

The Relationship between Spiritual Intelligence and Quality of Work Life in Nurses in Oncology Departments of Ahwaz Hospitals, 2017

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Abstract

Introduction: Spiritual intelligence is one of the effective factors in improving the quality of nursing services and can play a fundamental role in the observance of patients' rights because it provides nurses to deal with stressful situations and situations. The quality of work life is a degree of nurses' satisfaction with the level of individual's important needs and organizational demands being met. Quality of work life is a factor beyond the level of job satisfaction and is related to the goodness of the people. Therefore, this research was designed and implemented to determine the relationship between spiritual intelligence and quality of work life in nurses in the oncology departments of Ahwaz hospitals in 2017. **Methods:** This descriptive correlational study was performed on 95 nurses in the oncology departments of Ahwaz hospitals. Sampling was done by census method. Data collection was carried out using personal data form, King's Spiritual Intelligence Questionnaire and Richard Walton's Quality of Work Life, whose validity has been proved in numerous studies. The reliability of the questionnaires was calculated by Cronbach's alpha method. Cronbach's alphas for the spiritual intelligence and quality of work life questionnaires were 0.93 and 0.93, respectively. **Findings:** The results of this study showed that most of the subjects were female, married, expert, passing the human resource plan, with a mean age of 30.06, an average work record of 5.44 ± 5.40 years, and with an average employment record in the oncology department equal to 3.65 ± 4.36 years. The results showed that the mean spiritual intelligence was 58.07% and the average quality of work life was 89.23%. **Conclusion:** Pearson correlation test showed that spiritual intelligence and quality of work life in nurses in oncology departments were significantly correlated, and the quality of work life has been increased with increasing spiritual intelligence in nurses ($P = 0.016$, $r = 0.246$). In examining the relationship between spiritual intelligence and individual characteristics in nursing staff, there was a significant relationship only between age, job history, and work experience in the oncology department and spiritual intelligence ($P < 0.05$). In examining the relationship between quality of work life and individual characteristics in nursing staff, there was a significant relationship only between job history and work experience in the oncology department and quality of work life ($P < 0.05$).

Key words: Ahwaz hospitals, nurses in oncology, spiritual intelligence, work life

INTRODUCTION

The concept of spiritual intelligence in the academic literature of psychology was first introduced by Stevens (1996)^[1] and later by Emmons (1999). Spiritual intelligence is a set of compatible mental capacities based on indirect and transcendental aspects of reality. The ability to obtain the meaning and purpose of a person from all physical and mental experiences, including the ability to create and dominate the purpose of life, is considered as the production of an individual meaning.^[2]

Spiritual intelligence is what we use to promote our desire and ability for meaning, vision, and value. Spiritual intelligence facilitates conversation between mind and sense, and between

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mind and body. When we have a good spirit, we can achieve the meaning, purpose and value of life, peace, harmony, and satisfaction.^[3]

A person with high spiritual intelligence has not only the ability to respond appropriately in special circumstances but also the ability to understand why he is in this position, how to use this position and how to make this situation suitable.^[4]

Spiritual intelligence is the ability of individuals to behave through reason with compassion if they maintain their inner and outer calm in different situations.^[5] Spiritual intelligence is a set of activities that, in addition to subtlety and flexibility in behavior, lead to deep self-awareness and insight into life and target it, in such a way that goals are drawn beyond the material world. This process leads to person's adaptation to the environment for the pleasure and satisfaction of others because the person with this adaptation is seeking to satisfy God.^[6]

The most important application of spiritual intelligence in the workplace is to create peace of mind, mutual understanding, and understanding among colleagues and, as a result, job satisfaction and job stress reduction.^[7]

Since nursing is one of the stressful jobs, spiritual intelligence prepares nurses to deal with stressful situations and problems Mahmoodi *et al.* (2017). Nurses encounter a number of stresses at work such as overwork, shift work, and ambiguity in the level of authority which, in turn, reduces the quality of their care. As a result, coping with daily work problems is very important. Spiritual intelligence is used to understand the meaning of life and to solve value problems.^[8] Recently, researchers have addressed the issue of "quality of work life" to moderate job stress and exhaustion. Quality of work life has important effects on employees' behavioral responses such as organizational identity, job satisfaction, job participation, job effort, job performance, intention to leave, organizational transformation, and change.^[9] The quality of work life is the perceived work conditions in an organization. The quality of work life has always been considered as a center for managing health care in addition to other effective environments and health and safety.^[10] The quality of work life is an important part of the quality of health care. The quality of work life can be defined as the level of satisfaction of those who provide care to the patient.^[11]

It is important that nurses are the largest provider of care services to patients and their quality of life is important as a human being and as a primary caregiver.^[12]

In many studies, especially in Iran, the nature of nursing work and the quality of their work lives have been addressed. Therefore, the attention of managers to the variables of the quality of work life can facilitate the work environment that includes not only the basic needs of personnel but also the needs of higher levels, continuous growth, and advanced performance.^[13]

Considering the importance of the role of nurses in promoting community health and the effect of quality of work life on employees' performance, any attention paid to improve the quality of work life of nurses can lead to improving the level of services and improvement of patients; for this reason, this study has been conducted to determine the relationship between spiritual intelligence and quality of work life in nurses in the oncology departments of Ahwaz hospitals.^[14] In a study entitled the "effect of spiritual intelligence, emotional intelligence, psychological ownership, and occupational burnout on nurses' care behaviors," showed that the identification of effective factors on nursing care behavior is vital for improving the quality of patient care. Spiritual intelligence, emotional intelligence, psychological ownership, and occupational burnout of nurses play an important role in nursing care behavior.

Studying the relation between the quality of work life of nurses and the desire to leave the nursing profession^[15] showed that improving the quality of work life can reduce the desire to leave the nursing profession, but due to lack of employment opportunities in our society, quality of work life is not a good predictor of continuing nursery.

Studying the factors related to the quality of work life of nurses in the third-level hospitals in Bangladesh, Akter *et al.*^[16] showed that individual factors (work experience, educational level, and income level) had a positive and significant correlation with the quality of work life. Organizational factors including organizational commitment and work environment of nurses had a positive and significant relation with the quality of nurses' work life, and job stress had a negative and significant correlation with the quality of work life of nurses.

METHODS

Research hypothesis

There is a direct significant correlation between spiritual intelligence and quality of work life of nurses in the oncology departments of Ahwaz hospitals.

Research questions

1. How is the spiritual intelligence in nurses in oncology departments of Ahwaz hospitals?
2. How is the quality of work life in nurses in oncology departments of Ahwaz hospitals?

Research method

Regarding the aim of this research, which is to determine the relationship between spiritual intelligence and quality

of work life in nurses in oncology, this is a descriptive correlational research that is done by cross-sectional method. The statistical population of this study includes all the oncology nurses of Imam Khomeini, Golestan, and Baghaee 2 hospitals in Ahwaz, Iran. The sampling method was census. Therefore, the sample size is equal to the research population size (95 people). A questionnaire has been distributed among all members of the population. The research environment consists of Golestan, Baghaee 2, and Imam Khomeini hospitals in Ahwaz. Inclusion criteria were employment in one of Imam Khomeini, Golestan, and Baghaee 2 hospitals in Ahwaz with a Master's or Bachelor's Degree in Nursing and willingness to participate in the study. Exclusion criteria were failure to complete the questionnaire after receiving it. Questionnaires were completed by obtaining a university license and consent of the subjects.

The instrument for collecting information was the King's Spiritual Intelligence Self-Report Inventory-24 and Richard Walton quality of work life questionnaire. The final questionnaire was prepared after changing the concepts of questions in accordance with cultural conditions. Spiritual intelligence questionnaire includes demographic information and questions related to spiritual intelligence variables. This questionnaire has 24 questions. Questions 1, 3, 5, 9, 13, 17, and 21 show existential thinking, questions 2, 6, 10, 14, 18, and 22 indicate transcendental consciousness, questions 4, 8, 12, 16, and 24 show extension of awareness mode, and questions 7, 11, 15, 19, and 23 indicate the production of personal meaning.

The questionnaire uses the 5-point Likert scale to score each question.

In the evaluation area, 0 and 4 are the lower and upper limits of the score, respectively. The minimum and maximum scores will be 0 and 96, respectively.

The score of question 6 is reversed in such a way that 4 is the lower limit of the score and 0 is the upper limit of the score.

Score between 0 and 40: Spiritual intelligence is at a low level.

Score between 41 and 80: Spiritual intelligence is at a middle level.

Score above 80: Spiritual intelligence is at a high level.

Richard Walton's quality of work life questionnaire contains 35 questions and the subject must select one of the options. Questions 1–4, 5–10, 11–15, 16–19, 20–23, 24–27, 28–30, and 31–35 show fair work payments, safe and healthy work environment, development capacity, continued growth and security opportunity, integrity and social cohesion, legalism, the general context of life, and social affiliation of work life, respectively. The questionnaire uses the 5-point Likert scale

to score each question. In the evaluation area, 1 and 5 are the lower and upper limits, respectively. The minimum and maximum possible scores are 35 and 175, respectively.

Score between 35 and 58: Quality of work life is at a low level.

Score between 59 and 118: Quality of work life is at a middle level.

Score >118: Quality of work life is at a high level.

Spiritual intelligence questionnaire was examined by seven faculty members of nursing and midwifery of Islamic Azad University of Isfahan (Khorasgan) in terms of formal content validity. After the necessary amendments were made according to the suggestions, the data gathering tool was provided. The reliability of the spiritual intelligence questionnaire was evaluated by calculating the Cronbach's alpha coefficients in each of its quadruple dimensions as well as in the whole questionnaire. The Cronbach's alpha coefficient for the spiritual intelligence questionnaire was determined to be 0.933. The Cronbach's alphas of the items in the spiritual intelligence questionnaire were determined to be 0.829, 0.788, 0.764, and 0.833 for the items of critical thinking, formulation of personal content, supernatural awareness, and self-awareness expansion, respectively.

On the quality of work life questionnaire by Richard Walton *et al.* (2013) in a study that examines the effect of quality of work life on employee's participation and the emotional commitment between the public and private sectors in Malaysia, Cronbach's alpha coefficient was calculated to be 0.9 for measuring the reliability of the questionnaire. Furthermore, in a study that examined the impact of quality of work life on organizational commitment, Faghih Pour *et al.* (2012) used the formal method to evaluate the validity of Richard Walton's quality of life questionnaire.

Data analysis method

Data analysis was done at descriptive and inferential levels. At descriptive level, frequency distribution tables, mean, and standard deviation were used, while at inferential level, independent *t*-test, Mann–Whitney, Kruskal–Wallis, and Pearson and Spearman correlation coefficients were used. Furthermore, multivariate regression model was used to investigate the effect of spiritual intelligence and underlying variables on quality of work life. The tests were performed at the error level of 5% using SPSS version 22.

RESULTS

Findings of the research show that the highest percentage (82.1%) of the subjects was women. Most of the nurses participating in this study were in the age group of <30 years and the lowest frequency was 5.9% in the age group of

41–50 years. The mean age was determined to be 30.06 ± 6.08 . The most frequent subjects (42.1%) were the intern nurses and the least frequent subjects (6.3%) were contracted nurses. Most of the nurses (95.8%) had a bachelor's degree. 61.1% of the subjects were married. Most of the nurses (34.7%) had a work experience of 1–5 years and few of them (17.9) had a work experience of <1 year. The mean work experience was determined to be 5.44 ± 5.40 . Regarding the amount of work experience in the oncology department, the highest frequency (42.1%) was observed in nurses with a work experience of 1–5 years and the lowest frequency (9.5%) was observed in nurses with a work experience of 6–10 and above 10 years. The mean work experience was 3.65 ± 4.36 . The nurses' working hours per week was 45–55 h in the majority of them (49.5%) and the mean was 48.31 ± 5.24 .

DISCUSSION

About the first question of the research “how is the spiritual intelligence in the nurses of the oncology departments of the Ahwaz hospitals?,” The results of Table 1 show that the mean and standard deviation of the components of spiritual intelligence in the components of critical existential thinking were 17.39 and 5.24, respectively; in the component of personal meaning creation, they were 12.75 and 3.54, respectively; and in the component of transcendental consciousness, they were 16.24 and 82.4, respectively; and in the component of consciousness condition development, they were 11.68 and 4.09, respectively. The highest score was related to the components of existential critical thinking with mean of 17.39 and standard deviation of 2.24, and transcendental consciousness with a mean of 16.24 and standard deviation of 4.82. The average total, high, and average levels of spiritual intelligence are 58.06, 51.6%, and 48.4%, respectively.

In a study entitled “the role of spiritual intelligence in the efficiency of employees in Isfahan University of medical sciences based on the structural equations model,” Shiasi *et al.* (2015) concluded that the mean components of spiritual intelligence were all above averages (existential critical thinking 20.58, creation of individual meaning 14.55, transcendental consciousness 20.43, and development of consciousness position 14.23) which are consistent with the results of our studies.

About the second question of the research “how is the quality of work life in the nurses of the oncology departments of the Ahwaz hospitals?,” The results of Table 2 show that the average and standard deviation of the nurses score for the components of the fair payment, safe working environment, extending human abilities, opportunity for sustained growth and security, social cohesion in the work organization, individual rights in the organization, work and total life space, occupational social affiliation, and quality of work life

Table 1: Descriptive indexes of spiritual intelligence components in the subjects

Component	Possible score range	Mean±SD
Existential critical thinking	0–28	17.39±5.24
Creation of personal meaning	0–20	12.75±3.54
Transcendental consciousness	0–28	16.24±4.82
Development of consciousness situation	0–20	11.68±4.09
Spiritual intelligence	0–96	58.07±15.75

were 8.89 and 3.08, 13.74 and 4.11, 14.54 and 4.08, 10.92 and 3.01, 11.34 and 3.01, 10.05 and 3.26, 6.71 and 2.53, and 13.05 and 4.07, respectively. The highest and lowest scores are related to the extending human abilities and total life space, respectively. In a study entitled “the relationship between the quality of work life and nurses' productivity in Ahwaz Hospital”^[13] concluded that nurses had the worst and best dimensions at work and total life space (2.69) and social cohesion in the work organization (3.36) which are consistent with the current studies. In a study entitled “the relationship between quality of work life and the desire to quit jobs in hospital staff,” Zarei *et al.* (2014) concluded that among the dimensions of quality of life, fair payment had the lowest score, which is not consistent with present studies. The mean total quality of work life was 89.23 and the high, average, and low levels of quality of work life were 8.4%, 85.3%, and 6.3%, respectively.

CONCLUSION

According to the research hypothesis, spiritual intelligence and quality of work life in nurses in the oncology departments of Ahwaz hospitals have a direct relationship. The results of the research show that there is a direct relation between spiritual intelligence and the quality of work life and all of its dimensions. However, at the level of error of 5%, the relationship was only observed between spiritual intelligence and fair payment ($P = 0.028$, $r = 0.225$), between spiritual intelligence and extending human abilities ($P = 0.006$, $r = 0.281$), and between spiritual intelligence and quality of work life ($r = 0.246$, $P = 0.016$). Therefore, with increasing spiritual intelligence in nurses, the quality of their work life in general and the dimensions of fair payment and extending human abilities from the quality of work life were increased [Table 3].

Accordingly, it can be stated that H_0 is based on the absence of a significant relationship between spiritual intelligence and quality of work life, and therefore, H_1 saying that there is a significant relationship between spiritual intelligence and quality of work life, is accepted.

Table 2: Descriptive indexes of quality of work life components in the subjects

Component	Possible score range	Mean	Standard deviation
Fair payment	4–20	8–89	3.08
Safe working environment	6–30	13–74	4.11
Extending human abilities	5–25	14–54	4.08
Opportunity for sustained growth and security	4–20	10–92	3.01
Social cohesion in the work organization	4–20	11–34	3.01
Individual rights in the organization	4–20	10–05	3.26
Work and total life space	3–15	6–71	2.53
Occupational social affiliation	5–25	13–05	4.07
Quality of work life	35–175	23–89	21.26

SD: Standard deviation

Table 3: Correlation coefficient between spiritual intelligence and different dimensions of quality of work life

Different dimensions of quality of work life	Spiritual intelligence		
	Number	Correlation coefficient	Significance level
Fair payment	95	0.225	0.028*
Safe working environment	95	0.192	0.062
Extending human abilities	95	0.281	0.006**
Opportunity for sustained growth and security	95	0.192	0.062
Social cohesion in the work organization	95	0.089	0.392
Individual rights in the organization	95	0.177	0.086
Work and total life space	95	0.187	0.070
Occupational social affiliation	95	0.173	0.094
Quality of work life	95	0.246	0.016*

Therefore, with increasing spiritual intelligence and spiritual well-being, nursing staff can create a work environment in which job satisfaction is higher and nurses have higher quality work life.

Practical suggestions

1. According to the results of the research, which showed that only 51% of nurses had high spiritual intelligence, nursing managers should take actions to promote the spiritual intelligence of nursing staff by conducting educational programs.
2. According to the results of the research showing that the quality of work life of the nurses was at middle level, nursing managers should take actions at different levels to improve the quality of work life of nurses from the middle to high level.
3. In employing nursing staff, their benefit from spiritual intelligence should be considered.
4. Nursing managers from different centers should work to improve and make better use of spiritual intelligence through appropriate educational methods.
5. In nursing and midwifery schools, the results of nursing education research should be used to teach factors affecting the quality of work life of nurses.

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