Chapter 2

Review of literature

Introduction

This chapter reviews the available literature related to the nurses in the healthcare sector along with the variables under study. The research trends inter-relating the variables and establishing a relationship between the predictor and criterion is presented here. The strategies used for search is also mentioned.

The literature review focuses on the statistical information related to the growth in the hospital industry. Further, the extent of positive psychology explored in the healthcare sector will also be discussed. Then, followed by the empirical studies of positive psychological capacities (a) self-efficacy, (b) hope, (c) optimism and (d) resilience, and the criterion variables (a) emotional intelligence and (b) subjective well-being. The sample population under study that comprises of nurses along with the related positive psychology research in the nursing sector will also be presented.

The search strategy adopted for gathering the literature is described here. A systematic approach to the review of the literature was incorporated using the available database through an online medium as well as physical libraries by which information was gathered. The online resource formed a rich medium to access sources relevant to the study from scholarly, peer-reviewed research journals and books. Empirical research sources were located using Google Scholar, University repositories, Nursing researches, Pubmed, ScienceDirect, EBSCOHost, PsychINFO, PsychBOOKS, Academia, Researchgate, Springer, Open Access Digital libraries.

Keywords identified for the search strategy were healthcare, psychology, nursing, positive psychology, psychological capital, nurses, hospital industry, self-
efficacy, hope, optimism, resilience, emotional intelligence, well-being, subjective well-being, happiness.

The research literature review focused on the following areas:

**Positive Psychology research trends in Healthcare**

**Positive Psychology research trends in Nursing**

Research trends relating self-efficacy, emotional intelligence and subjective well-being

Research trends relating hope, emotional intelligence and subjective well-being

Research trends relating optimism, emotional intelligence and subjective well-being

Research trends relating resilience, emotional intelligence and subjective well-being

**Positive Psychology research trends in Healthcare**

Healthcare is one of India’s biggest industries, in terms of tax income and usage. The field has been witnessing dramatic growth in the past decade. At the time of the 1990s, the healthcare of India grew at a compounded annual rate of 16%. At present, the total rate of the healthcare sector is more than $34 billion and is likely to attain in 2016 over $75 billion and $150 billion by 2019 (NPCS Board, 2012). The Table: 1 shows the details of a number of hospitals and number of beds in the Primary Health Care Centres, Community Health Care Centres, Sub Centres, Government Rural Hospitals and Government Urban Hospitals in India.
Table 5.1
*Infrastructure of healthcare Sector with number of hospitals and beds*

<table>
<thead>
<tr>
<th></th>
<th>Number of Hospitals</th>
<th>Number of Beds</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub Centers</td>
<td>151,684</td>
<td>-</td>
</tr>
<tr>
<td>Primary Health Care Centers</td>
<td>24,448</td>
<td>-</td>
</tr>
<tr>
<td>Community Health Care Centers</td>
<td>5,187</td>
<td>-</td>
</tr>
<tr>
<td>Government Rural Hospitals</td>
<td>15,398</td>
<td>196,182</td>
</tr>
<tr>
<td>Government Urban Hospitals</td>
<td>4,419</td>
<td>432,526</td>
</tr>
</tbody>
</table>

*Source: National Health Profile 2013*

Karnataka has an improved pervasive network of health care services. The State is considered to be a pioneer in terms of public health care services, even prior to the notion of Primary Health Care Centres was considered by the Indian Government. The State had already started instituting a number of PHUs for offering ample health care facilities to its citizens (Visvesvaraya, n.d.). It follows the national outline of Government three-tier centres and its sub-centres. Along with having a great number of voluntary organisations/NGOs engaged in community health and development, service delivery, provision of health infrastructure through the health units, primary health centres, research, community health training, advocacy and networking.

Table 5.2
*The State Health Workforce across various centre*

<table>
<thead>
<tr>
<th>Particulars</th>
<th>Required</th>
<th>In Position</th>
<th>Shortfall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sub Centers</td>
<td>7396</td>
<td>8143</td>
<td>-</td>
</tr>
<tr>
<td>Primary Health Centers</td>
<td>1211</td>
<td>2195</td>
<td>-</td>
</tr>
<tr>
<td>Community Health Centers</td>
<td>302</td>
<td>323</td>
<td>-</td>
</tr>
<tr>
<td>Multipurpose worker (Female)/ANM sub-centre &amp; PHCs</td>
<td>10338</td>
<td>8028</td>
<td>2310</td>
</tr>
<tr>
<td></td>
<td>8143</td>
<td>3762</td>
<td>4381</td>
</tr>
</tbody>
</table>
The table shows the details of the State Health Workforce in Karnataka. It mentions the particulars of health care workforce in the state and the positions required for the workforce in health care sector. The report shows no shortfall in sub-centre, Doctor at PHCs, Primary Health Centre and Community Health Centre.

There has been a paucity of empirical research in the field of positive psychology considering healthcare. The main aim of positive psychology is to ensure that it enhances the well-being of the population at large. In recent years, we do witness the application of positive psychology in the area of healthcare (Macaskill, 2016).

Psychological well-being in the working place compares to inborn conditions of bliss experienced by a person that prompt life fulfilment, certainty, and sprightliness (Diener et al., 2003 and Massé et al., 1998a). It stresses the lovely passionate and subjective encounters (Diener et al., 2003 and Massé et al., 1998a). Diener et al (2003) explain that psychological well-being in the workplace portrays the individual with respect to the three viewpoints: (1) Self; (2) Participation towards work; and (3)
Contribution in his/her social setting. The first one (self) examines the individual's inner harmony that is his/her enthusiastic equalisation. The second element looks at the individual's inclusion as where he/she indicates aspiration in his/her work. The third one investigates social congruity as far as how a person keeps up great associations with his/her surroundings and how he/she is interested in what is going on around him/her (Gilbert, Dagenais-Desmarais, and Savoie, 2011).

Investigations demonstrate that arrangement of focused mediations to enhance mental well-being in the workplace promotes individual and authoritative advantages (Harter et al., 2002, Judge et al., 2001 and Lyubomirsky et al., 2005). At an individual level, people who report greater levels of psychological well-being appear to have better informal relations, more vitality, and insusceptible biased conditions (Lyubomirsky et al., 2005). At a hierarchical level, inventiveness, collaboration, nature of work (Lyubomirsky et al., 2005), singular execution (Judge et al., 2001) and authoritative efficiency (Harter et al., 2002) are improved. The potential effect which includes the empowerment given by the position of authority serves as an advantage in the nursing sector and also their patients.

Lisa, Heather, Arthur, Sandra, Carol, (2015) conducted a research about the influence of personal and workplace resources on new graduate nurses' job satisfaction. The main objective of this study is to inspect the influence of new graduate nurses' personal means which include psychological capital and approach to structural resources which is enablement and staffing on their job satisfaction. Results revealed that hospital staffs are undergoing traumatic and tense work environments, having low job satisfaction, and heavy work for high turnover and reputations of the hospital. These
staffs are a health human resource who must be engaged for the replacement of retiring nurses, and also to discourse forthcoming shortages.

Teo, Stephen, Roche, Maree, Pick, David, Newton, Cameron (2014) conducted a research about Psychological Capital as moderator of organisational change demands on nursing stress. Healthcare organisations in developing countries are constantly subjected to endure change. These changes may have a negative impact on work commitment of nursing staff. This study recognises the changes the staff has to endure and highlights the personal capital impacted due to the change. This research study also addresses a certain research gap by incorporating the Job Demands-Resources which has theoretical viewpoint with Positive Psychology, in specific, psychological capital (PsyCap). Here, psycap is considered as a personal tool to deal with the change

Relationships between work-related requirements, work motivation and values of the nurses in the hospital are significant to offer secure and high-quality health care. However, there is inadequate empirical information regarding such relationships for the need of training and development. The hospital authority expectations and individual priorities were linked negatively with duration and age of service. Considering the internal psychological reserve and external conditions of work the individual priorities of the nurses connected with the motivation of their work (Toode, 2014). Specifically, their internal psychological states related to the inherent aspect of work motivation. While, individual achievements of the nurses, independence and training are the main factors that influence the motivation to work.

In a study to examine the levels and the relationships between work engagement, stress and psychological well-being of the nurses. The positive psychology
framework aims at focusing on the negative aspects of life and rectifying it with the necessary positive resource that needs to be built (Awuku, 2013). Moreover, the results showed that even though the levels of stress of the nurses were comparatively high, the level of the nurse's psychological well-being was also considerably high. The main conclusion drawn is that the work engagement and psychological well-being of nurses are high, irrespective of the high-stress levels of the nurses. It is hence suggested that interventions and systems are put into place to decrease the stress levels of nurses and to sustain the high enthusiasm and dedication and psychological wellbeing levels.

Though the studies presented above highlight the positive aspects considered with regard to healthcare and nurses. There were no specific study integrating these aspects on the nurses in the Indian hospital settings.

**Positive Psychology research trends in Nursing**

Positive psychology has immense influence in the healthcare sector, especially when considering the nurses, who directly interact with patients facilitating recovery. Luthens, Lebsack & Lebsack (2008) studied nurses (n=78) in large healthcare institutions to measure their state of optimism and compared it with the supervisor's rating. There seems to be a clear relationship between the level of optimism and its impact on the contribution to the patient's satisfaction. Besides, it is not just the optimism but also the attitude of efficacy held by the nurse that influences patient outcome. These are accomplished depending upon the level of competence established by the nurses through work practice, enriching their academic knowledge by learning and re-learning from their environment and finally with a co-operative and supportive facilitation from supervisors (Pennbrant, Nilson, Ohlen & Rudman, 2012).
Hope plays an integral part in nursing practice as it influences the process of recovery. Tutton, Seers & Langstaff (2009) through their paper prompted that the constant interaction of patients and nurses creates a ground for enhancing the coping mechanism and aid tackling negative emotions. In this study, a concept analysis reviewing the existing literature for over a decade was carried out to examine hope within the healthcare framework. The findings highlighted that from the nursing perspective hope acts as a facilitator as well as a sustaining mechanism. It also adds a cognitive element in achieving the patient related goal outcomes for recovery. In a similar study through a qualitative interview carried among young healthy people between the age group of 18-25 identified that hope is directly connected to the choices one makes (Turner, 2005).

Stephens T M (2013) clarifies the concept of resilience in nursing as an important entity in building nursing performance delivery. The clinical setting to which one belongs creates a vulnerable environment for challenges and adversities. Enhancing the resilience of the nurses promotes greater adaptability to deal with these conditions. Supporting similar view, Turner S B (2014) considered the profession of nursing as a stressful job. Many of the nurses succumb to the stressful lives developing various physical related issues that may be psychosomatic in nature. She emphasises that building resilience is an essential tool in sustaining the nurses and build a healthier workforce.

Choudary (2010) studied that work-related outcomes such as workload, working conditions also can be influenced by the role of emotional Intelligence. In the study conducted on nurses, it was found that nurses in Chennai felt that their emotional levels were influenced by heavy workload and working conditions. Individual factors such as educational level of nurses influenced nurse interaction with elderly patients.
There are studies that also identify the influence of certain demographic variable to satisfaction such as marital status, distance travelled to work, a number of years of service (Ajamieh et al, 1996).

In a study conducted by Srinivasan & Samuel (2016), the level of emotional intelligence among staff nurses (n=152) was explored using descriptive statistics. A census approach was incorporated to gather information on the key dimensions of emotional intelligence. The findings of the study revealed that more than half of the nursing staff population expressed a low level of emotional intelligence, which suggests a need to look into enhancing the level for better performance.

Milisa, Cathy, David (2009) conducted research on intensive care units, communication between nurses and patients and their outcomes. Various elements in hospitals can poorly affect and creates negative impacts among patients, effects, and also includes defective communication between nurses and physicians. Whether detailed communication elements which include properness, accurateness, honesty, and understanding can also influence contrary outcomes is unknown. The main objective of this study is to define the relationships between patients’ results and nurses’ opinions and elements of communication between nurses and physicians and features of the practice environment.

Kristen, (2012) proclaimed nursing as informed caring for the well-being of patients. Caring is considered to a behavioural response that embodies in its silence and patience. This paper justifies nurse caring as an informed skill gained from empirical knowledge from nursing and other interrelated sciences, and also moral value, their very own personal and acquired knowledge which was derived from the civilisations, experience in clinic, personal and social ethics and expectations. It is also said that how nurses view and care for patients and express the quality or condition of an individual
being, defines the stage at which the clients are and this is what creates the ground for practice, and nursing care. Patients are believed to be unique beings who are in a condition that is completely influenced by their thoughts and behaviours.

Tao, Xiao, Li & Li, (2012) conducted a research about the impact of psychological capital and job performances among nurses. The main objective of this research study is to deliver experimentally and observed indication of the relationships between psychological capital, job embeddedness which refers to the economic activity and is being inhibited by non-economic institutions and performance. This study also intends to find out to present the hypothetical development of psychological capital of hospital staff and job embeddedness in nursing research. Recently it has been identified that psychological capital is a core concept in the literature of positive psychology. Though, there is considerably low evidence on its positive impact on job embeddedness and performance among hospital staffs.

Wageeh, (2015) says that Psychological Capital (PsyCap) is a primary concept in the literature of positive psychology. However, there has been only a little evidence on its positive impact on Employee Attitudes (EA) and Employee Performance (EP). The main objective of this research study is to deliver experimental evidence on the relationships between PsyCap, EA and EP. This research paper also pursues to extend the theoretical development of PsyCap, Job Satisfaction (JS), EP and their application to staffs teaching in hospitals settings. The study proposes that teaching in hospitals can be influenced with the help of improvement of PsyCap specifically, and also by developing self-efficiency, confidence, hope and flexibility.
Research trends relating Self-Efficacy and Emotional Intelligence, Subjective Well-being

Bandura (1997) has contributed a vast majority of research on the concept of self-efficacy. It tends to interplay with an individual's action or behaviour by enhancing one's belief to succeed. While considering nursing performance self-efficacy is one of the well-known factors affecting it (Lee & Ko, 2010). There is equally good literature that suggests Emotional Intelligence predicted higher work outcomes when compared to cognitive mental abilities (Kelly & Caplan, 1993). Chan (2004, p.15) pointed out that the self-efficacy beliefs can be clearly estimated by the element of emotional intelligence. Nielson et al. (2009) investigated the relation of transformational leadership in nursing administration along with psychological well-being and satisfaction of professionals in healthcare service for the Elders. The survey also assessed the self-efficacy and team efficacy of the participants (employees n=279). The main research aim was to determine to construct validity of linking self-efficacy and team efficacy to transformational leadership impacting job satisfaction and well-being. From the findings, it was concluded that self-efficacy completely mediates the relationship while team efficacy partially mediated. The study brought out a crucial outcome of the influence of self-efficacy in the healthcare system.

Studies on nursing practice show scanty literature on the self-efficacy measure in healthcare services (Dharmanegara & Pradesa, 2015). There, however, is a positive relation noticed between self-efficacy and emotional intelligence (Bryan, 2007).

Research trends relating Hope and Emotional Intelligence, Subjective Well-being

Akman & Korkut (1993) viewed hope as a cognitive element that is characterised by making a person feel good thus making an individual action-oriented. Synder (2002) brought out a perspective of an emotional and cognitive component
towards achieving individual's goal which involves an operative plan of action (Saricam & Akin, 2014). Fred, Bruce, James, Steven, (2007) conducted two researchers in order to determine how hope, flexibility, positivity, and efficiency individually and a combined higher-order element used to forecast both work performance and satisfaction. Results from Study 1 revealed psychometric support for a different survey and planned to evaluate each of these four aspects, and also a composite factor. And survey 2 results directed an important and create positive vibration or impact regarding the combination of these 4 faces with both performance and satisfaction. Results also revealed that the combined element will be a better analyst of performance and satisfaction rather than the four sides of the individual. boundaries or restrictions and practical inferences conclude this research. Studies conducted across various groups have identified that there exists a positive relationship between hope and emotional intelligence (MacInnis & DeMello, 2005), performance at workplace (Adams, et al., 2003; Jensen & Luthans, 2002; Luthans 2002a, 2002b; Luthans, Avolio, Walumbwa, & Li, 2005; Luthans & Jensen, 2002; Luthans, Van Wyk & Walumbwa, 2004; Luthans & Yousef, 2004; Peterson & Luthans, 2003; Synder, 1995b, Yousef & Luthans, 2003, 2006).

According to Synder & Kato (2005) in a study conducted on 175 undergraduate students identified that hope has a positive relation to subjective well-being. We can also highlight the significance of hope in healthcare practice, a research carried out by Davidson & Simpson (2006) convey that in nursing care, patients whose future goals are dependent on hope thereby need the basic process of care to engage hope as an element during service. Besides this hope is a sum total of motivation driven intrinsically along with self-efficacy and outcome expectancy (Roth & Hammelstein, 2007)
Noraini, Aizzat, (2011) explored the impact of hope and flexibility among Malaysian nurses. The main objective of this was to examine the relationship between hope and flexibility with work engagement among hospital staffs. A survey was taken from 422 staff nurses who are working in three public hospitals in Peninsular Malaysia, had participated in this research study. Statistical results which were using regression analysis exposed that both hope and flexibility were positively connected to work engagement and left positive impact among hospital staffs. Probable and potential reasons for these results, act as inferences and also further researches are being discussed.

The studies clearly indicated that hope was found to be one of the crucial element to nursing practice. It also highlighted hope related to engagement of performance delivery in patient care and thus health outcomes.

**Research trends relating Optimism and Emotional Intelligence, Subjective Well-being**

Seligman (1998) viewed optimism as an explanatory style of being able to positively quality events to internal, permanent causes and negatively qualify events to external, temporary situations. In general, optimism is an “attributional style” of events and situations (Peterson & Seligman, 1987). From a more health psychology perspective, we see that early studies of Scheier & Carver (1985) emphasised a strong positive relation between optimism and coping strategies as well as social support under stress conditions. Similarly, Optimism-pessimism studies have shown optimism related better quality of life (Kung et al, 2006; Worsch & Scheier, 2003) and physical and mental health (Pais-Riberio et al, 2007)

When considering the construct of optimism, there have continuous arguments on the uni-dimensionality of optimism and pessimism (Peterson & Chang,
Despite this researches have constantly associated positive outcomes with optimism, which comprises of physical and mental well-being, coping with difficult life situations, life satisfaction and happiness as well as workplace performance (Peterson, 1999; Peterson & Bossio, 1991; Scheier & Carver, 1987, 1992; Seeman, 1989; Lazarus & Folkman, 1984; Scheier & Carver, 1985; Seligman, 2002; Luthans, Avolio, Avey & Norman, 2006; Luthan, Avolio, Walumbua & Li, 2005; Seligman, 1998). In a particular study identifying the effect of emotional intelligence on optimism of university students (Kumcagiz, Celik, Yilmaz & Eren, 2011) with a sample of n=1456 used a screening model method to measure their perception of optimism and emotional intelligence. The results showed that optimism level of students is the meaningful predictor of their level of emotional intelligence.

Souri & Hasanirad (2011) in a study relating resilience, optimism and psychological well-being among students of medicine (n=404) using a cluster sampling approach identified that resilience predicts psychological well-being while optimism only played a mild mediation role between resilience and psychological well-being. This showed that psychological well-being is definitely influenced by an individual’s level of optimism. In a similar study conducted on university students (n=300) to examine the relationship of optimism and emotional intelligence. It was found that there exists a positive relation between optimism levels of students in predicting levels of emotional intelligence.

Research trends Resiliency and Emotional Intelligence, Subjective Well-being

In an attempt to deal with a crisis situation, one needs to have the skills to adapt and gather their psychological strength to respond to the situation. This ability shown by an individual is referred to as resiliency. Nurses in the healthcare sector are associated with several kinds of challenges; be it excessive work, organisational
structure or freedom at work leading it to be a huge concern in retaining the demotivated workforce (Jackson, Firtko, & Edenborough, 2007). With robust theory-building and research works, resilience is identified to be one of the crucial strengths that can be quantified, developed and maintained (Masten, 2001; Masten & Reed, 2002). Studies have concluded that resilience in nurses is important to reduce chances of attrition and manage stress levels at work (Garcia-Dia et al, 2013; Scholes, 2008; Atkinson et al, 2009; Zander et al, 2010, Gillespie et al, 2009).

In a study conducted by Landa et al.,(2007) it was identified that emotional intelligence directly affected stress related health issues. Those nurses showing high emotional intelligence had better interpersonal skills and greater coping skills to deal with stress. Training played a key role in dealing with problem situation (Castledon et al.,2011; Zander et al.,2010; Gillespie et al.,2007, Cameron & Brownie, 2010; Guleryuz et al., 2008) and these also impacted their skills of resilience (Gillespie et al., 2009; Mealer et al., 2012). Besides this emotional intelligence skill has been suggested to interact with resilience. This interaction could enable nursing practitioners to enhance better caregiving, reduce stress and increase the quality of professional and social life by building their resiliency (Cam & Buyukbayram, 2015).

Similarly, Jeyarathnam & Kausalya (2013) investigated the emotional intelligence of women nurses. Emotional intelligence has played the major role in many healthcare organisations. It has influenced the well-being of nurses in the working environment. The skills of emotional intelligence help the nurse to face the demands of modern nursing. The emotional intelligence factor has the tendency to predict the ability of adjustment. Emotional intelligence skill of nurse has created the successful human relationship in the health care field. In the health care sector, the emotional dimensions, abilities and adjustment are under the caring factor which is necessary for the nurses to
care the patients effectively. Emotional management skills of nurses are used to reduce the negative influences of patient’s emotions. In addition to this, the emotional intelligence act as the personality development tool of the individual in the health care sector and many applications. It helps to improve the adjustment of an individual with the effective group living. Self-motivation, creating a good impression, management emotion, and empathy, learning from experience, creating confidence and interpretation difficulty are some of the emotional intelligence factors which are positively influence the well-being of nurses in the health care organisations.

A cross-sectional survey design was used to study the mediating effect of resilience on peer caring and subjective well-being by Zaho et al.,(2015) among nursing and medical students (n=762). Subjective well-being is considered as a crucial element in training nurses and doctors towards a productive work-life in future. The result showed that there was a partial mediation of resilience on subjective well-being and peer caring. From this we may conclude that subjective well-being can be enhanced by building resilience and peer caring, educators should promote these skills in students.

These researches discussed here as also from the study by Razzaque (2015) we can conclude that emotional intelligence influences the psychological capital (self-efficacy, optimism, hope and resilience) of nurses in the health care sector. The social network, social media, a community of virtual, effective knowledge management and knowledge sharing are some of the factors which have enhanced the psychological capital of the nurses. Self-encouragement, empathy, emotional self-control and emotional contagion are some of the factors related to the emotional intelligence and it helps to promote the psychological capital of the nurses in the health care sector. Emotional intelligence has enhanced the psychological skills of the nurses in the working environment. Confidence, hope, happiness and resilience are some of the
psychological factors which also have improved by the presence of emotional intelligence. Further, this has produced the better performance of an organisation. Most of the health care organisations have engaged with the emotional intelligence to measure, develop and manage the psychological capabilities of an employee in the health care sector. There is a positive relationship between the emotional intelligence and the performance of the nurses in the health care field. Psychological capital with the emotional intelligence has found a positive relationship between the hope of the nurses, optimism and the change in attitudes in the working environment. We also see that the subjective well-being of the nurses get enhanced when the positive aspects are nourished.

The present study examines the relationship of the positive psychological variables of nurses from hospitals in Bengaluru. This is a field that requires potential improvement in the effectiveness and strengthening of healthcare service performance. This study also tries to emphasise the relation of the findings with the theoretical framework by exploring the positive variables among the nursing workforce who directly affects the well-being of patients.

**Need for the Study**

This study has examined the status of the hospital industry in India particularly in Bengaluru and reviewed empirically the hardships faced by nurses working in hospitals and their psychological state in the workplace and also the subjective well-being of the nurses, keeping in mind self-efficacy, optimism, hope and resiliency (psychological capital) and emotional intelligence.

In many studies, the vast majority of research is discussed with nurse managers and nurses. And these researchers also identified that effective nurse leaders were considered and categorised as collaborative, flexible, power sharing, utilising
personal values to endorse quality performance. This study focuses on the perception of subjective well-being among nurses and their positive psychological capacities. Emotional Intelligence from the nursing context is of great importance. The concept of emotional intelligence has grown in popularity among nurses over the last two decades, generating interest both at a social and professional level. (Freshwater & Stickley, 2004). It has been related to several factors such as life satisfaction, psychological well-being, occupational success and job performance (Adeyeme & Adeleye, 2008; Bar-On, 1997, 2005, Salovey & Mayer, 1990). There has been an insufficient empirical study conducted integrating the variables of Emotional Intelligence, self-efficacy, hope, resilience and optimism healthcare that could be identified. Effective workplace outcomes can be enhanced by understanding the positive psychological resource stock (Derryberry & Tucker, 1994).

The Board of Nursing Education Nurses League (2006) believes that nursing duty is often directly related to sustaining life, which indeed makes it critical; thus, needing healthcare managers to consider the well-being of the nurses in making everyday decisions. Emphasis is spotlighted on the requirement for the administration to develop the well-being of the nurses as a priority because it influences nurse turnover intentions and without nurses, the society could not function effectively and efficiently (Brunetto et al., 2013). Nursing practice comes with the responsibility of promoting health and well-being (Coutts & Hardy, 1985), to help the other, one needs to help themselves (Moonie, 1986) by being aware of their own resources.

To approach the need mentioned in the literature gaps; along the theoretical framework of broaden-and-build theory (Fredrickson 1998, 2001) the present research studies the influence of positive psychological capacities (self-efficacy, hope, optimism, resiliency and emotional intelligence) on the subjective well-being of the nurses. The
broaden-and-build theory proposes that health and well-being are produced by positive emotions (Fredrickson 2001). Following this proposition, we have linked positive psychological capacities (self-efficacy, hope, optimism and resilience) with emotional intelligence and subjective well-being.