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The relationship between nurses' spiritual intelligence and happiness in Iran

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Abstract

This study aimed to assess a) the relationship between Spiritual Intelligence and Happiness and b) the relationship between Spiritual Intelligence, Happiness and demographic characteristics of the respondents. This is a descriptive cross-sectional study with 125 nurses as the subjects, working in a variety clinical settings in two hospitals in Bushehr, Iran. Results show that there is a significant relationship between the Spiritual intelligence and Happiness. on the other hand, the demographic characteristics the section had significant relationship with spiritual intelligence and happiness.

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Keywords: Spirituality, spiritual intelligence, nurses, happiness.

1. Introduction

Most recently spirituality has been considered as an important aspect of human being which has a significant relationship with health improvement (Macdonald, 2002). Recent studies recognize the significant role of prayer and meditation in helping individuals to cope with social pressure and diseases (Tacon, McComb, and Randolph, 2003) WHO defines health as “not merely the absence of disease but the integration of physical, emotional, social and spiritual well-being” (Kaplan and Saduk, 2003). Nursing is a health care profession focused on people's health. Although Health care providers spend their entire lives providing services to the people and community health, unfortunately society, even they themselves neglect their own physical and mental health (Lambert & Lambert, 2007). In the work environment nurses are confront on a daily basis with multiple occupational stressors, which can jeopardize their physical and mental health (Harrison, et al, 2002). For instance they may feel absurd if unexpected deaths or occurs and disasters happen (Wright 1998). In such cases the innate source which might help them, is spirituality because it gives meaning and purpose to life. (Denis et al 2006). With regard to this fact that people have inborn spiritual capacities (Wolman 2001), nurses with integrity between their profession and spirituality can consider their profession not as a job and vocation but as a mission (Baldachino 2008). But there is a fundamental

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problem that a nurse is rarely considered as holistic human being whereas to be so all aspects of a human's life biological, mental, social, as well as spiritual must be concurrently taken into account. (Chung, wong, & chang 2006). The effect of spirituality and using spiritual intelligence enables to approach the problem spirituality and there to nurses to solve the problems and with spiritual attitude-approach achieve self actualization and wellbeing and feel happiness. This study aimed to assess the relationship between Spiritual Intelligence and Happiness and the relationship between Spiritual Intelligence, Happiness and demographic characteristics of the nurses in Iran.

1.1. Spirituality, religion and Spiritual Intelligence

Spirituality is an awareness of life which enables us to think about life, who we are and where we come from (Mc Ewan, 2004). There is ambiguity between the terms spirituality and religion (wong, 2008). Spirituality is characterized by experience of the individual but religion is characterized as formal, organized associated with rituals and belief (Berger, & Williams, 1999). The reason why the construct of spirituality is considered as intelligence is based on some scientific observations and findings that the application of specific patterns of thoughts, emotion and behaviours discussed under religion and spirituality, in daily life can lead to an increase in the individual's adaptation and well being (Anandrajah and Hight, 2001, Kennedy 2002, Vanness and Kasel, 2003, Daaleman, 2004). Spiritual intelligence mixes the concepts of "spiritual" and "intelligence" in a new concept, and it is the intelligence that makes whole and gives integrity. It is the intelligence for ask fundamental question. (Zohar, 2000) Spiritual intelligence includes various methods that and can coordinate innate life and the spirit with external life and it may lead to happiness and improvement of life quality (Vaguan, 2002).

2. Objectives

In this research the main objective of the study is to determine the relationship between the spiritual intelligence and happiness among the nurses of the selected hospitals in Bushehr, Iran. The other objectives are to determine the relationship between the spiritual intelligence and happiness and demographic characteristics of the respondents; characteristics such as: age, years of nursing, section, educational level, marital status, and current position.

3. Framework of the Study

The main hypothesis of the research was that, there is a significant relationship between the Spiritual intelligence and Happiness among the nurses chosen as the subjects of the study (figure no. 1). In this research the three questionnaires of demographic characteristics, Naseri's spiritual intelligence (2008) and Oxford's happiness index (1989) were used. Naseri's spiritual intelligence (2008) four factors such as self-conscious transcendence, spiritual experience, patience and forgiveness. Spiritual intelligence in this study refers to all abilities, capacities and spiritual sources that if applied in daily life can improve the quality of life. Based on different definitions of spiritual intelligence in its the role in solving existential problems, finding a meaning and purpose for our deeds and the phenomena of life have been emphasized (Zohar and Marshal, 2000, Sisk, 2001, Wolman, 2001, Nasel, 2004, King, 2007).

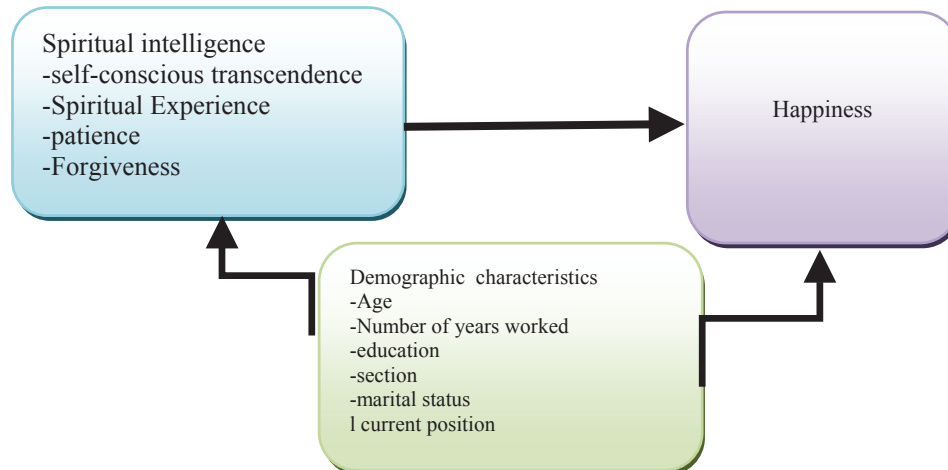


figure1. The Framework of the study which shows the relationship between the spiritual intelligence, happiness and demographic characteristics of the research

According to Hills and Argil (2001) happiness is a multidimensional construct comprising both emotional and cognitive. they defined the three main elements of happiness as: inducing a positive effect or providing happiness most of the time, the increasing satisfaction in a period of time and lack- of negative emotions such as depression and anxiety. Happiness as holistic concept is a complete continuous satisfaction in life (Tatar Kiewciz, 1967). In cognitive theory, it is believed that happy individuals experience nicer phenomenon than others; it means that they consider neutral phenomena as positive and the positive and even more positive. In fact individuals are able to increase their own happiness by controlling their thoughts. For instance, the belief that there is a transcendental power and purpose in the world can lead people to happiness (Diner, 1984).

4. Methodology

This study is descriptive, cross-sectional and inferential in which was conducted with a total number of 125 nurses of the two main hospitals of Bushehr, Iran.

4.1. Sampling Method and Respondents

Sample size was defined based on Morgan (1979) table. Subjects ranged in age of from 21 to 50(M =32.58 SD = 7/35). Most participants were female (n = 97, 77/6%) and were single (n = 87, 69/2%) and the majority of nurses had Bachelor's degree (n = 99, 79.2%). The subjects had employed as a nurse for either less than 3 years or more than 10 years. Most of the respondents worked in the adults emergency section (n = 21, 16.2%) table no.1

Table 1. Distribution of subject's demographic characteristics (n = 125)

Characteristics	n (%)	Characteristics	n (%)	Characteristics	n (%)
Age (M±SD)	32.58± 7.35	section		Position	
20–29 years	(40) 50	Nursing Office	5 (4)	Head nurse	(3.2) 4
30–39 years	(42.4) 53	Emergency adult	20 (16)	Team leader	(8.8) 11
≥40 years	(17.6) 22	Emergency infant	15 (12)	Basic nurse	(74.4) 93
Marital status		ICU	27 (21.6)	Other	17 (13.6)
Married	67 (51.5)	Internal section	6 (4.8)	Job years	
Single	62 (47.7)	CCU	11 (7.2)	≤3 years	46 (27.7)
Education		NICU	6 (4.8)	3–5 years	19 (14.6)
High School diploma	21 (16.8)	Dialysis	9 (9.2)	≥5–10 years	29 (22.3)
Junior college	(3.2) 4	Neurology	7 (5.6)	≥10 years	46 (35.4)
Bachelor	(79.9) 99	Delivery room	14 (11.2)		
master degree	1 (0.8)	Other	(4) 5		

4.2. Instruments

4.2.1. Spiritual intelligence questionnaire

This questionnaire was prepared by Esmail Naseri for his Master's thesis. He formulated the questionnaire based on the belief and that all behaviours practices of the community had been unfortunately affected by the Islamic principles and Koran values. This questionnaire has 97 questions and was self-evaluation completed. Scoring is based on Likert scale with four options including: "almost always"; "often", "seldom" and "never". A total of 11 questions are also scored reciprocally. The meaning of each four factors of this questionnaire is as follow:

1. *Self-conscious transcendence* means knowing deeply the inner layers of self and its different aspects,
2. *Spiritual experience* means the ability to enter the spiritual states and to experience spirituality. In classical Persian literature the spiritual state and different awareness states is expressed in *Sufism*.
3. *Patience* means the ability tolerate difficult situations.
4. *Forgiveness* means the forgetting of the unjust behaviours of others to one.

4.2.2. Oxford happiness inventory OHI:

It consists of wide range of a individual happiness used the department of experimental psychology at Oxford University. (Abir et al 2008). The scale include 29 items and each item is presented in four incremental levels numbered from 0 to 3 and the score will be added and the final score on the basis the number of questions was between 0-87.

4.2.3 *The demographic characteristics* includes the variables, such as age, marital status, section, number of years worked as a nurse, education and position..

4.3. *Validity and reliability of the questionnaire*

Spiritual intelligence questionnaire was tried for 550 students of A'Ilameh Tabatabaie University and its validity and reliability was evaluated with Cronbach's alpha coefficient. Its reliability coefficient was 0.95 also internal validity of four factors of Naseri's (2008) spiritual intelligence with regard to Cronbach's alpha coefficient was as follow: for self-conscious transcendence=0.962, for spiritual experiences =0.90, for patience =0.868, for forgiveness =0.837 and for the whole questionnaire = 0.958. Cronbach's alpha coefficient for the original questionnaire of Oxford was 0.90 – 092(Argyle et al, 1989).

5. Statistical Analysis

The data by SPSS for windows 11.0 Descriptive and inferential statistical techniques such as t-test, one-way ANOVA, correlation to analysis and simple and multiple regressions were applied to analyze. Assumptions for each statistical measure were met and an Alpha level of .05 was established.

6. Result

6.1. *Relationship between the spiritual intelligence and happiness*

Correlation coefficient was applied to examine among spiritual intelligence and Happiness. The results showed that there is significant relationship between spiritual intelligence and happiness ($r = 0.356$). Also it showed that among the four factors of spiritual intelligence, only *forgiveness* had no significant relationship with happiness (table no. 2).

Table2. correlation coefficient between happiness, spiritual intelligence and its factors (n=125)

Factors	r	p
self-conscious transcendence	0.288	**0.001
Spiritual experiences	0.347	**0.000
patience	0.275	**0.002
forgiveness	0.131	0.144
Total score of spiritual intelligence	0.356	**0.000

**significant relationship $P < 0.01$

6.2. *Relationship between spiritual intelligence, happiness and demographic characteristics*

As table no.2 indicated only department had significantly correlated with patience ($f = 2.943$) and happiness ($f = 2.552$) and the other characteristics such as age, marital status, number of years worked as a nurse, education and position have no significant correlated with spiritual intelligence, its factors and happiness.

Table2. One- way ANOVA test between department, spiritual intelligence and its factors and happiness (N=125)

Variables	f	p
self-conscious transcendence	1.788	0.161
Spiritual experiences	1.393	0.192
patience	2.943	**0.003
forgiveness	1.124	0.350
Total score of spiritual intelligence	1.609	0.113
happiness	2.552	** 0.008

**significant level $p \leq 0.01$

7. Discussion and Conclusions

The positive correlation found between spiritual intelligence and happiness. The results of the study show that nurses with higher spiritual intelligence are happier in their lives. This study shows similarities with the result of some researches on Northern American society. Based on the findings of Myers (2000) there is a high correlation between happiness and spiritual activities. Since many joys are temporary and vanish quickly human beings unstable usually seek more joy. Activities done by those who seek spirituality such as helping others and compassion, can lead them to happiness (Shaw 2008). If we discover something which relates us to a greater happy thing then we would have attained happiness. Spiritual and religious beliefs enable some individuals to interpret some psychological pressures exerted on them and unwanted events that happen to them positively and give them hope to think about having a peaceful eternal life. These people often have healthier physical and spiritual life that leads them to be faithful to their spouses, love other human beings, and be nutritionally modest and committed to hard work (Seligman, 2002). In cognitive theories it is believed that happy individuals experience more events that are culturally considered positive, and they consider neutral events as positive and the positive events as more positive. In fact individuals are able to increase their happiness and prosperity by controlling their thoughts. For instance, believing that there is a transcendental power and goal leads to happiness (Diener, 1984). Those who are have positive thoughts and behaviors and see every-thing brightly, pray and struggle to be successful (Diener, 1984). Some researches determine that the effects of spirituality on health have indicated that spirituality has significant effects on the life span and exposure to the diseases (Elmer, Mc Donald and Fridman, 2000). The Result of the relationship between spiritual intelligence and demographic characteristics show the variables, such as age, marital status, number of years worked as a nurse, education and position, is not significant. This result is the same as other researchers conducted on the same title on Taiwanese nurses (Yang, 2006) and Chinese nurses (Yang and Maob, 2006) using Wolman's psychological Matrix questionnaire (2001). Their findings showed that age, religious beliefs and the duration of experience as a nurse have no relationship with the whole score of spiritual intelligence but when they divided the scores of spiritual intelligence into three parts low, average and high, those aforementioned characteristics come to have significant relationship.

The other finding of this research is that there is no significant relationship between the demographic variables and happiness. But the variable of the section has a significant relationship with both happiness and *patience*. After doing Tukey test it was found out that the differences are between the mean score of those who work in infant and adult emergency wards and therefore we might be able to say that those nurses working in these are happier and more patient; their patience that them feel happy. Patience means brings standing in difficult situations. Those who are not patient cannot endure difficulties; those who scored higher in this section can control themselves and try to solve the problems logically if exposed to stress; these people try their best in order to achieve their goals. With regard to thesis fact that the patients confined in this section are in critical conditions as compared to the patients of other wards, those nurses working in this sections should be more patient.

Promoting spiritual intelligence of the nurses can help them live holistically see various patterns of life, achieve greater communication skills, and have a professional sense for a grater goal, and makes them able to recognize the real meaning of events and provide a meaningful work atmosphere and be more sustainably happy Considering the fact that the nurses work in a place where the life and death and the health of the patients are important, therefore their happiness can affect the health of their patients and themselves. When people feel happy in their work atmosphere, they can be beneficial not only to themselves but also to their co-workers and the institutions for which they work because when the employees feel happy, they are creative and more efficient and can make better decisions and improve their relationship with others (Gavin, Mason, 2004). One of the limitations of this study is the self-evaluation of the questionnaires, that is, some of the respondents of the study could not understand the questions fully, specially the questions regarding the spiritual intelligence, which was not meaningful to them Another limitation of this study was the unavailability of other studies on happiness of the nurses, local or otherwise, for comparison It is suggested that policy makers of human resources using the latest achievements of cognitive science, such as the result of this study, provide a healthy, safe, and happy atmosphere in hospitals for nurses and patients.

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