Investigating the Relation between Spiritual Intelligence and Psychological Empowerment among Nurses of Faghihi Hospital in 2012

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A B S T R A C T

Considering the importance of effective factors on the psychological empowerment of nurses who have always been in the center of attention by educational systems and health care. This study was conducted, aimed at determining the spiritual intelligence and its correlation with psychological empowerment of nurses. This cross sectional-analytic study was carried out on 179 hospital nurses in Shiraz (Faghihi hospital). Data were gathered by a questionnaire and were analyzed using statistical software SPSS. T-test findings suggest that hospital nurses of Faghihi in Shiraz city as spiritual intelligence and psychological empowerment are above the average of the range of 3.5, however, such results often are not unexpected in society where people believe in religious values. Also the Pearson correlation test showed a significant and positive correlation between spiritual intelligence and psychological empowerment.

1. Introduction

Regarding the various discussion of spiritual intelligence, the issue seems to be still necessary because Hospital is an institution which has the most influential and important role in society. In order to provide the required services, nurses and health care providers which constitute 60 to 70 percent of hospital staff and medical centers, should be considered more. But the facts imply that nurses get depressed over time due to the lack of happy environment and tiredness, and after a long struggle with depression and anxiety, they become guests of hospital’s beds. In the new, modern and more productive organization, employees have reported feeling isolated, devalued, dehumanized, and exploited (Chandler Lee, 2005). Due to the open atmosphere of the hospital environment, high expectations of the patients and their relatives, high frequency of interpersonal conflict, disrespectful behaviors of patients and their relatives, nurses are experiencing stressful time (Shakerinaz, 1389).

Existing these barriers to optimal care of hospitals and nurses, including Faghihi Hospital in Shiraz, make providing good services difficult. In these conditions, nurses can incorporate spirituality in their professional career and see it not as a job but as a mission. Spiritual intelligence as a structure which according to researches, has vital role in mental health of nurses, was considered by the authors. The fact is that improving nurses’ spiritual intelligence helps them to see different patterns of life, improve their communication skills, having goal-oriented professional feeling and understand the real meaning of events and experience more meaningful workplace (Bagheri et al, 2010).

Considering the above, the main question of this research is to determine the relationship between spiritual intelligence and psychological empowerment.

2. Literature review

Spirituality is derived from the Latin word Spirare meaning to breathe. Spirituality is inherent aspect of human nature and essence of our existence so it draws attention of many theorists as the source of all thoughts, feelings, values and behavior. Spirituality affects the following cases: how people understand themselves and others, how they value the meaning of life and work (Chandlerlee, 2005). But why spirituality is regarded as a form of intelligence? Emmons (1999) based on Gardner’s definition of intelligence tried to pose spirituality in the framework of intelligence. After the introduction of multiple intelligences by Gardner, the concept of spiritual intelligence comes to exist. For the first time in the psychology academic literature the concept of spiritual intelligence was raised by Stevens in 1996 and then in 1999 by Emmons. There are many different definitions of spiritual intelligence which make it hard to combine them into one framework especially those with component of meta-physical. Spiritual intelligence is the human capacity to ask ultimate questions about the meaning of life and the relationship between each of us with a world in which we live (Wolman, 2001). Four dimensions of spiritual intelligence are critical existential thinking, personal meaning production, transcendental awareness and conscious state expansion. Critical existential thinking is the ability to create meaning based on deep understanding of existential questions (Amram, 2005). Personal meaning...
production is Person’s ability to stimulate both physical and psychological experience of the person with personal meaning that comes with a sense of satisfaction (King, 2008). Transcendental awareness is the Ability to understand one’s relationship with a higher power, all the creatures, man and the environment (King, 2008; Vaughn, 2002). Conscious state expansion is the ability to enter a state of spiritual awareness or higher (King, 2008). Since people are born with the capacity for spirituality, nurses can combine spirituality with their professional career and see it not as a job but as a mission (Baldachino, 2008).

In the Oxford Dictionary the word empowerment means, authorization, and capable of providing the service. In a certain sense, it means, empowering people to manage themselves and in the concept of organization it means a change in the culture of the organization and the courage in creating organizational environment (Razavi, 1386). Do empowerment’s techniques enable staff to participate? Do subordinates automatically feel empowered when the authority and resources are shared? Questions such as these cause moving from empowerment in terms of management to subordinates’ perception which is called cognitive and psychological empowerment (Ergeneli et al, 2007). More recently, organizational researches have focused on psychological empowerment in the workplace (Spreitzer et al, 1999). Generally definitions of empowerment include decentralization of decision-making authority and give responsibility to low levels of employees. In this term empowerment is a series of management activities that focus on delegating decision-making authority. While manager should furnish conditions for empowerment, staff themselves should choose empowerment (Barton and Barton, 2011). Thomas and Velthouse (1990), defined psychological empowerment as a cognitive state that can be seen in the following four directions: meaning (value of person’s work), competence (the person’s ability to do work), Self determination (the right to choose the activities) and impact (the ability to influence organization’s outcomes). In recent years, the concept of Management in the health care system has been posed and has been able to solve many problems and four key and practical theory such as management excellence, organizational culture, management quality and empowering has been very influential in the management and nursing profession (Dargahi, 1384). In today's competitive world, the only core competency for any organizations (including health care organizations), are its people and their role in the success of their organization which is possible through empowerment and committed staff (Abily and Nastizaei, 1388). Empowerment is becoming the main issue in the literature of the relationship between culture of nursing and their participation (Knol, 2006). Researches show that nurses’ empowerment can boost trust and commitment, learning opportunities, job satisfaction, productivity, participation in decision making, quality of care, patient satisfaction, self-sufficiency, a sense of independence, confidence, responsibility, and finally, cause the effectiveness of the organization, work control and reduction of occupational stress and depersonalization (Abily and Nastizaei, 1388). Moreover according to the researches which are conducted on factors affecting employee empowerment, among all the factors spirituality factor is one of the most important (and yet is neglected). Also researches conducted on factors affecting empowerment have shown that many factors influence this variable. The factors are in the individual, organizational, and environmental area. Among the individual factors especially spiritual has special effect (Bakhtiari, 1389).

3. Methodology

Present research, with the aim of determining the empirical relationships between nurses’ spiritual intelligence and their psychological empowerment, was analytic/cross sectional and applied. The method of data gathering was detailed questionnaires.

The number of nurses in Faghihi Hospital were 334 and due to the limited number of the nurses, the questionnaires were distributed to all 334 members of which 179 of them were returned.

86.6% of the respondents were women and 10.1% of them were men. 26% have had less than one year of work experience, (24.7%) 2-3 years work experience, (11%) 4-5 years, (14.3%) 6-9, (9.1%) 10-12 and (14.9%) with the years of experiences of more than 13.

In order to collect data, two types of questionnaires were used: 1. Spiritual intelligence questionnaire designed by Linda Hildebrant which contains of the four dimensions: critical existential thinking, personal meaning production, Transcendental awareness and Conscious state expansion. 2. Psychological empowerment questionnaire designed by Zoe Dimitriades which contains three dimensions: goal internalization, perceived control and perceived competence.

After selecting the questionnaires, we attempted to assess validity and reliability of the questionnaire. With Emphasis on internal consistency reliability of the test method, the method is called the coefficient alpha or Cronbach’s (Momeni and Ghaiyoomi, 1386). Cronbach’s alpha coefficient spiritual intelligence was 0.888 and for psychological empowerment was 0.885 since both values were greater than 0.7, the test of reliability is acceptable. Furthermore the effect of removing some question on the Cronbach was investigated, for spiritual intelligence by removing question number 6 the number become 0.898 and for psychological empowerment by removing question 39 Cronbach was 0.888.

4. Conceptual Model and hypothesis

To take everything into consideration, Conceptual model was designed and tested using four dimensions of spiritual intelligence as the independent variable and the three dimensions of psychological empowerment as the dependent variable.
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International Journal of Economy, Management and Social Sciences, 2(8) August 2013

Figure 1. Conceptual Model

Hypothesis 0: There is relationship between spiritual intelligence and psychological empowerment.
Hypothesis 1: There is relationship between critical existential thinking and perceived competence.
Hypothesis 2: There is relationship between critical existential thinking and goal internalization.
Hypothesis 3: There is relationship between critical existential thinking and perceived control.
Hypothesis 4: There is relationship between personal meaning production and perceived competence.
Hypothesis 5: There is relationship between personal meaning production and goal internalization.
Hypothesis 6: There is relationship between personal meaning production and perceived control.
Hypothesis 7: There is relationship between transcendental awareness and perceived competence.
Hypothesis 8: There is relationship between transcendental awareness and goal internalization.
Hypothesis 9: There is relationship between transcendental awareness and perceived control.
Hypothesis 10: There is relationship between Conscious state expansion and perceived competence.
Hypothesis 11: There is relationship between Conscious state expansion and goal internalization.
Hypothesis 12: There is relationship between Conscious state expansion and perceived control.

4.1 analysis and hypotheses testing
In this research, Statistical methods are:
Correlation analysis: correlation analysis is statistical tool for determining the type and degree of correlation between variables (Momeni and Faal ghayomi, 1386). In this study, Pearson correlation was used.

T Test: To check appropriateness or inappropriateness of the status of spiritual intelligence and psychological empowerment and their dimensions, T test was used.

For better understanding, prior to hypotheses testing, mean and standard deviation of spiritual intelligence and psychological empowerment are listed and they are shown in the table below:

Table 1. Mean and std. deviation

<table>
<thead>
<tr>
<th></th>
<th>Spiritual intelligence</th>
<th>Psychological empowerment</th>
<th>Perceived competence</th>
<th>Goal internalization</th>
<th>Perceived control</th>
<th>Critical existential thinking</th>
<th>Personal meaning production</th>
<th>Transcendental awareness</th>
<th>Conscious state expansion</th>
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<tr>
<td>N valid</td>
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<tr>
<td>Std. deviation</td>
<td>.46711</td>
<td>.59009</td>
<td>.57810</td>
<td>.87465</td>
<td>.75927</td>
<td>.49172</td>
<td>.61305</td>
<td>.48690</td>
<td>.66210</td>
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</table>

As it is evident from Table 1, all the variables and their dimensions were above average (>3).

To evaluate appropriateness or inappropriateness of the spiritual intelligence and psychological empowerment status T-Test were carried out. They are summarized in the table below:
Based on this approach, empowerment is staff’s mental condition. From their perspective, among subordinates may not necessarily be effective and they will not feel empowered. Moreover, nurses’ working life reveals that the point is not decision making power, because from their perspective they have the power. We believe that the reason why scientific community move toward the psychological empowerment was that the mere sharing of resources among subordinates may not necessarily be effective and they will not feel empowered. So what is important is open communication, emotional support, and recognition of their personal meaning.

The following table shows one sample T-test:

<table>
<thead>
<tr>
<th>Test value=3.5</th>
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</tbody>
</table>

4.2 hypothesis design $H_0$ and $H_1$

$H_0$: $\mu$=3.5

$H_1$: $\mu$>3.5

According to the table 2, in all cases, significant value (sig) is less than 0.05, so $H_0$ assumption is rejected and $H_1$ is accepted.

Also, in all cases, both the upper limit and lower limit test is positive, then the value is larger than the average and this, represents that nurses as both spiritual intelligence and psychological empowerment are in good condition.

4.3 testing hypotheses

All hypotheses were tested by Pearson correlation. Since significant of all hypotheses were 0.000 and due to the fact that it is less than 0.01, all the hypotheses were confirmed.

The following table shows hypotheses in order of the strength of the correlation:

<table>
<thead>
<tr>
<th>Hypothesis</th>
<th>Coefficient of correlation</th>
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</thead>
<tbody>
<tr>
<td>H_0</td>
<td>.554</td>
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<tr>
<td>H_1</td>
<td>.456</td>
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<tr>
<td>H_2</td>
<td>.442</td>
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<tr>
<td>H_3</td>
<td>.428</td>
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<tr>
<td>H_4</td>
<td>.423</td>
</tr>
<tr>
<td>H_5</td>
<td>.421</td>
</tr>
<tr>
<td>H_6</td>
<td>.418</td>
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</tbody>
</table>

5. Conclusion

According to the literature, confirming the main hypothesis: positive relationship between nurses’ spiritual intelligence and psychological empowerment had been anticipated. Authors’ reasoning which was based on the literature, had been made as follows:

A review of the psychological empowerment’s literatures facilitates our understanding of the relationship between these two variables. Studies have shown that there are two approaches in the theory and practice of empowerment (Ergenel et al, 2007). The first approach is called relational approach which focuses on environmental factors and defines empowerment as a set of managerial activities that gives the staff power, control, and authority. In studies in this approach, empowerment known as collaboration by which power is transferred from organization to those who have less power. The second approach is called cognitive or motivational approach to understand the perspective of the employees. In This approach, employees’ psychological empowerment is emphasized and reflect the fact that weather employees see themselves as a person who has power or not. Based on this approach, empowerment is staff’s mental condition. Cognitive approach, emphasizes on open communication, emotional support to reduce stress.

We assumed that spiritual intelligence is the variable which by a person gains higher self awareness, happiness and a sense of control over his life, and it matches with the approach of cognitive or motivational. A person can use spiritual intelligence to reshape, redefine and transform his life and its events. From phenomenological point of view, this process will be able to give meaning and value to life events and happenings.

Moreover, nurses’ working life reveals that the point is not decision making power, because from their perspective they have the power. We believe that the reason why scientific community move toward the psychological empowerment was that the mere sharing of resources among subordinates may not necessarily be effective and they will not feel empowered. So what is important is open communication, emotional support, and recognition of their personal meaning.

The following table shows hypotheses in order of the strength of correlation:

<table>
<thead>
<tr>
<th>Order</th>
<th>Hypothesis</th>
<th>Coefficient of correlation</th>
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<tbody>
<tr>
<td>1</td>
<td>H_0</td>
<td>.554</td>
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<tr>
<td>2</td>
<td>H_1</td>
<td>.456</td>
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<tr>
<td>3</td>
<td>H_2</td>
<td>.442</td>
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<td>4</td>
<td>H_3</td>
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<td>5</td>
<td>H_4</td>
<td>.423</td>
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<td>6</td>
<td>H_5</td>
<td>.421</td>
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<tr>
<td>7</td>
<td>H_6</td>
<td>.418</td>
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</tbody>
</table>
emotional support to reduce the stress and worry and in such cases the internal resources that can help them to reduce stress is spirituality and spiritual intelligence. The gap can be filled with the benefits of spiritual intelligence.

In addition, regarding T-test results, which was taken to calculate mean of spiritual intelligence of the nurses and their psychological empowerment, interesting results obtained and confirm authors’ assumption. Nurses as spiritual intelligence and psychological empowerment were of the above average 3.5.

6. Suggestions

World health organization, international councils of nurses and most of nursing theorists of the world emphasis on the importance of paying attention to the educating spiritual care and spirituality. The result of calister’s et al (2005) studies showed that only a small number (15.5%) of the students were familiar with spirituality and spiritual care, as well as in the study of spirituality in nursing education gaps have been reported in the literature.

To sum up, authors offer courses in spirituality and spiritual care in nursing education program.

Also because of stress caused by on night duty and dealing with different types of diseases, they are more subject to the depression so flexible hours which give them the freedom to choose the hours and formal training programs in the form of seminars is suggested.

Acknowledgements

First and foremost, I would like to thank Marjan Fayyazi for her sincere assistance. I would also like to thank Tehran University and Faghihi hospital and its Staff (nurses) for their supports. It falls to me to thank my parents for their cordial help.

References


