) was employed in the data collection from a sample of 300 nursing professionals using Bartlett, Kotrlik & Higgins (2001) sample size table. Pooled Ordinary Least Squares (OLS) multiple regression technique of data analysis was employed and the study found that emotional social-awareness, emotional self-awareness, and emotional management have an insignificant positive impact on the contextual working performance of nursing professionals in Jos metropolis. While emotional self-management, emotional empathy, emotional social-skills, and emotional awareness have significant statistical positive impact on the contextual working performance of nursing professionals in Jos metropolis at 99% confidence level. The study concludes that trait based model of emotional intelligent is applicable to nursing practice and nursing practice requires empathetic skills as trigger for contextual performance. The study also concludes that emotional intelligent competencies are significantly important in nursing practice and have positive significant relationships with contextual performance, especially with particular regard to empathy, self-management, social-skills and awareness. The study recommends that the management and policy-makers in the service industry (especially Nursing profession) should adopt the trait-based components of emotional intelligent examined in this study so as to enhance contextual performance of their staff. It is also recommended that management should include emotional intelligence competencies in testing prospective employees.*

**Keywords:** Emotional Intelligence, Contextual Performance, Nursing Professional

## **1. Introduction**

Emotional intelligence (EI) as a concept has begun to gain popularity since Goleman wrote the book entitled “Emotional Intelligence” in 1995. EI can be acclaimed to be of psychological background even though it has gradually formed close ties with key management areas. EI has as one of its premises that emotional responses may be logically consistent or inconsistent with particular beliefs about emotion. Relatively pure emotional reactions such as instances of happiness or fear displayed early in infancy may involve relatively little cognition; these probably are best evaluated as adaptive or maladaptive. But as the person develops increasingly complex representation of situations, his or her emotional reactions may merge with more complex thoughts to develop such cognitively saturated emotions as guilt or regret. Moreover, the person may develop sophisticated internal modules that include standards of emotional functioning. These emotional reactions and models can be assessed according to their logical consistency, and hence their ‘intelligence’ (Mayer & Salovey, 1997). Worthy of note is the impact EI is said to have on human services which are sometimes called “direct person-related jobs” (Goleman, 1998; Mcpheat, 2010). Some of these occupations include counselling, social work, nursing and teaching. These are jobs whose primary task is to modify the clients physically or psychologically. In human services, knowledge, skills, motivation of employees, working conditions, expectations and behaviour of the customer create the service delivery process.

The performance of human service occupations especially nursing is inherent to strain and emotions (due to interactions with clients in a bid towards solving physical or psychological problems), which may lead to sense of stress. Basically, stress results from the customers’ behaviour (sometimes demanding and aggressive) and complaints. Stress may also result from poor work conditions, particularly lack of control (autonomy), poor social relations and lack of social support, lack of rewards, work overload (particularly too many tasks), or routine. The ability of these nurses to adapt to the work process and fulfil their obligations to clients could affect the performance on the job if the service process is a manageable experience. It may also create zeal to go beyond the required basic performance on the job and lead to the nurse finding ways of adding value to the expected tasks. One aspect of this value addition to main tasks is the requirement to express positive emotions towards clients; soothing and encouraging, working as a team, being open to criticism and keeping negative emotions away in the course of the service delivery process of which it is believed that EI could also play a key role.

In Nigeria, recent years have witnessed the swift movement towards globalization and competitiveness among organizations thereby creating a need for emotionally competent officers in these organizations to tackle the shifts and competitiveness and contend with situations however cumbersome they may be. The Nigerian health care sector is yet to explore the extent of applicability of the concept of EI especially to nursing professionals who are saddled with the responsibility of caring for sick clients with various physical and or psychological conditions which implies the heavy presence of emotions in the service delivery process. As such the purpose of this probe is to examine the relationship emotional intelligence has with contextual performance of the nurses under study. EI is operationalized in terms of self-awareness, self-management, emotional awareness, emotional management, empathy, social awareness and social skills. Performance is also operationalized in terms of task performance, contextual performance, adaptive performance and counter work behaviour. Contextual performance can be defined as behaviours that support the organizational, social, and psychological environment in which the technical core must function. Behaviours used to describe contextual performance include, for example demonstrating effort, facilitating peer and team performance, cooperating, and communicating (Koopmans, Bernards, Allard &

Henrica, 2013). This study shall be concerned mainly with the contextual aspect of performance with specific regards to team performance.

## **2. Literature Review**

### **2.1 Concept of Emotional Intelligence**

The pioneers of EI posited that problem solving and wise decision making required both thought and feelings or logic and intuition. They further asserted that certain individuals possess the ability to carry out sophisticated information processing of emotions and use the emotions as a guide for thinking and behaving more effectively than others (Husin, Santos, Ramos & Nordin, 2013; Saeed & Rabiee, 2013). The facts of everyday life; when inspected critically indicate that a man has not some amount of one kind of intelligence, but varying amounts of different intelligences. His ability to think with numbers may be great; his ability to think with words small. He may be a successful student of history and a failure at learning physics. No man is equally intelligent for all sorts of problems. Intelligence varies according to the life situations on which it works. For ordinary practical purposes, however, it suffices to examine for three "intelligences," which we may call mechanical intelligence, social intelligence, and abstract intelligence. By mechanical intelligence is meant the ability to learn to understand and manage things and mechanisms such as a knife, gun, mowing - machine, automobile, boat, lathe, piece of land, river, or storm. By social intelligence is meant the ability to understand and manage men and women, boys and girls to act wisely in human relations. By abstract intelligence is meant the ability to understand and manage ideas and symbols, such as words, numbers, chemical or physical formulae, legal decisions, scientific laws and principles, and the like (Thorndike, 1920).

According to Goleman (1996), rational intelligence is not enough to succeed in life, evidence of which is the fact that emotional intelligence rather than intelligence quotient has recently captured the public's attention. Studies today have shown that indeed EI is cognitive and as crucial for success as other types of intelligence (Goleman, 1995; Goleman, 1998). Research has also shown that IQ is no longer considered a good predictor of how effective an employee will be in work and life, rather suggesting that EI is a better predictor in determining employee outcomes such as authentic leadership, Organizational Productivity, management of job stress and mental health (Kiyani, Saher, Saleem & Iqbal, 2013; Lindebaum, 2013; Yusoff, Khan & Azam, 2013; Rangrazian, Ghorbanshiroodi & Khalatbari, 2014).

#### **2.1.1 Contextual Performance**

Often it is not sufficient to comply with the formal job requirements; hence the need to go beyond what is formally required. Contextual performance consists of behaviour which supports the organizational, social and psychological environment so that the technical core is enhanced for optimal performance. Contextual performance is different from task performance as it includes activities that are not formally part of the job description. It indirectly contributes to an organization's performance by facilitating task performance. Borman & Motowidlo (1997) enumerate five categories of contextual performance which include volunteering for activities beyond a person's formal job requirements, persistence of enthusiasm and application when needed to complete important task requirements, assistance to others, following rules and prescribed procedures even when it is inconvenient and openly defending organization objectives. Other examples of contextual performance are demonstrating extra effort, following organizational rules and policies, helping and cooperating with others, or alerting colleagues about work-related problems (Borman & Motowidlo, 1997; Motowidlo & Schmit, 1999).

In the past, contextual performance was conceptualized and measured in numerous ways. On a very general level, these different conceptualizations can be identified that aim at the effective functioning of an organization as it does at a certain time ('stabilizing' contextual performance), and proactive behaviours which intend to implement new and innovative procedures and processes in an organization, thus changing the organization ('proactive' contextual performance). The 'stabilizing' contextual performance comprises organizational citizenship behaviour (OCB) (Organ, 1988), and some aspects of pro-social organizational behaviour (Brief & Motowidlo, 1986). Discretionary means that the behaviour is not enforceable and not part of the formal role in terms of the person's contract with the organization, but these contextual performance behaviours lead to better fulfilment of specific job duties (Hasan, Altinoz & Cakiroglu, 2011; Hamidizadeh, Baramond & Latifi, 2012). Furthermore, Organ (1988) explains that not every single discrete instance of OCB is expected to make a difference in organizational outcomes, but that the aggregate promotes the effective functioning of an organization (Organ, 1988). The more 'proactive' view on contextual performance includes concepts such as personal initiative (Olugbenga, 2014), taking charge (Affandi & Riza, 2013), and proactive behaviour (Crant, 1995; Oge & Damar, 2013).

### **2.1.2 Emotional Intelligence and Contextual Performance**

Emotional intelligence is a multi-dimensional concept that links emotion and cognition to improve human interactions. It has been linked to improved workplace behaviour and specifically team behaviour and team performance and even organizational productivity (Sahdat, Sajjad, Farooq & Rehman, 2011). As emotional intelligence is critical to high performance, a person who knows how to stay motivated under stress, motivate others, manage complex interpersonal relationships, his/her others and build teams who are recognized specialists on a product or service are likely to get will get better results (Goleman, 2005; Lindebaum, 2013). According to Mayer, Salovey & Caruso (2000), outcomes which relate to the work such as job performance may be affected by emotional intelligence. Goleman (1995, 1998) believes that the prediction of emotional intelligence for individuals is successful life and work. Due to the influence of emotional intelligence on each aspect of individuals' work life, high-level possessed emotional intelligence employees are considered as "star performers". Majority of previously done probes have support for the relationship between these two variables, namely emotional intelligence and job performance (Cavallo & Brienza, 2002; Law, Wong & Song, 2004). These studies collectively agree that EI enhances performance through self-motivation to do what needs to be done with all required dedication. They all assert that individuals with high EI are confident in their ability to perform and they are able to overcome obstacles that they may come across as they go about performing their duties.

In recent research, it was found that team performance is positively and significantly influenced if team is able to recognize emotions of teammates (Stough, Saklofske & Parker, 2009) and in addition, recognition of these emotions reduces burnout (Saadati, Nikbakhsh & Afarinesh, 2014). One of the greatest challenges faced by organisations especially service based ones include coping with constant change (Guy, Newman & Ganapati, 2013), being more creative (Shatalebi, Sharifi, Saeedian & Javadi, 2011; Gignac, Karatamoglou, Wee & Palacios, 2014), managing vast amounts of information (Lin, Kannappan & Lau, 2012), obtaining and retaining the right kind of people, increasing customer loyalty and improving cooperation. According to Cherniss & Goleman (1998), emotional intelligence plays a vital role in satisfying these requirements. These high EI employees are said to have a high sense of loyalty to their organizations and tend to find ways to add value to the service delivery process. They easily work in groups and teams; thereby ultimately increase performance and productivity.

## **2.2 Theoretical Framework**

There are two predominant models of EI addressed in the literature the Ability Model (Mayer & Salovey, 1997) and Mixed or Trait-based Model (Goleman, 1995). The ability model is represented by Mayer and Salovey who view emotional intelligence as an actual domain of intelligence composed of specific emotional and mental abilities (Mayer & Salovey, 1997) and defined it as ‘the ability to perceive and express emotion, assimilate emotion in thought, understand and reason with emotion and regulate emotion in self and others’. Ability EI pertains primarily to the realm of cognitive ability, which is accordingly most appropriately measured by performance tests. The latter, mixed or trait-based model, takes a narrow approach to EI combining emotional abilities with elements of personality, motivation, and social skill (Goleman, 1998). This model is derived from his definition of EI as “the capacity for recognizing our own feelings and those of others, for motivating ourselves and for managing emotions well in ourselves and in our relationships”. This type of EI pertains to the realm of personality which can be assessed by self-report questionnaire (Schutte, 1998). It is now generally acknowledged that trait EI and ability EI are different constructs. This study shall align itself with the trait model of EI due to the fact that it is a personality based study. The study is not keen on seeing EI from the cognitive point of view but more as a personality based construct, especially due to the population and specific problem the study intends to solve. Also, trait EI theory has been found to connect the EI construct to mainstream research in nursing (Quoidback & Hansenne, 2009).

The study has one hypothesis postulated to guide the study:

H<sub>0</sub>: Emotional Intelligence has no significant impact on Contextual Performance of nursing professionals in Jos Metropolis, plateau State, Nigeria

## **3.0 Methodology**

### **3.1 Research Design**

This research employed a survey design due to the fact that the researcher has no control over the independent variables that determine the value of the dependent variable. The researcher can only control the measurement for the study, but does not interfere with the research settings. The unit of analysis of this study was individual due to the nature of the study. This shall involve identifying the EI competencies which will be displayed by nursing professionals in managing their daily work and investigating if and how these EI competencies influenced their job satisfaction and work performance.

### **3.2 Population and Sampling**

The population of this study was made up of nursing professionals in the teaching missionary and government hospitals within Jos metropolis of Plateau State which include Jos University Teaching Hospital (JUTH), Bingham University Teaching Hospital (BUTH), Our Lady of Apostles Hospital (OLA) and Plateau State Specialist Hospital. The choice of the population is as a result of the fact that those are the health care centres that enjoy the most patronage by patients. These are the hospitals that are likely to be stressful for human service employees to work in. Sample size of nursing professionals was drawn from the population using the Bartlett, Kotrlik & Higgins (2001) table. The nursing population of these hospitals in Jos metropolis is 1,487 as drawn from the records of nurses in the hospitals under study. The sample size as drawn from the table is 300.

The questionnaire distribution is presented in Table 1 as follows;

**Table 1: Response Rate of the Questionnaire**

Response rate of questionnaire	Frequency (%)
Number of copies of Questionnaire distributed	400
Number of copies returned	368
Number of valid copies returned	300
Number of copies not returned	32
Excluded returned copies	68
Response rate	92%
Valid response rate	75%

Source: Field work, 2015

### 3.3 Data Collection

The current study has Emotional Intelligence operationalized on a trait based measurement hence the use of a trait based measure. The EI questionnaire and the individual work performance scale were presented on a five point Likert Scale (1strongly agree to 5 strongly disagree).

**Emotional Intelligence-** The instrument which was used to assess the group was Schutte’s Emotional Intelligence Scale (SEIS), which is a 33-item self-report questionnaire to assess trait Emotional Intelligence (Schutte, 1998). This scale has questions 5, 28 and 33 scored in the reverse. Based on both empirical and conceptual grounds, item 33 (“it is difficult for me to understand why people feel the way they do”) was eliminated from the original SEIS resulting in a 32-item scale. The assessment was carried out on the basis of a 5-point Likert Scale (Schutte, 1998).

**Contextual Performance** was evaluated using the individual working performance questionnaire (IWPQ) so as to test contextual performance (Koopmans, Bernards, Allard & Henrica, 2013). The IWPQ measures task performance, contextual performance, adaptive performance and counterproductive work behaviour and is usually presented on a five point Likert Scale. This study shall make use of the contextual performance component of the questionnaire. It shall be used to test the performance of the professionals especially within the context of the behaviours that enhance the kind of service they render.

### 3.4 Measurement Type and Operationalization of Variables

For the purpose of data analysis, the Cronbach’s alpha measures how well a set of items (or variables) measures a single uni-dimensional latent construct. When data have a multidimensional structure, Cronbach’s alpha will usually be low. To determine the reliability, Cronbach’s coefficient alpha was used so that the instruments reliability is measured. Cronbach’s alpha of < 0.70 signifies unreliability of the instrument. SPSS Version 20 software was used for processing the data using selected data analysis technique which for this study was regression analysis.

**Table 2: Showing Reliability of the Questionnaires for Data Collection**

Instrument	No. of items	Cronbach's Alpha
Self-Assessment Emotional Intelligence Scale	32	0.778
Individual Work Performance Scale	16	0.876

Source: Field Work, 2015

### 3.5 Technique of Data Analysis and Model Specification

In this research, pooled Ordinary Least Squares (OLS) multiple regression technique of data analysis is adopted. The OLS regression technique of data analysis is employed because the aim of the technique is to examine relationships among the theoretically related variables, as well as the estimation of the impact of independent variable(s) on the dependent variable. This is consistent with the objective of this study, which is the evaluation of the impact of emotional intelligent (EI) on the contextual performance of nursing professionals in Jos metropolis. However, to determine the impact of emotional intelligent (EI) on the contextual performance of nursing professionals in Jos metropolis the following multiple regression model is estimated;

$$WP_i = \gamma_0 + \gamma_1 SA_i + \gamma_2 SM_i + \gamma_3 E_i + \gamma_4 SS_i + \gamma_5 EA_i + \gamma_6 SOA_i + \gamma_7 EM_i + \mu_i \dots \dots \dots i$$

Where;

- WP<sub>i</sub> = contextual work performance of i<sup>th</sup> respondent
- SA<sub>i</sub> = emotional self-awareness of i<sup>th</sup> respondent
- SM<sub>i</sub> = emotional self-management of i<sup>th</sup> respondent
- E<sub>i</sub> = emotional empathy of i<sup>th</sup> respondent
- SS<sub>i</sub> = emotional social-skills of i<sup>th</sup> respondent
- EA<sub>i</sub> = emotional awareness of i<sup>th</sup> respondent
- SOA<sub>i</sub> = emotional social awareness of i<sup>th</sup> respondent
- EM<sub>i</sub> = emotional management of i<sup>th</sup> respondent

$\gamma_0$  is the intercept,  $\gamma_1, \gamma_2, \gamma_3, \gamma_4, \gamma_5,$  and  $\gamma_6$  are the coefficients and  $\mu_i$  is the error term/disturbances.

### 4.0 Results and Discussions

This section presents and discusses the results obtained from the tests conducted on the data collected for the study. The section begins with the description of the data collected for the study and then the inferential statistics.

#### 4.1 Descriptive Statistics

The descriptive statistics of the data collected for the study is presented in Table 2;

**Table 3: Descriptive Statistics**

Variables	Min.	Max.	Mean	SD	Skewness	Kurtosis	N
WP	1.56	4.56	3.24	0.51	0.105	0.846	300
SA	1.79	4.50	3.45	0.46	-0.510	0.586	300
SM	1.60	5.00	4.06	0.71	-0.904	0.996	300
E	1.71	5.00	3.41	0.58	-0.163	0.227	300
SS	2.00	4.50	3.28	0.50	0.134	-0.294	300
EA	1.00	5.00	2.67	0.97	0.422	-0.441	300
SOA	1.00	5.00	3.31	0.88	-0.530	0.075	300
EM	1.60	4.20	3.07	0.46	0.525	1.077	300

Source: SPSS Output (Appendix)

The descriptive statistics Table 3 indicates that the average contextual performance as measured by individual working performance (WP) among nursing professionals in Jos metropolis is 3.24 with standard deviation of 0.51, and minimum and maximum values of 1.56 and 4.56 respectively. The standard deviation implying that the data deviate from the both sides of mean by 0.51 suggesting that the data for the WP is not widely dispersed among the respondents. The coefficient of skewness of 0.105 suggests that the data is positively skewed and did not comply with the symmetrical distribution assumption. Similarly, the coefficient of kurtosis of 0.846 also implies that the data did not follow the normal distribution assumption. The table also indicates that the average emotional self-awareness (SA) among nursing professionals in Jos metropolis is 3.45 with standard deviation of 0.46, and minimum and maximum values of 1.79 and 4.50 respectively. The standard deviation implying that the data deviated from both sides of mean by 0.46 suggesting that the data is not widely dispersed among the respondents. The coefficient of skewness of -0.510 suggests that the data is negatively skewed and did not follow the symmetrical distribution assumption. Similarly, the coefficient of kurtosis of 0.586 also implies that the data did not follow the normal distribution assumption.

Table 3 indicates that the average emotional self-management (SM) among nursing professionals in Jos metropolis is 4.06 with standard deviation of 0.71, and minimum and maximum values of 1.60 and 5.00 respectively. The standard deviation implying that the data deviate from the both sides of mean by 0.71 suggesting that the data for the SM is not widely dispersed among the respondents. The coefficient of skewness of -0.904 suggests that the data is positively skewed and did not comply with the symmetrical distribution assumption. Similarly, the coefficient of kurtosis of 0.996 also implies that the data did not follow the normal distribution assumption. The table also indicates that the average emotional empathy (E) among nursing professionals in Jos metropolis is 3.41 with standard deviation of 0.58, and minimum and maximum values of 1.71 and 5.00 respectively. The standard deviation implying that the data deviated from both sides of mean by 0.58 suggesting that the data is not widely dispersed among the respondents. The coefficient of skewness of -0.163 suggests that the data is negatively skewed and did not follow the symmetrical distribution assumption. Similarly, the coefficient of kurtosis of 0.227 also implies that the data did not follow the normal distribution assumption.

Table 3 also indicates that the average emotional social skills (SS) among nursing professionals in Jos metropolis is 3.28 with standard deviation of 0.50, and minimum and maximum values of 2.00 and 4.50 respectively. The standard deviation implying that the data deviate from the both sides of mean by 0.50 suggesting that the data for the SS is not widely dispersed among the respondents. The coefficient of skewness of 0.134 suggests that the data is positively skewed and did not comply with the symmetrical distribution assumption. Similarly, the coefficient of kurtosis of -0.294 also implies that the data did not follow the normal distribution assumption. Table 3 shows that the average emotional awareness (EA) among nursing professionals in Jos metropolis is 2.67 with standard deviation of 0.97, and minimum and maximum values of 1.00 and 5.00 respectively. The standard deviation implying that the data deviated from both sides of mean by 0.97 suggesting that the data is widely dispersed among the respondents. The coefficient of skewness of 0.422 suggests that the data is positively skewed and did not follow the symmetrical distribution assumption. Similarly, the coefficient of kurtosis of -0.441 also implies that the data did not follow the normal distribution assumption.

Also, Table 3 shows that the average emotional social awareness (SOA) among nursing professionals in Jos metropolis is 3.31 with standard deviation of 0.88, and minimum and maximum values of 1.00 and 5.00 respectively. The standard deviation implying that the data deviated from both sides of mean by 0.88 suggesting that the data is not widely dispersed



among the respondents. The coefficient of skewness of -0.530 suggests that the data is negatively skewed and did not follow the symmetrical distribution assumption. Similarly, the coefficient of kurtosis of 0.075 also implies that the data did not follow the normal distribution assumption. Table 3 also indicates that the average emotional management (EM) among nursing professionals in Jos metropolis is 3.07 with standard deviation of 0.46, and minimum and maximum values of 1.60 and 4.20 respectively. The standard deviation implying that the data deviated from both sides of mean by 0.46 suggesting that the data is not widely dispersed among the respondents. The coefficient of skewness of 0.525 suggests that the data is negatively skewed and did not follow the symmetrical distribution assumption. Similarly, the coefficient of kurtosis of 1.077 also implies that the data did not follow the normal distribution assumption.

#### 4.2 Correlation Results

The correlations of the variables of the study are presented in Table 4 as follows;

**Table 4: Correlation Matrix**

Var	WP	SA	SM	E	SS	EA	SOA	EM
<b>WP</b>	1.0000							
<b>SA</b>	0.161 (0.005)	1.000						
<b>SM</b>	0.427 (0.000)	0.177 (0.002)	1.000					
<b>E</b>	0.598 (0.000)	0.173 (0.003)	0.479 (0.000)	1.000				
<b>SS</b>	0.409 (0.000)	0.125 (0.031)	0.321 (0.000)	0.304 (0.000)	1.000			
<b>EA</b>	0.693 (0.000)	0.071 (0.222)	0.181 (0.002)	0.463 (0.000)	0.272 (0.000)	1.000		
<b>SOA</b>	0.168 (0.004)	0.868 (0.000)	0.110 (0.056)	0.154 (0.008)	0.155 (0.007)	0.099 (0.088)	1.000	
<b>EM</b>	0.030 (0.599)	0.007 (0.905)	0.052 (0.370)	0.091 (0.115)	0.043 (0.459)	-0.049 (0.398)	0.051 (0.376)	1.000

*P-values (2-tailed) in Parenthesis*

*Source: SPSS Output (Appendix)*

The correlation result in table 4 presents the results of the relationship between the components of emotional intelligent (EI) and the contextual performance of nursing professionals in Jos metropolis. The table shows that there is a significant statistical positive relationship between emotional self-awareness (SA) and the contextual performance of nursing professionals in Jos metropolis, from the correlation coefficient of 0.161, which is statistically significant at 1% level of significance (p-value 0.005). This implies that as emotional self-awareness increases, contextual performance of nursing professionals' likely increases proportionately. Results also show that there is a significant statistical positive relationship between emotional self-management (SM) and the contextual performance of nursing professionals in Jos metropolis, from the correlation coefficient of 0.427, which is statistically significant at 1% level of significance (p-value 0.000). This also implies that as emotional self-management increases, contextual performance of nursing professionals' likely increases proportionately.

Similarly, the table indicates that there is a significant statistical positive relationship between emotional empathy (E) and the contextual performance of nursing professionals in Jos metropolis, from the correlation coefficient of 0.598, which is statistically significant at 1% level of significance (p-value 0.000). This implies that as emotional empathy increases, contextual performance of nursing professionals' likely increases proportionately. The result

also shows that there is a significant statistical positive relationship between emotional social skills (SS) and the contextual performance of nursing professionals in Jos metropolis, from the correlation coefficient of 0.409, which is statistically significant at 1% level of significance (p-value 0.000). This implies that as emotional social skills increases, contextual performance of nursing professionals' likely increases proportionately. Moreover, the table shows that there is a significant statistical positive relationship between emotional awareness (EA) and the contextual performance of nursing professionals in Jos metropolis, from the correlation coefficient of 0.693, which is statistically significant at 1% level of significance (p-value 0.000). This further implies that as emotional awareness increases, contextual performance of nursing professionals' likely increases proportionately.

The table shows that there is a significant statistical positive association between emotional social-awareness (SOA) and the contextual performance of nursing professionals in Jos metropolis, from the correlation coefficient of 0.168, which is statistically significant at 1% level of significance (p-value 0.004). This implies that as emotional self-awareness increases, contextual performance of nursing professionals' likely increases proportionately. Lastly, results also show that there is a positive relationship between emotional management (EM) and the contextual performance of nursing professionals in Jos metropolis, from the correlation coefficient of 0.030, which is not statistically significant at all levels of significance (p-value 0.599). This implies that as emotional self-management increases, contextual performance of nursing professionals' likely increases proportionately, but is not statistically significant.

#### **4.3 Regression Results and Hypotheses Testing**

In this section, the hypothesis formulated for the study is tested; the section begins with the discussion of the regression model as presented in table 5;

**Table 5: Regression Model Summary**

<b>Variables</b>	<b>Statistics</b>	<b>P-Value</b>
<b>R</b>	0.794	
<b>R Square</b>	0.631	
<b>Adj. R Square</b>	0.622	
<b>F-Static</b>	71.387	0.000
<b>DW</b>	1.900	
<b>Highest VIF</b>	4.24	
<b>Smallest TV</b>	0.236	

*Source: SPSS Output (Appendix)*

The regression results in table 5 indicates that there is a strong significant relationship between the components of emotional intelligent (EI) and the contextual performance of nursing professionals in Jos metropolis, from the coefficient of multiple regression (R value of 0.794). The results from table 5 indicate that the explanatory variables (SA, EM, E, SS, EA, SOA and EM) of the study explained 62.2% of the total variations in the dependent variable, contextual working performance of nursing professionals in Jos metropolis during the period of the study, from the coefficient of multiple determinations (adjusted R square of 0.622). The table also shows that the model of the study is fit at 1% level of significance as indicated by the F-Statistic of 71.387 with the P-value of 0.000.

The results on the other hand show the absence of perfect multicollinearity among the independent variables, because the highest Variance Inflation Factor (VIF) is 4.241, while the smallest Tolerance Value is 0.236. A VIF of 10 and above is an indication of perfect multicollinearity among the regressors, while a TV of 0.1 and below implies a perfect multicollinearity. Although, the data is not a time-series, the Durbin-Watson (DW) d-statistic of 1.900 indicates the absence of autocorrelation, that is the successive error terms are

independent as required by the classical regression assumption. Therefore, based on the fitness of the results, the hypothesis of the study is tested in the following section.

#### 4.4 Hypotheses Testing

In this section, the hypothesis formulated is tested to draw conclusions about the impact of the components of emotional intelligent (EI) and the contextual performance of nursing professionals in Jos metropolis. Table 6 present the regression coefficient for the analysis;

**Table 6: Regression Coefficients**

Variables	Coefficients	T-Values	P-values
CONSTANT	0.735	3.057	0.002
SA	0.007	0.100	0.920
SM	0.176	4.182	0.000
E	0.224	4.919	0.000
SS	0.136	3.496	0.001
EA	0.518	12.601	0.000
SOA	0.034	0.469	0.640
EM	0.019	0.514	0.607

Source: SPSS Output (Appendix)

The results in table 5 shows that the emotional self-awareness (SA) has positive impact on the contextual performance of nursing professionals in Jos metropolis, from the coefficient of 0.007, with t-value of 0.100 which is not statistically significant at all levels of significance (p-value 0.920). This implies that as emotional self-awareness increases, contextual performance of nursing professionals' likely increases proportionately, but the results lack statistical significance. Table 5 shows that emotional self-management (SM) has significant statistical positive impact on the contextual performance of nursing professionals in Jos metropolis, from the coefficient of 0.176, with t-value of 4.182, which is statistically significant at 1% level of significance (p-value 0.000). This suggests that emotional self-management significantly affect contextual performance of nursing professionals in Jos positively.

The table indicates that emotional empathy (E) has significant positive impact on the contextual performance of nursing professionals in Jos metropolis, from the coefficient of 0.224, with t-value of 4.919, which is statistically significant at 1% level of significance (p-value 0.000). This implies that emotional empathy significantly affect contextual performance of nursing professionals in Jos metropolis in a positive direction. Table 4 also shows that emotional social skills (SS) has significant statistical positive impact on the contextual performance of nursing professionals in Jos metropolis, from the coefficient of 0.136, with t-value of 3.496 which is statistically significant at 1% level of significance (p-value 0.001). This implies that emotional social skills have significantly improved contextual work performance of nursing professionals in Jos metropolis during the period under review. Moreover, the table shows that emotional awareness (EA) has significant statistical positive impact on the contextual performance of nursing professionals in Jos metropolis, from the coefficient of 0.518, with t-value of 12.601 which is statistically significant at 1% level of significance (p-value 0.000). This suggests that emotional awareness significantly improve contextual work performance of nursing professionals in Jos metropolis during the period covered by the study.

The table shows that emotional social-awareness (SOA) has an insignificant positive impact on the contextual performance of nursing professionals in Jos metropolis, from the coefficient of 0.034, with t-value of 0.469 which is not statistically significant at all levels of significance (p-value 0.640). This implies that emotional self-awareness have not influenced contextual working performance of nursing professionals in Jos Metropolis during the period under review. Lastly, Table 4 shows that emotional management (EM) has an insignificant positive

impact on the contextual work performance of nursing professionals in Jos metropolis, from the coefficient of 0.019, with t-value of 0.514 which is not statistically significant at all levels of significance (p-value 0.607). This suggests that emotional management have not significantly improved the contextual working performance of nursing professionals in Jos Metropolis during the period under review.

The analysis of the coefficient of the components of emotional intelligent (EI) in relation to contextual working performance of nursing professionals in Jos metropolis indicates that emotional social-awareness (SOA), emotional self-awareness (SA), and emotional management (EM) have an insignificant positive impact on the contextual working performance of nursing professionals in Jos metropolis. However, the analysis provides evidence of significant statistical positive impact of emotional self-management (SM), emotional empathy (E), emotional social-skills (SS), and emotional awareness (EA) on the contextual working performance of nursing professionals in Jos metropolis at 99% confidence level (1% significance level). Based on this evidence, the study rejects the null hypothesis which states that emotional intelligent has no significant impact on the contextual working performance of nursing professionals in Jos metropolis. The study therefore infers that emotional intelligent (in terms of emotional self-management, emotional empathy, emotional social-skills, and emotional awareness) has significantly impacted on the contextual working performance of nursing professionals in Jos metropolis during the period covered by the study.

### **5.1 Summary of Findings**

Results of this study have shown significant links between these trait based components of EI and contextual performance. Empathy, which is clearly a personality based attribute, has been found to be very significant for nursing professionals in contextual performance of their nursing duties. In summary this study provides evidence to show support for significant relationship between EI and contextual performance of nursing professionals.

### **5.2 Theoretical Contributions**

This study found empirical evidence for the trait/mixed model of emotional intelligence which takes a narrow approach to EI combining emotional abilities with elements of personality, motivation, and social skill (Goleman, 1998).

Results of this study have shown significant links between these trait based components of EI and contextual performance especially within the context of team work. Self Management, Empathy and Emotional Management, all personality based attributes have been found to be very significant attributes of nursing professionals with significant impact on the dependent variable through adequate empirical evidence.

### **5.3 Managerial/Policy Contributions**

This study has brought to bear the exact components of EI relevant for nurses in the hospitals studied. This gives direction for management of these hospitals on how to invest in training nursing professionals on Emotional Intelligence since it has been found to be relevant for nursing practice, especially in the areas of Self Management, Empathy and Emotional Management. This study has given a direction on how hospital management can ensure that they coach nurses on the impact that working as a group with others without bickering can impact on their individual work performance.

#### **5.4 Limitations**

This study was not without some limitations. A limitation of the study was the use of self-report perceptual measures in assessing the study. This increased chances of biases of respondents. There may have been likelihood of respondents to tailor their responses towards what they perceive to be the expected response rather than state the obvious.

An obvious limitation of the study is the fact that the population was limited to Jos metropolis which suggests the results may not be generalized in larger context across the cultures of other countries and business environments which may give a different result on the relationship between EI and contextual performance.

#### **5.5 Conclusion**

Based on empirical findings, this study concludes that there is significant relationship between Emotional Intelligence and employee Contextual Performance. Conclusion being drawn is to the fact that EI competences are very relevant to the service sector especially nursing practice and that when imbibed can in no small measure impact on the contextual performance of nursing professionals. It is also concluded that the trait based model of EI is applicable to nursing practice as has been confirmed by this study.

#### **5.6 Recommendation for Future Research**

It is recommended that studies should be carried out in this area using measures other than self-reporting measures of assessing the variables under study. This will reduce biases in assessment and may likely give more reliable data on EI of respondents. Future research may also cover higher populations covering diverse geo-political regions so that results of the study can be generalized to being applicable all over.

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