

## The relationship between the use of media and emotional intelligence among youth nursing students.

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**Abstract:** The use of media among adolescence is gaining a lot of interest. The relationship between media use and emotional intelligence has not been investigated. This study aims to explore the relationship between media use and emotional intelligence. Results of the study revealed a positive relationship between the total time spent using media and emotional intelligence. However, emotional intelligence was only related to the type of media device used. Therefore, it can be concluded that adolescent resort to media as a way to deal with stressors. These stressors come from many aspects in their lives among which is the academic or faculty stressors. Consequently, Faculty administration and academic staff must work on developing strategies that helps decreasing academic stressors. Additionally, academic counseling is encouraged to help students develop adaptive coping capacity and to educate them about safe use of media.

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### I. Introduction

Adolescence is a very challenging developmental stage it has been frequently portrayed as a period of storm and stress. Youth definition has been reported by the united nation as: "the young people with the age ranging between 15 to 24 years old" ("General Assembly Resolutions, A/RES/62/126, 2008. Definition of Youth. United Nation", 2008). Thus in this paper the word youth and adolescence will be used interchangeably. There are many positive aspects for Youth and adolescence as they succeed in school, are attached to their families, and survive serious troubles as substance abuse. Yet, these positive aspects have been overlooked by professionals. Relevant literature is centered around issues such as depression, suicide, drug abuse, violence and delinquency, risk taking behaviors, learning disabilities, emotional disturbances, sexual disorientation, poor family dynamics, financial and economic issues, the neighborhood influences, school failure and dropping out, faith institution, technology as computer and media use (APA, 2002).

According to the literature, mass media includes print and electronic media. Print media refers to newspapers and magazines. While electronic media refers to television, radio, video games, music videos and the internet (Amadeo, 1998). Recently, media use has gained a lot of interest since adolescents are its principle consumers. It is estimated that youth and adolescents spend 6 to 8 hours per day exposed to some form of media (APA, 2002).

Generally speaking, the use of media is seen as a double edged sword having both positive and negative impacts on this group. It makes the youth and adolescents weak in real life skills, takes them away from reality, helps living in fantasy, decreases interpersonal interactions, diminishes outdoor activities, creates violence in their mind due to violent games, increases anxiety levels wanting to achieve game targets, distracts them from study, alters their lifestyle, time management and eating habits, causes addiction and psychiatric disorders as depression, bipolar disorder, obsessive compulsive disorder and attention deficit disorder (Muduli, 2014).

A study in Chicago had reported that the youth use social networking sites like Facebook, Twitter and Instagram to brag about violence, make threats, recruit gang members and to plan criminal activity known as Internet banging (Patton, Eschmann, Elsaesser, & Bocanegra, 2016). Other literature had reported that adolescents who used social media more and those who were more emotionally invested in social media experienced poorer sleep quality, lower self-esteem and higher levels of anxiety and depression (Woods & Scott).

On the other hand, media use improves strategic thinking and investigating skills, creativity. It makes learning a more fun experience and it helps sitting in one place for a period of time which may be beneficial for some degree of hyperactive adolescents. It also maintains eye-hand-mental coordination, improves engineering

skills, builds positive attitudes towards life obstacles as they learn they can be overcome, facilitates social networking and global interconnectedness. In addition, it improves cognitive thinking and multitask mastering (Muduli, 2014). Patton et al, (2016) found evidence that social media enhances crisis intervention work in violent neighborhoods when coupled with close, trusting relationships with youth (Patton, Eschmann, Elsaesser, & Bocanegra, 2016). Furthermore, the social media use is related to an increase in cognitive and affective empathy over time. Specifically, adolescents' social media use improved both their ability to understand (cognitive empathy) and share the feelings of their peers (affective empathy) (Vossen & Valkenburg, 2016).

Salovey and Mayer (1990) had described emotion intelligence as "a type of social intelligence that involves the ability to monitor one's own and other's emotions, to discriminate among them, and to use this information to guide one's thinking and actions" (Salovey P, Mayor JD, & D, 2002). Ionnidou (2008) referred to it as the ability to control one's wishes and to postpone their fulfillment, to regulate others' mood, to isolate feeling from thinking, to place you into another's shoes and to hope. Simply, it is the process of regulating both feelings and expressions (Ioannidou & Konstantikaki, 2008). Emotional intelligence is a concept symbolized by the abbreviation EQ (Emotional Intelligence Quotient). It includes skills such as being able to control the impulse, to curb the impatience, to properly regulate mood and to prevent the frustration, to stifle the ability to think, to have empathy and hope (Petrides & Furnham, 2000).

The available literature suggests a relationship between emotional intelligence and coping. For instance A systematic review reported that emotion intelligence is associated with better coping strategies (Resurreccion, Salguero, & Ruiz-Aranda, 2014). It was also reported that emotional intelligence is related to and can predict coping among university students (Moradi, Pishva, Ehsan, Hadadi, & Pouladi). Additionally a study reported that emotional intelligence was related to coping styles focused on solving the problem, positive reassessment, avoidance, and seeking social support as religion. The relationship between coping and media was also investigated. One study reported that adolescents resort to electronic media to adapt with poor sleep or as a sleep aid (Yaqoot Fatima, 2017). Another study found that social media use by adolescents has also been found to contribute to adolescent-parent conflicts leading to change in interactional patterns and sometimes to suicide (Shah, Chauhan, Gupta, & Sen, 2016). Only one study investigated the relationship between emotion intelligence and media. This study revealed that individuals with different EI levels have the most tendencies to interactive media and they have the least tendencies to non-interactive media (Mallekian & Khazaei, 2012).

In nursing, emotional intelligence (EI) is seen essential for nursing administration and the nurse-patient relationship. It is important for building successful nursing leadership, enhancing nursing performance and reducing nurse burnout. Also, in the nurse-patient relationship, it is in the core of the nursing practice as it has an effect on clinical decision-making and critical thinking (BARKHORDARI & ROSTAMBEYGI, 2013). It was found that nurses with higher EI contribute to a higher-performance, a more harmonious workplace and better patient care (Bakr & Safaan, 2012), (Choudary, 2010). Consequently, emotional intelligence of nursing students and their use of social media must be investigated.

### **Aim of the study**

This study aims to explore the relationship between use of media and emotional intelligence among youth nursing students.

### **Research questions**

Is there a relationship between use of media and emotional intelligence among youth nursing students.

### **Operational definition**

Media in this study refers to electronic media only.

Emotional intelligence refers the ability to control one's wishes and to postpone their fulfillment, to regulate others' mood, to isolate feeling from thinking, to place you into another's shoes and to hope. Simply, it is the process of regulating both feelings and expressions.

## **II. Materials And Method**

### **Materials**

#### **Study design**

This study utilized a descriptive design.

#### **Setting**

Data was collected from the Faculty of Nursing which is one of the faculties of the higher education system of Alexandria University. The Faculty of Nursing has obtained national accreditation twice among very few Faculties of the Alexandria University. The last accreditation was granted in 2016. The Faculty of Nursing provides bachelor degree as well as master and doctorate degrees. The bachelor level receives 4 years of basic education followed by an intern ship year in the University Hospitals. The program follows the credit hours system and gives the students a flexible schedule. In 2016, the total number of students was 1714 students.

## **Subjects**

In this study the target population was the students in the youth and adolescence period. Sample size was estimated using Epi Info program based on 10% acceptable error, 95% confidence coefficient, 50% expected frequency and population size of 1714. The program revealed a minimum sample size to be 275 students. A total number of 280 sheets were distributed to the students based on random selection from a list of student names. 95 students refused to participate and 53 students did not complete all the items of the sheet so they were excluded from the study leaving a final number of 112 sheets who actually were included in the study.

## **Tools**

The tools of the study included

Tool I: The socio-demographic data, media and computer use. It comprised questions about sex, age, semester of studying, who they live with and how they chose nursing education and the type of stressors they encounter.

Tool II: Media and computer use sheet. This sheet was developed by the researcher after review of literature (APA, 2002)(Muduli, 2014). This sheet included questions about the type of media device the student possessed, the reason for use, the number of hours of media and computer use, age of start using them, the number of devices possessed, the advantages and draw backs of media and computer use from the youth and adolescents' perceptions. The tool showed an acceptable internal consistency where Chronbach Alpha = 0.76

Tool III: The Schutte Self-Report Emotional Intelligence Test (SSEIT)

It was developed by Schutte et al. (1998)<sup>(11)</sup>, the SSEIT measures EI based on self-report responses to 33 items within them there are three negatively worded items. These three items (5, 28, and 33) were included in the scale in order to reduce response bias. The scale is grouped under seven subscales; which are the appraisal and expression in others' emotions (items 5, 15, 18, 25, 29, 32, 33), Appraisal of Emotions in the Self (items 9, 22), Emotional Expression (items 1, 11), Emotional Regulation of the Self (items 2, 3, 12, 14, 23, 28, 31, 10), Emotional Regulation of Others (items 4, 13, 16, 24, 30), Utilization of Emotions in Problem Solving (items 7, 17, 20, 27) and uncategorized (items 6, 8, 19, 21, 26). Participants responded by indicating their agreement with each of the 33 statements using a five-point likert scale ranging from 1 (Strongly disagree) to 5 (Strongly agree). The scores ranged from 33 to 165. Emotional intelligence was considered to be high if the percent score was 75% or more and low if less than 75%. It was found that the total scores on the SSREI had acceptable internal consistency (e.g., .90; Schutte et al., 1998). In the present study the SSREI has good internal consistency ( $\alpha = 0.907$ ).

## **Method**

1. Approval from the Research and Ethical committee at the Faculty of Nursing was obtained.
2. Tool I and II was developed by the authors.
3. Tools III was translated into Arabic then back translation was done.
4. A jury composed of three experts in nursing research has reviewed the study tools for face validity.
5. A pilot study was done on 20 nursing students to examine the feasibility and acceptability of the scales.
6. The subjects of the study were selected randomly using pen drop from a list obtained from students' affairs.
7. Students were contacted to schedule time to participate on the study either between lectures or in their breaks.
8. Informed consent was obtained from the students. And their anonymity and privacy was assured.
9. The study tools were distributed on the students and then they were collected from them.
10. The sheets collected from the students were revised for missing data and returned to the students for completion if possible.
11. Statistical analysis was done by SPSS (v20).
12. Data were analyzed descriptively to obtain means, standard deviation, number and percentage. Then bivariate analysis was done using Fisher's exact test, Chi square and t-test. Multivariate analysis was done using ANOVA.
13. Data will be preserved for two years in a safe locker.

## **Ethical consideration**

Students were informed by the aim of the study and only students who willingly accepted to participate in the study were given the questionnaire. Those students were told that their participation will remain anonymous and confidentiality of the data was assured. They were assured that willingness to participate or refraining from participation in the study will not affect their studies in any mean.

### III. Results

Table (1) shows the characteristics of the faculty of nursing students involved in the study. It is noticed that 30.4% of the studied subjects were 20 years old, 66.1% were females, 76.8% lived in Alexandria, 27.7% were in the first semester, 66.1% had secondary school education and 63.4% reported that they chose the faculty by their free will.

**Table 1:** Characteristics of the study sample (N=112)

Demographic data		Count	%
Age	18	5	4.5
	19	14	12.5
	20	34	30.4
	21	31	27.7
	22	16	14.3
	23	12	10.7
Gender	Male	38	33.9
	Female	74	66.1
Residence	Alexandria	86	76.8
	Other	26	23.2
Lives with	Relatives	81	72.3
	Friends	20	17.9
	University accommodation	7	6.3
	Alone	4	3.6
First semester	1	31	27.7
	2	21	18.8
	3	8	7.1
	4	30	26.8
	5	3	2.7
	6	16	14.3
	7	1	.9
	8	2	1.8
Last qualification certificate	High school	74	66.1
	High institute of nursing	24	21.4
	Technical health institute	11	9.8
	Nurse institute five years	3	2.7
College choice	With my desire.	71	63.4
	With total	13	11.6
	The Coordination Office	16	14.3
	Pressure from family	8	7.1
	Advice from a friend	4	3.6

Table (2) shows the type of stressors faced by the faculty of nursing students and their used method for coping. Thus it can be noticed that 73.2% of the studied students had stressors due to their faculty studies. About their third reported that there were difficulties in the scientific subject matter (32.1%) and that there were difficulties in dealing with the doctors and the professors (30.4%). Also, a quarter (25%) reported that they were in stress due to accommodation issues because they relocated for university study and 22.3% reported that they have financial issues. Additionally, 38.4% reported that they cope with these stressors by praying and reading Quoran, 31.3% reported that they cope to stressors by talking to a relative or a friend face to face and 23.2% reported that they cope to stressors by trying to think how to solve their problems.

**Table (2):** The type of stressors faced by the faculty of nursing students and their used method for coping.

		Count	%
Feeling pressured by College	Yes	80	73.2
	No	30	26.8
Perceived Stressors	No stressors	30	26.8
	Subject matter	36	32.1
	Language of instruction (English)	11	9.8
	Dealing with professors and lecturers	34	30.4
	Dealing with lecturer assistants	22	19.6
	Dealing with students affairs	24	21.4
	Dealing with academic leaders	5	4.5
	Dealing with students in same term	5	4.5
	Dealing with students in higher terms	2	1.8
	Dealing with colleagues opposite sex	5	4.5
	Academic book	10	8.9
Other perceived stressors	No other stressors	51	45.5
	Housing alienation	28	25.0
	Family problems	12	10.7
	Economic problems	25	22.3
	Chronic health condition	2	1.8
	Acute health condition	6	5.4
	Chronic psychological condition	9	8.0
Acute psychological condition	7	6.3	
Dealing with stress	Face to face interaction	35	31.3
	Talking to a relative or a friend over phone	10	8.9
	Talking to a friend or a relative using social media	13	11.6
	Using computer and media to get busy	12	10.7
	Watching television.	5	4.5
	Listening to music	15	13.4
	Playing computer games	4	3.6
	Do internet search for my problem	5	4.5
	Write a poem/story/diary	9	8.0
	Isolate self to cry	9	8.0
	Isolate self doing nothing	7	6.3
	Pray to god and read Quoran	43	38.4
	No talking and more work	9	8.0
Play sports	8	7.1	
Try to think along the problem for solution	26	23.2	

Table (3) shows the description of the studied students according to the media and computer use tool. The table illustrates that in the 6<sup>th</sup> grade throughout to 1<sup>st</sup> senior year, 76.9% of the students started to use a cellular phone, 51.6% of them started using social media, 58% of them started to listen to music and 52.9% of them started playing computer games. Yet, 66.7% of them watched TV before 6<sup>th</sup> grade and 69.6% of them started using the internet and the computer for their studies at 2<sup>nd</sup> senior year throughout to university. The table also shows that about third (33.9%) of the studied students used computer and media for a duration ranging

between 1-2 hours per day. The table also shows that 69.6% of the students had a computer or laptop, 40.2% had a smart phone, and half of the students had a TV or a radio, a cell phone, and a Bluetooth device or ear piece.

**Table (3):** The description of the studied students according to the media and computer use.

	Media use	Count	%
Mobile phone	<6 <sup>th</sup> grade	2	3.1
	6 <sup>th</sup> grade to <high school	50	76.9
	High school to University	13	20.0
Tv/cable	<6 <sup>th</sup> grade	24	66.7
	6 <sup>th</sup> grade to <high school	11	30.6
	High school to University	1	2.8
Internet and social media	<6 <sup>th</sup> grade	1	1.6
	6 <sup>th</sup> grade to <high school	32	51.6
	High school to University	29	46.8
Listening to music	<6 <sup>th</sup> grade	6	12.0
	6 <sup>th</sup> grade to <high school	29	58.0
	High school to University	15	30.0
Computer for games and entertainment	<6 <sup>th</sup> grade	14	27.5
	6 <sup>th</sup> grade to <high school	27	52.9
	High school to University	10	19.6
Computer and Internet for study	<6 <sup>th</sup> grade	3	5.4
	6 <sup>th</sup> grade to <high school	14	25.0
	High school to University	39	69.6
Total time spent using media	Less than an hour.	15	13.4
	1- < 2 hours.	38	33.9
	2- < 4 hours.	21	18.8
	4 - < 6 hours.	13	11.6
	6 hours an-d more.	25	22.3
Number of Owned computer/laptop	0	26	23.2
	1	78	69.6
	2-3	8	7.2
Number of Owned tablets	0	91	81.3
	1	21	18.8
Number of Owned iPhone/iPad	0	103	92.0
	1	8	7.1
	2	1	.9
Number of Owned Smartphone	0	64	57.1
	1	45	40.2
	2-3	3	2.7
Number of Owned mobile	0	43	38.4
	1	67	59.8
	2	2	1.8
Number of Owned ear/headset/Bluetooth	0	55	49.1
	1	51	45.5
	2	6	5.4
Number of Owned radio/TV	0	34	30.4
	1	65	58.0
	2-more	13	11.7
Number of Owned MP3	0	89	79.5
	1	22	19.6
	2	1	.9

Table (3) continued shows the description of the studied students according to the media and computer use tool. This table illustrates the reasons that motivate the studied students to use computer and media and revealed that the motive of communication with others was reported by 78.6% of them for cell phone and by 60.7% of them for messaging, the motive of leisure/entertainment was reported by 86.6% of them for TV and by 83.9% of them for listening to music, also, 34.8% of the studied students reported that social media and internet could be used for all motives i.e., communication with others, leisure/entertainment and for study as well. This table also shows the perceived benefits and risks of computer and media use by the studied students. The table revealed that 85.7% of the students perceived that computer and media use has benefits and 76.8% of them perceived that there are risks.

The perceived benefits included obtaining more knowledge (59.8%), communication with friends and relatives (58%), and help in study (42%). The perceived risks included waste of time (60.7%), health problems (25.9%) and openness to pornography (20.5%).

**Table (3) continued:** The description of the studied students according to the media and computer use tool.

Reasons for using media	Count	%	
Reason to use the phone	Not sure	3	2.7
	To study	4	3.6
	To relate to others	88	78.6
	For entertainment	4	3.6
	All the above	13	11.6
Reasons for phone texting	Not sure	14	12.5
	To study	9	8.0
	To relate to others	68	60.7
	For entertainment	14	12.5
	All the above	7	6.3
Reasons to watch TV	Not sure	5	4.5
	To study	4	3.6
	To relate to others	4	3.6
	For entertainment	97	86.6
	All the above	2	1.8
Reasons to use social media	Not sure	3	2.7
	To study	14	12.5
	To relate to others	40	35.7
	For entertainment	16	14.3
	All the above	39	34.8
Reasons to listen to music	Not sure	10	8.9
	To study	1	.9
	To relate to others	4	3.6
	For entertainment	94	83.9
	All the above	3	2.7
Reason to use computer/labtop	Not sure	8	7.1
	To study	30	26.8
	To relate to others	18	16.1
	For entertainment	27	24.1
	All the above	29	25.9
There are benefits for using media	Yes	96	85.7
	no	16	14.3
Perceived benefit	More knowledge	67	59.8
	Communication with others	65	58.0
	Studying	47	42.0
	Escaping stress	1	.9
	Entertainment	18	16.1

	Communication with faculty	4	3.6
	Watching videos/movies	5	4.5
	Reading books	1	.9
	Translation	1	.9
There are risks for using media	Yes	86	76.8
	No	26	23.2
Perceived risks	Waste of time	68	60.7
	Health problems	29	25.9
	Openness to pornography	23	20.5
	Detachment from family/relatives	5	4.5

Table (4) shows the descriptive analysis of the studied subjects according to emotion intelligence scale. The total mean of the SSET was 123.3(18.37). The scores on the SSET ranged between 55 to 275. These scores were statistically split to high (for scores ranging from 203 to 275), moderate (129 – 202) and low (55 -128). The table reveals that 66% of the studied subjects fell in the low emotional intelligence category while no one fell in the high emotional intelligence category.

**Table (4):** The descriptive analysis of the studied subjects according to emotion intelligence scale.

	Mean(SD)	Mean Percent Maximum Score as of	Coefficient of Variation Percent
SSET1 Appraisal and expression in others' emotions	24.2(3.97)	69.0%	16.4%
SSET2 Appraisal of emotions in the self	7.3(1.77)	72.6%	24.4%
SSET3 Emotional expression	7.2(1.91)	72.1%	26.5%
SSET4 Emotional regulation of the self	30.9(5.26)	77.3%	17.0%
SSET5 Emotional regulation of others	19.5(3.62)	78.0%	18.6%
SSET6 Utilization of emotions in problem solving	15.7(3.09)	78.5%	19.7%
SSET7 Uncategorized items	18.5(3.34)	74.1%	18.0%
SSETT Total Score	123.3(18.37)	74.7%	14.9%
Range	55 to 275	N(%)	
High	203 to 275	0(0%)	
Moderate	129 to 202	46(41.1%)	
Low	55 to 128	66(58.9%)	

Table (5) shows the relationship between demographic data of the faculty of nursing students and the type of media device used. It illustrates that there was only a positive relationship between the type of device used (group 1: computer, tablet and phones), and group 2: (ear piece and bluetooth) with the academic semester of the students, where  $FET = 26.77, p < 0.05$ .



**Table (5)** shows the relationship between demographic data of the faculty of nursing students and the type of media device used.

		Media devices								FET	P
		Computer, Tablet, Iphone, Smart phone		Ear piece, Blue Tooth, MP3, TV		3 Both groups		Total			
		Count	%	Count	%	Count	%	Count	%		
Age	18	0	0.0	1	20.0	4	80.0	5	100.0	9.244 0.509	
	19	2	14.3	1	7.1	11	78.6	14	100.0		
	20	0	0.0	5	14.7	29	85.3	34	100.0		
	21	2	6.5	4	12.9	25	80.6	31	100.0		
	22	2	12.5	1	6.3	13	81.3	16	100.0		
	23	2	16.7	3	25.0	7	58.3	12	100.0		
Gender	Male	4	10.5	3	7.9	31	81.6	38	100.0	2.252 0.324	
	Female	4	5.4	12	16.2	58	78.4	74	100.0		
Lives with	Relative	5	6.2	12	14.8	64	79.0	81	100.0	3.054 0.802	
	Friends	2	10.0	3	15.0	15	75.0	20	100.0		
	University accomodation	1	14.3	0	0.0	6	85.7	7	100.0		
	Alone	0	0.0	0	0.0	4	100.0	4	100.0		
Semester	1	1	3.2	8	25.8	22	71.0	31	100.0	26.477 0.022	
	2	2	9.5	2	9.5	17	81.0	21	100.0		
	3	0	0.0	1	12.5	7	87.5	8	100.0		
	4	1	3.3	3	10.0	26	86.7	30	100.0		
	5	0	0.0	1	33.3	2	66.7	3	100.0		
	6	3	18.8	0	0.0	13	81.3	16	100.0		
	7	1	100.0	0	0.0	0	0.0	1	100.0		
	8	0	0.0	0	0.0	2	100.0	2	100.0		
Last degree certificate	High school	6	8.1	10	13.5	58	78.4	74	100.0	2.456 0.873	
	Nursing institute	2	8.3	3	12.5	19	79.2	24	100.0		
	Technical health institute	0	0.0	1	9.1	10	90.9	11	100.0		
	5 years nursing institute	0	0.0	1	33.3	2	66.7	3	100.0		

Table 6 shows the relationship between the time spent using media, and the type of stressors, the type of the media device, and the students reported way of coping. The table shows that there was a relationship between the type of stressors and the time spent using media. The table shows that 84.6% of those who reported having stressors in their relationship with authority figure at the faculty spent 4 to <6 hours per day using computer and media, while 53.8% of those who reported having academic stressors spent 4 to <6 hours per day using computer and media. Also 50% of those who reported having academic stressors spent 2 to <4 hours per day using computer and media. These relationships were statistically significant (FET= 34.66, p= .004). There was no statistical significant relationship between the type of device used and the time spent using computer and media (FET= 7.935, p> .05). The table additionally shows the relationship between the way of coping and the time spent using computer and media where 46.7% of those who reported that they cope to stressors by talking to someone face to face, spent less than one hour using computer and media. Moreover, 76.9% of those who reported that they cope to stressors by talking to someone over the phone, spent 4 to <6 hours per day using computer and media. Furthermore, 65.8% of those who reported that they cope to stressors by watching television, spent 1 to <2 hours using computer and media. These relationships were statistically significant (FET= 48.05, p= .002)

**Table (6):** the relationship between the time spent using media devices, and the type of stressors, the type of the media device, and the students reported way of dealing with stress.

		Total time spent using media											FET P	
		Less than one hour		1-<2 hours		2-<4 hours		4-<6hours		6 hours or more		Total		
		Count	%	Count	%	Count	%	Count	%	Count	%	Count		%
stressors	No stress	4	26.7	14	36.8	8	38.1	0	0.0	4	16.0	30	26.8	34.66 0.004
	Educational stressors	9	60.0	19	50.0	7	33.3	7	53.8	8	32.0	50	44.6	
	Relations with faculty authority figures	4	26.7	12	31.6	7	33.3	11	84.6	15	60.0	49	43.8	
	Relations with peers	2	13.3	1	2.6	1	4.8	2	15.4	2	8.0	8	7.1	
	1 Computer, Tablet, Ip Smart phone	2	25.0	2	25.0	1	12.5	2	25.0	1	12.5	8	100.0	7.935 0.381
	2 Mobile, Ear phones, Blue Tooth, MP3, TV	3	20.0	8	53.3	2	13.3	0	0.0	2	13.3	16	100.0	
	3 Both groups	10	11.2	28	31.5	18	20.2	11	12.4	22	24.7	89	100.0	
	Total	15	13.4	38	33.9	21	18.8	13	11.6	25	22.3	112	100.0	
Dealing with stressors	0	1	6.7	3	7.9	1	4.8	0	0.0	3	12.0	8	7.1	48.05 0.002
	Face to face interaction	7	46.7	11	28.9	8	38.1	6	46.2	11	44.0	43	38.4	
	Isolate the self to cry	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
	Isolate self doing nothing	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
	Pray to god and read Quoran	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
	No talking and more work	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
	Plays sports	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
	Try to think along the problem for solution	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
	Talking to a relative or a friend over phone	2	13.3	6	15.8	6	28.6	10	76.9	13	52.0	37	33.0	
	Talking to a friend or a relative using social media	2	13.3	14	36.8	9	42.9	4	30.8	6	24.0	35	31.3	
	Using computer and media to get busy	1	6.7	4	10.5	4	19.0	1	7.7	6	24.0	16	14.3	
	Watching TV	8	53.3	25	65.8	9	42.9	5	38.5	6	24.0	53	47.3	
	Listening to music	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
	Playing computer games	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
	Do internet search for my problem	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	
Write a poem/story/diary	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0		
Total	15	100.0	38	100.0	21	100.0	13	100.0	25	100.0	112	100.0		

Table 7 shows the relationship between the time spent using media, and the perceived benefits and risks of the use of media, and the year of starting using social media. It can be noticed from the table that there is a no statistical significant relationship between the perceived benefits and risks, and the time spent using computer and media (FET= 45.94, p>0.05) for the benefits and (FET= 17.09, p>0.05)for the risks. However, there was a statistical significant relationship between the year of starting using social media and the time spent using computer, media where (FET= 16.85, p<0.05) where 48.3% of those who started using social media during second secondary school to university level of education used computer and media for 1 to < 2hours per day

**Table (7):** The relationship between the times spent using media, and the perceived benefits and risks of the use of media, and the year of starting using social media.

		Total time spent using media												P $\chi^2$
		Less than one hour		1-<2 hours		2-<4 hours		4-<6hours		6 hours or more		Total		
		Count	%	Count	%	Count	%	Count	%	Count	%	Count	%	
Benefits for using social media	None	3	20.0	5	13.2	2	9.5	2	15.4	4	16.0	16	14.3	45.94 0.239
	More knowledge	8	53.3	22	57.9	14	66.7	11	84.6	12	48.0	67	59.8	
	Communication with others	7	46.7	27	71.1	14	66.7	7	53.8	10	40.0	65	58.0	
	Studying	5	33.3	15	39.5	14	66.7	2	15.4	11	44.0	47	42.0	
	Escaping stress	0	0.0	1	2.6	0	0.0	0	0.0	0	0.0	1	.9	
	Entertainment	1	6.7	5	13.2	5	23.8	1	7.7	6	24.0	18	16.1	
	Communication with faculty	1	6.7	2	5.3	0	0.0	0	0.0	1	4.0	4	3.6	
	Watching videos/movies	0	0.0	2	5.3	0	0.0	0	0.0	3	12.0	5	4.5	
	Reading books	0	0.0	0	0.0	1	4.8	0	0.0	0	0.0	1	.9	
	Translation	0	0.0	0	0.0	1	4.8	0	0.0	0	0.0	1	.9	
Perceived risks for using social media	0	4	26.7	7	18.4	3	14.3	4	30.8	8	32.0	26	23.2	17.09 0.647
	Waste of time	7	46.7	26	68.4	15	71.4	6	46.2	14	56.0	68	60.7	
	Health problems	5	33.3	13	34.2	6	28.6	2	15.4	3	12.0	29	25.9	
	Openness to pornography Detachment from family/relatives	3 1	20.0 6.7	10 3	26.3 7.9	4 1	19.0 4.8	2 0	15.4 0.0	4 0	16.0 0.0	23 5	20.5 4.5	
Using internet and social media	<6 <sup>th</sup> grade	0	0.0	0	0.0	0	0.0	1	100	0	0.0	1	100.0	16.85 0.032
	6 <sup>th</sup> grade to <high school	3	9.4	10	31.3	4	12.5	6	18.8	9	28.1	32	100.0	
	High school to University	3	10.3	14	48.3	9	31.0	2	6.9	1	3.4	29	100.0	
	Total	6	9.7	24	38.7	13	21.0	9	14.5	10	16.1	62	100.0	

Table 8 the relationship between emotion intelligence and the type of media device used. The table shows that emotion intelligence as measured by the SSET total score was related to the type of device used with statistical significant difference  $F= 3.326, p<0.05$ . Also, the SSET Emotional regulation of others subscale showed a statistical significant relation  $F= 3.676, p<0.05$ ; and for the SSET Utilization of emotions in problem solving subscale  $F= 3.617, p<0.05$ .

**Table (8):** The relationship between emotion intelligence and the type of media device used.

	Media devices used								F	Sig.
	Computer, Tablet, Iphone, Smart phone (n=8)		Mobile, phones, Tooth, MP3, TV (n=15)		Ear Blue Both groups (n=89)		Total (n=112)			
	Mean	St Dev	Mean	St Dev	Mean	St Dev	Mean	St Dev		
SSET1 Appraisal and expression in others' emotions	21.88	3.523	24.40	4.154	24.33	3.954	24.16	3.970	1.442	0.241
SSET2 Appraisal of emotions in the self	6.00	2.070	7.07	1.944	7.40	1.690	7.26	1.774	2.464	0.090
SSET3 Emotional expression	6.13	2.475	7.53	1.807	7.26	1.868	7.21	1.915	1.542	0.219
SSET4 Emotional regulation of the self	28.00	6.928	29.93	5.574	31.36	5.005	30.93	5.264	1.832	0.165
SSET5 Emotional regulation of others	17.00	5.043	18.20	3.028	19.93	3.467	19.49	3.622	3.676	0.029
SSET6 Utilization of emotions in problem solving	13.13	4.518	15.20	3.364	16.02	2.808	15.71	3.092	3.617	0.030
SSET7 Uncategorized items	17.00	4.840	17.13	2.295	18.91	3.264	18.54	3.337	2.822	0.064
SSETT Total SSET Score	109.13	27.839	119.47	18.966	125.21	16.797	123.29	18.366	3.326	0.040

Table 9 shows the relationship between emotion intelligence and the total time spent using media. This table illustrates that there is no relation between emotional intelligence and the time spent using media.

**Table (9):** the relationship between emotion intelligence and the total time spent using media.

	Total time spent using media											F	Sig.	
	Less than1 hour (n=15)		(n=38) 1-<2 hours		2-<4 hours (n=21)		4-<6 hours (n=13)		6 hours or more (n=25)		Total (n=112)			
	Mean	St Dev	Mean	St Dev	Mean	St Dev	Mean	St Dev	Mean	St Dev	Mean			St Dev
SSET1 Appraisal and expression in others' emotions	22.80	4.246	25.42	3.644	24.52	3.386	23.69	3.750	23.00	4.472	24.16	3.970	2.102	0.086
SSET2 Appraisal of emotions in the self	6.73	2.187	7.79	1.695	7.57	1.859	6.77	1.589	6.76	1.451	7.26	1.774	2.171	0.077
SSET3 Emotional expression	6.73	2.314	7.71	1.887	7.14	1.769	6.85	2.230	7.00	1.607	7.21	1.915	1.084	0.368
SSET4 Emotional regulation of the self	29.20	6.961	31.74	5.239	32.57	4.178	29.77	6.002	29.96	4.247	30.93	5.264	1.538	0.196
SSET5 Emotional regulation of others	17.27	5.311	20.11	2.930	20.29	3.913	18.54	3.799	19.72	2.492	19.49	3.622	2.292	0.064
SSET6 Utilization of emotions in problem solving	13.93	4.431	16.11	2.817	16.43	2.712	15.00	2.944	15.92	2.660	15.71	3.092	1.941	0.109
SSET7 Uncategorized items	17.93	5.175	18.84	3.124	19.33	2.221	18.46	4.115	17.80	2.598	18.54	3.337	0.802	0.527
SSETT Total SSET Score	114.60	27.312	127.71	17.132	127.86	14.527	119.08	20.002	120.16	13.431	123.29	18.366	2.153	0.079

#### **IV. Discussion**

This study aimed to investigate the relationship between emotional intelligence and the use of media among nursing students. In contrast to our assumption, Emotional intelligence had no relation with the total time spent using media (table 9). In line with that, one study found that there is no meaningful difference between the people with high and low emotional intelligence to the types of educational media (Mallekian & Khazae). Contrary, in the present study, EI total score, the emotional regulation of others, and the utilization of emotion in problem solving subscales were significantly related to the type of media device used (table 8). In this last finding it was observed that the means of EI for those students using devices such as Mobile, Earphones, Bluetooth, MP3 and TV were consistently higher than those using Computer, Tablets, I-phones or Smart phones. This indicates that EI declines when using Computer, Tablets, I-phones or Smart phones, or that people with higher EI refrain from using Computer, Tablets, I-phones or Smart phones. It is also possible that the students, who tend to use these devices, have difficulty relating to others and have difficulty to regulate emotion of others, thus they resort to these devices to avoid human interactions. This may be supported by findings in table 3 where the students reported that the reason for using phones and social media ,(usually through tabs and labtops) was to relate to others, (thus they use cyberspace instead of real world interaction). TV and music were mostly used for entertainment and computers were equally used for studying and entertainment. Another possible interpretation is that the use of these devices exhausts the youth and adolescent mentally and emotionally leaving him unable to attend to other people's emotions. furthermore, it was reported in the literature that youth and adolescents use the cyberspace as an outlet for their emotions (Merwe, 2013).

The social media use is related to an increase in cognitive and affective empathy over time. Specifically, adolescents' social media use improved both their ability to understand (cognitive empathy) and share the feelings of their peers(affective empathy) (Vossen & Valkenburg, 2016). Another study indicated that there was a positive and significant relationship between prosocial video game use and the following dependent variables: cooperation and sharing, the tendency to maintain positive affective relationships as well as empathy (Harrington & O'Connell, 2016).

The total time spent using media was significantly related to the type of stressors that the students faced. It was also related to the students' reported way of coping (table 6).

One surprising finding concerning emotional intelligence is that when the EI scale was presented categorically as high moderate and low, none of the studied subjects were in the high EI category (table 4). Literature concerning emotional perception in nursing students reported that emotional intelligence may increase over time through nursing education (Foster et al., 2017). Therefore, nursing curricula throughout the 8 nursing semesters should include EI. Additionally, it may be beneficial to conduct EI workshops to increase the EI of the students. Also, longitudinal research study to explore the progress of nursing students' EI may be necessary. The importance of including EI in nursing curricula addresses the competencies required by nursing students to become efficient in their career (Benson, Ploeg, & Brown, 2010).

It is also noted from this study findings that the students' perception of benefit or risks of using media did not relate to the total time spent using media (table 7). It is possible that this age group tends to go through the experience by themselves and do not tend to accept advice or guides or imposed instructions. Their autonomy and self-confidence implies that they have control over their own acts and they can control their behaviors as they want. Another possible explanation is the tendency of some of the studied students to use media as a way to cope with stressors. This is supported by finding that some of the students' reported ways of coping with stress were related to the total time spent using media (table 6).

Recently, social media use among youth and adolescent does not only serve for social and entertainment, but also it started to play major roles in learning. Thus, there is literature that supports the use of social media so as to foster constructive and creative learning (Lu, Hao, & Jing, 2016). It is also mentioned in the literature that social media ostracism was perceived by both university and secondary-school students as threatening to mood and psychological need fulfillment (particularly the need to belong). (R. Smith, Morgan, & Monks, 2017). Parents have a role in the monitoring of their adolescents using media. This includes physical presence in the same room as the adolescent when playing computer games, observing what adolescents are doing online, setting limits to online content, setting limits about the duration of time spent online and speak to them about cybersafety (L. J. Smith, Gradisar, King, & Short, 2016).

#### **V. Conclusion and Recommendation**

This study concluded that emotional intelligence is related to the type of device used and not to the total time spent using media. However, the total time spent using media was related to the type of stressors the nursing students have faced and their way of dealing with stressors. This study adds to the existing body of knowledge about emotional intelligence and use of media among nursing students. Thus it is recommended that in the faculty, efforts should be directed firstly towards decreasing stressors imposed on the students. Secondly, workshops should be done to tackle two areas; the improvement of emotional intelligence, the benefits and risks

of using media. In future studies, it is essential to increase sample sizes to detect age related changes concerning the studied variables and/or to use longitudinal designs.

### **VI. Limitation**

The results of this study should be studied considering the limitation of self-report surveys. It is hard to withdraw from this study finding an exact understanding of the quality of students' actual social media behavior. In the future, qualitative case studies and/or using online tracking systems for observing students' social media activities may provide specific data. It is hard to generalize the results of this study to larger populations giving the relatively small sample size. Finally, with the wide age range for the students recruited in the present study, it is hard to detect differences which may only occur early or late in youth and adolescence.

### **Reference**

- Amadeo, J.-A. M. (1998). *Music and television in late adolescence and early adulthood: An investigation of social beliefs*. University of Maryland
- .APA. (2002). *THE AMERICAN PSYCHOLOGICAL ASSOCIATION report 2002*
- Bakr, M. M., & Safaan, S. M. (2012). Emotional Intelligence: A Key for Nurses' Performance. *Journal of American Science*, 8(11), 385-393
- BARKHORDARI, M., & ROSTAMBEYGI, P. (2013). Emotional intelligence in nursing students. *Journal of Advances and Medical education & Professionalism*, 1(2), 46-50
- Benson, G., Ploeg, J., & Brown, B. (2010). A cross-sectional study of emotional intelligence in baccalaureate nursing students. *Nurse Education Today*, 30(1), 49-53
- Choudary, Y. L. (2010). Impact of the emotional intelligence on work related outcomes among the nursing staff at SRM hospitals, Chennai. *Manag. . Labour Stud*, 35(2), 227-247
- Foster, K., Fethney, J., McKenzie, H., Fisher, M., Harkness, E., & Kozlowski, D. (2017). Emotional intelligence increases over time: A longitudinal study of Australian pre-registration nursing students. *Nurse Education Today*, 55(2017), 65-70
- General Assembly Resolutions, A/RES/62/126, 2008. Definition of Youth. United Nation. (2008). <http://www.un.org/documents/resga.htm>
- Harrington, B., & O'Connell, M. (2016). Video games as virtual teachers: Prosocial video game use by children and adolescents from different socioeconomic groups is associated with increased empathy and prosocial behaviour. *Computers in Human Behavior*, 63(2016), 650-658
- V. (2008). Empathy and emotional intelligence: What is it really ,Ioannidou, F., & Konstantikaki about? *International Journal of Caring Sciences*, 1(3), 118-123
- Lu, J., Hao, Q., & Jing, M. (2016). Consuming, sharing, and creating content: How young students use new social media in and outside school. *Computers in Human Behavior*, 64(2016), 55-64
- Mallekian, F., & Khazae, M. Title: The Relationship Between Emotional Intelligence and the Tendency Rate to the Type of Educational Media in Students. *Procedia - Social and Behavioral Sciences*, 46, 3315-3311
- Mallekian, F., & Khazae, M. (2012). Title: The Relationship Between Emotional Intelligence and the Tendency Rate to the Type of Educational Media in Students. *Procedia - Social and Behavioral Sciences*, 46(2012), 3311-3315
- Adolescent Violence: The Risks and Benefits of Electronic Media Technology. (2013) .Merwe, P. v. d *Procedia - Social and Behavioral Sciences* 82(2013), 87 – 93
- Moradi, A., Pishva, N., Ehsan, H. B., Hadadi, P., & pouladi, F. The Relationship Between Coping Strategies and Emotional Intelligence. *Procedia - Social and Behavioral Sciences*, 30, 748-751
- Muduli, J. R. (2014). *Addiction to Technological Gadgets and Its Impact on Health and Lifestyle: A Study on College Students*. National Institute of Technology, Rourkela, India
- Patton, D. U., Eschmann, R. D., Elsaesser, C., & Bocanegra, E. (2016). Sticks, stones and Facebook accounts: What violence outreach workers know about social media and urban-based gang violence in Chicago. *Computers in Human Behavior*, 65, 591-600
- Petrides, K., & Furnham, A. (2000). *On the dimensional structure of emotional intelligence*. London: Department of Psychology, University College

- Resurreccion, D. M., Salguero, J. M., & Ruiz-Aranda, D. (2014). Emotional intelligence and psychological maladjustment in adolescence: A systematic review. *Journal of Adolescence*, 37(4), 461-472
- Salovey P, Mayor JD, & D, C. (2002). *The positive psychology of emotional intelligence*. New York: Oxford University Press
- Adolescent-parent conflict in the age of .(2016) .Shah, R., Chauhan, N., Gupta, A. K., & Sen, M. S .social media: Case reports from India. *Asian Journal of Psychiatry*, 23(2016), 24-26
- Smith, L. J., Gradisar, M., King, D. L., & Short, M. (2016). Intrinsic and extrinsic predictors of video gaming behaviour and adolescent bedtimes: the relationship between flow states, self-perceived risk-taking, device accessibility, parental-regulation of media and bedtime. *Sleep Medicine* (2016), <http://dx.doi.org/doi:10.1016/j.sleep.2016.01.009>
- Monks, C. (2017). Students' perceptions of the effect of social media & .Smith, R., Morgan, J ostracism on wellbeing. *Computers in Human Behavior*, 68, 276-285
- Vossen, H. G. M., & Valkenburg, P. M. (2016). Do social media foster or curtail adolescents' .study. *Computers in Human Behavior* 63(2016), 118-124 empathy? A longitudinal
- Woods, H. C., & Scott, H. #Sleepyteens: Social media use in adolescence is associated with poor .sleep quality, anxiety, depression and low self-esteem. *Journal of Adolescence*, 51, 41-49
- S. A. R., Jake M. Najman, Abdullah Al Mamun. (2017). Continuity of sleep problems ,Yaqoot Fatima from adolescence to young adulthood: results from a longitudinal study Original research .article. *Sleep Health*, 3(4), 290-295

Wafaa AbdelKader. "The relationship between media use, emotional intelligence and adaptation processing of youth in Nursing Faculty." *IOSR Journal of Nursing and Health Science (IOSR-JNHS)* , vol. 6, no. 5, 2017, pp. 63–77