Original Research Article

CONTRIBUTING FACTORS AFFECTING SPIRITUAL INTELLIGENCE OF NURSES AT BANDUNG HOSPITAL IN INDONESIA

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Article Info:

Received: March, 10th, 2023 Revised: October, 20th, 2023 Accepted: October, 23rd, 2023

DOI: https://doi.org/10.36720/nhjk.v12i2.482

Abstract

Background: Nurses are required to conduct themselves professionally at all times, without compromising procedure or the patient's pleasure. Each day, they confront a variety of workplace stresses that might jeopardize their health and possibly result in a reduction or lack of enthusiasm to work

Objectives: The study aimed to determine contribute factors of nurses' spiritual intelligence at Bandung City Hospital based on their characteristics

Methods: This research used a descriptive quantitative method and Spiritual Intelligence of Self Report Inventory (SISRI-24) to collect the data. The respondents were 239 nurses selected using the total population technique. The univariate analysis was used to explain the various levels of spiritual intelligence based on the nurse's characteristics

Results: The results show that the nurses' spiritual intelligence in Bandung City Regional General Hospital is 49% high and 51% low. It was also discovered that a high level of spiritual intelligence was based on the following characteristics: aged 41-60 years old, male, and on more-than-10-year tenure, Nursing School graduates, head nurses and nurses assigned at a hemodialysis unit.

Conclusion: The research concludes that more than half of the respondents have a low level of spiritual intelligence. Therefore, holding Emotional Spiritual Quotient training is recommended, especially for nurses relatively new to the job. The study has implication because spiritual intelligence is vital in nursing, significantly impacting care quality, well-being of all involved, and leading to better patient outcomes and job satisfaction.

Keywords: Hospital, Nurse, Spiritual Intelligence

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INTRODUCTION

Nursing cares for individuals, families, organizations, or communities, both well and ill. Nurses are licensed professionals who have graduated from nursing schools both locally and globally (Presiden Republik Indonesia, 2014). Nurses are required to conduct themselves professionally at all times, without compromising procedure or the patient's pleasure. Each day, they confront a

demographic and a growing emphasis on comprehensive care, there exists a pronounced demand for nurses to possess elevated levels of spiritual intelligence (Heydari, Meshkinyazd, & Soudmand, 2017). The acknowledgment of spiritual intelligence as a vital quality for nurses holds

special relevance within the healthcare setting of Indonesia. Given the country's healthcare environment, characterized by a rich tapestry of cultural and religious practices, the importance of spiritual intelligence is magnified. Research in the Indonesian healthcare context, exemplified by the study conducted by Beni, Dewanti, Yanriatuti, Prakosa. & Purwanza (2019), strongly prioritize reinforces the need to the

variety of workplace stresses that might

jeopardize their health and possibly result in a

reduction or lack of enthusiasm to work

(Sahebalzamani, Farahani, Abasi, & Talebi,

connected with several typical workplace

difficulties are some of the stresses identified

by researchers. All these often trigger a nurse

to experience anxiety and feel motivated to resign (Nabirye, Brown, Pryor, & Maples,

2011). A nurse's intelligence must be moderate

to adjust to occupational stressors and

professional standards (Utami & Dewanto,

2013). Analytical thinking, planning, problem-

language acquisition, and learning are all

examples of intelligence (Utami & Dewanto,

2013). Some types of intelligence commonly

known until today are rational or intellectual,

while emotional and spiritual are the most

fundamental (Kadkhoda & Jahanic, 2012;

acknowledged as a vital attribute for nurses,

given its significant influence on patient well-

being, job contentment, and the broader

healthcare milieu. In the present healthcare

landscape, marked by a diverse patient

Spiritual intelligence is increasingly

abstracting,

idea understanding,

A heavy workload and role conflicts

2013).

solving,

Skrzypińska, 2021).

consideration of spiritual dimensions in nursing care.

A nurse must have modest spiritual intelligence. This research, which shows that spiritual intelligence helps people deal with personal and social issues (Kadkhoda & Jahanic, 2012). Therefore, working will be a pleasant thing to do, resulting in personal satisfaction and decreased stress (Sudendra Singh & Dr. Prashant Mishra, 2016). Apart from that, having a high spiritual intelligence allows a nurse to give positive value to every problem, leading him to always do a positive deed as proof of his responsibility to humans and anything relating to Creation (Kusnanto et al., 2020).

In 2015, the hospital's average bed occupancy rate [BOR] was 70.89% but climbed to 71.65% in just six months in 2016. A Bandung Hospital, a C-type facility, with 218 beds and 247 healthcare workers. The hospital's mission is to "provide people with quality and advanced hospital healthcare services." As a consequence, all nurses are encouraged to learn tough and soft skills. It helps develop leadership and intrapersonal skills, focus on the task at hand rather than the worker, take responsibility for the job and commit to it (Sudendra Singh & Dr. Prashant Mishra, 2016).

The research claim that spiritual intelligence enables someone to overcome problems in his life both personally and in a social environment such as the workplace (Kadkhoda & Jahanic, 2012). A spiritually aware person adds value to every event in his life, good or bad. The hospital management has never evaluated the efficacy of the spiritual training program; therefore, this study will measure the nurses' spiritual intelligence (Nazam, 2014).

Spiritual intelligence can be affected by demographic factors such as age and Many education level (Yang, 2006). researchers have also attempted to identify the relationship between one's spiritual intelligence and characteristics such as gender,

age, religion, working experience, and marital status (Nazam, 2014). The one research shows that spiritual intelligence has to do with age, knowing that male nurses have higher spiritual intelligence than females (Yang, 2006). That is different from the other researchers who said that a nurse's age, religious belief, and working experience are significantly related to his level of spiritual intelligence (Anbugeetha, 2015).

Objective(s): to determine contribute factors of nurses' spiritual intelligence at Bandung City Hospital based on their characteristics.

METHODS

Study Design

This research is descriptive quantitative research.

Research Subject

The population were all nurses who were actively working in Bandung City Regional General Hospital. The sampling techniques used total sampling. A total of 239 nurses become responders in this research.

Instruments

Data collecting was done using modification questionnaires from SISRI-24 with the following components are Critical Existential Thinking (CET), Personal Meaning Production (PMP), Transcendental Awareness (TA), and Conscious State Expantion (CSE). The Alpha Cronbach value is 0.92, and the average alpha coefficient value for each dimension is 0.78 (CET), 0.78 (PMP), 0.87 (TA), and 0.91 (CSE). The results of the validity test showed the Alpha Cronbach coefficient value of 0.95 for the total questions and the average value of each dimension was 0.87 (CET), 0.87 (PMP), 0, 89 (TA), and 0.96 (CSE). This questionnaire has a strong validity with Alpha Cronbach 0.92 coefficient.

Data Analysis

This study was used univariate analysis with bivariate chi square in this

research to determine the level of spiritual intelligence of nurses based on their characteristics. After being analysed, the average value of the spiritual intelligence level is 56.85. So, it is divided into two types of categories of nurses' spiritual intelligence level, namely "High" if the value is the same or above the average value, and "Low" if the value is below the average. Furthermore, the data were categorized using cross-tabulation with the characteristics of nurses.

Ethical Consideration

Ethical Committee Universitas Padjadjaran approved this study with Number: UNC.C1.32/KEPK/PN/2017. During data collection, researchers have provided informed consent to respondents.

RESULTS

This research from Table I and Table II show that the spiritual intelligence of nurses in Bandung hospital is 49% high and 51% is low. Other results also show that the high level of spiritual intelligence of the nurses are those who are aged 41-60 years old (75%), male (56.7%), have tenure for more than ten years (55.1%), Nursing School graduates (50%), head nurses (81.1%) and nurses assigned at hemodialysis unit (77.8%).

Table 1. Spiritual Intelligent based on Nurse's

Characteristic [n=239]								
	Spiritual Intelligent				Total			
Variable	Low		H	igh	Iotai			
	f	%	f	%	f	%		
Age								
18-40 years	119	52.4	108	47.6	227	100		
old								
41-60 years	3	25	9	75	12	100		
old								
> 60 years old	0	0	0	0	0	0		
Gender								
Male	29	43.3	38	56.7	67	100		
Female	93	54.1	79	45.9	172	100		
Experience								
< 2 years	32	50.0	32	50.0	64	100		
2-10 years	68	54.0	58	46.0	126	100		
> 10 years	22	44.9	27	55.1	49	100		
Education								

	Spiritual Intelligent				Tetal		
Variable	Low		Н	ligh	Total		
	f	%	f	%	f	%	
Nursing High	1	50.0	1	50.0	2	100	
School							
Diploma	98	51.0	94	49.0	192	100	
Bachelor	24	51.1	22	48.9	45	100	
Position							
Nurse	113	53.6	98	46.4	211	100	
Head of team	7	41.2	10	58.,8	17	100	
Head of room	2	18.2	9	81.8	11	100	
Unit							
Emergency	11	39.3	17	60.7	28	100	
Room							
Hospitalization	10	66.7	5	33.3	15	100	
Outpatients	63	53.4	55	46.6	118	100	
ICU	12	63.2	7	36.8	19	100	
PICU/NICU	9	45.0	11	55.0	20	100	
Hemodialisis	2	22.2	7	77.8	9	100	
IBS	15	50.0	15	50.0	30	100	

Table 2. Spiritual Intelligent of Nurses

[n=239]

				-					
Grade	C	CET		PMP		ТА		CSE	
	f	%	f	%	f	%	f	%	
Low	143	59.8	136	56.9	56	23.4	85	35.5	
High	96	40.2	103	43.1	183	76.6	154	64.4	
Ex:									
<i>CP</i>	~								

CET: Critical Existensial Thinking PMP Personal Meaning Production TA: Transcedental Awarness CSE: Conscious State Expansion

DISCUSSION

Research on the spiritual intelligence of nurses in hospitals indicates that over half of responders had low spiritual intelligence. This might happen owing to various causes, for example, a low degree of spiritual intelligence induced by a comparatively youthful age and lack of job experience. That is comparable to research indicating that life events and spiritual experiences can have a beneficial influence on spiritual intelligence levels (Faribors, Fatemeh, & Hamidreza, 2010).

The low level of spiritual intelligence of nurses in hospitals can be triggered by the fact that most of them have never attended any training regarding spiritual intelligence, simply because they were not given a chance to join one. Spiritual intelligence can be improved by spiritual intelligence training (Arad, Alilu, Habibzadeh, Khalkhali, & Goli, 2022). Besides, Bandung hospital is a non-religious public hospital; therefore, no specific rituals are performed from any religion whatsoever.

Research result in Taiwan shows that, generally, nurses have a moderate level of spiritual intelligence (Karimi-Moonaghi et al., 2015). This is backed up by this study, which discovered that the majority of nurses had low spiritual intelligence (Yang & Mao, 2007). The difference between China and Taiwan is affected by the political problems in both countries, despite similarities in culture. However, this is also what ultimately shapes the belief system and life experience of the respondents.

The result of this research shows that nurses in hospitals have understood the meaning and goal of their life and job, but in reality, it often reflects the total opposite when it comes to treating patients. Sometimes, nurses had to act beyond their authority, such as financially helping patient's needs, albeit the affordable amount. That should be avoided because nurses are supposed to work based on protocols, and many are not aware of it. That is where spiritual intelligence steps it. It assists nurses to decide what their authorities are and what are not.

This research also aims at identifying the nurse's spiritual intelligence based on their characteristics such as gender, education level, working span, functional position, and working unit. The results showed that most nurses aged 18-40 years had a relatively low level of intelligence. Further, nurses who have been working for more than ten years tend to have a high level of spiritual intelligence. This shows that the older one gets, the higher the level of spiritual intelligence. This result relevance to the research by Keramati et al. (2019) higher age negatively influenced on intelligence spirituall and nurses' job performance. A nurses grow older, they frequently amass additional clinical expertise and worldly knowledge. This accumulation can result in a more profound comprehension of the human condition, encompassing its spiritual dimensions. Experienced nurses may possess a more comprehensive outlook on the significance of spirituality in patient care, shaped by their extensive years in the field.

There were gender wise significant differences found in research by (Sharma, Navya, & Sharma, 2022). It was noted that among respondents with a high level of spiritual intelligence, female participants exhibited a notably higher mean score when contrasted with their male counterparts. Conversely, in the case of those displaying an average level of spiritual intelligence, the study also shed light on distinctive patterns.

The value and belief system are formed and affected by culture, religion, education, and other learning combined. It can be concluded that an older person tends to have more life experiences and higher spiritual intelligence (Anbugeetha, 2015). However, this is unlike anything in research saying that there is no significant relationship between spiritual intelligence and the nurse's demographic characteristics such as age, gender, working unit, and tenure (Yang, 2006).

According to the study's findings, males have a greater degree of spiritual intelligence than women, up to 56.7 per cent, even though female respondents outnumber male respondents. That is consistent with Nazam's studies on female and male teens, which indicates that the latter possesses a higher level of spiritual intelligence (Karimi-Moonaghi et al., 2015).

This research also shows that Nursing School graduates have a relatively higher spiritual intelligence level than other education levels. For nursing diplomas and undergraduate programs, the percentage of spiritual intelligence remains quite similar to that of the Nursing School. In this research, Nursing School graduates were discovered to have a longer tenure [more than ten years and aged above 40 years old]. That shows age and tenure affect the level of spiritual intelligence, much or less pertinent to the large number of experiences that person has dealt, resulting in the ability to contemplate better.

In this study, most of the head nurses had higher spiritual intelligence than nurses and other lead nurses. Leading nurses are those given authority to manage a specific room to ensure that the nursing service succeeds. The results derived from research by Asmi, Kusumapradja, dan Purwati (2020) unveiled a significant relationship between spiritual intelligence and the compassionate actions of nurses. Notably, it was observed that the nature of leadership employed by superiors plays an intermediary role in this connection, highlighting the intricate dynamics that impact nursing care behaviors.

Most of the nurses placed in the hemodialysis room tend to have a higher level of spiritual intelligence compared to nurses in other rooms. The hemodialysis unit is a room for kidney failure patients that had to undergo dialysis. Someone assigned in a patient working unit with terminal illnesses is expected to have more patience in treating such patients. Patients diagnosed with terminal diseases are complex if not given support biologically, psychologically, socially, and spiritually. Therefore, nurses in ICU and hemodialysis often have a higher level of spiritual intelligence because they are accustomed to controlling themselves and solving any problems logically to avoid stress and get the best results of their lives (Faribors et al., 2010).

Spiritual intelligence is essential for a nurse, knowing that he is connected to other human beings at work. A highly spiritually intelligent nurse will always think through the meaning and goal of every action. No matter whether it's good or bad, he knows that everything happens for a reason. Further, he will always do the best for himself, other people, and even his Creator as a form of devotion. Individuals who possess a heightened level of spiritual intelligence tend to avoid actions that could be detrimental to themselves or others. They often exhibit a propensity for considering matters from multiple perspectives, embracing a holistic viewpoint to foster well-being and harmony, both personally and within the broader context of society (Siswanti et al., 2021).

It is therefore vital to improve spiritual intelligence; one of the many ways is through training. Spirituality-oriented training must be frequently held so that nurses can overcome different types of stressors, including stress and gaps in intrapersonal communication. That is done to improve their skills, have a better sense of belonging, enhance the quality of service, and bring happiness for themselves and others (Sudendra Singh & Dr. Prashant Mishra, 2016)

This result is based on the characteristics of the nurses, such as those aged 41-60 years old, male, have more than 10-year tenure, Nursing School graduates, head nurses, and nurses assigned at a hemodialysis unit. Therefore, holding training is recommended, especially for nurses relatively new to the job. This study has implications for nursing practice because Spiritual intelligence stands as a crucial element within nursing practice, exerting profound impacts on the care's quality, patients' and healthcare professionals' wellbeing. It nurtures a comprehensive, culturally attuned, and patient-centric approach, leading to enhanced patient results and a more satisfying nursing career. The limitations in this study, this study only represent one hospital.

CONCLUSION

The research concludes that more than half of the respondents have a low level of spiritual intelligence. Therefore, holding Emotional Spiritual Quotient training is recommended, especially for nurses relatively new to the job.

SUGGESTIONS

Holding training is recommended, especially for nurses relatively new to the job. The limitations in this study, this study only represent one hospital.

ACKNOWLEDGMENT

Thank you to all the nurses who have helped in completing this research until the compilation of this manuscript.

FUNDING

This research received no specific grant from any funding.

DECLARATION OF CONFLICTING INTEREST

There are no conflict of interest.

AUTHOR CONTRIBUTION

Laili Rahayuwati: conceived of the presented idea.

Shinta Galih: conceived of the presented idea.

Efri Widianti: developed the theory and performed the computations.

Habsyah Saparidah Agustina: verified the analytical methods.

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REFERENCES

Anbugeetha, D. (2015). an Analysis of the Spiritual Intelligence Self Report Inventory (Sisri). International Journal of Management (IJM, 6(7), 24–40.

Arad, M., Alilu, L., Habibzadeh, H., Khalkhali, H., & Goli, R. (2022). Effect of spiritual intelligence training on nurses' skills for communicating with patients - an experimental study. *Journal* of Education and Health Promotion, 11, 127.

https://doi.org/10.4103/jehp.jehp_1483_2 0

- Asmi, Y., Kusumapradja, R., & Purwati, W.
 D. (2020). The Effect of Emotional Intelligence and Spiritual Intelligence on Nurses Caring Behaviours with The Leadership Style Over Intervening Variable. *Journal of Multidisciplinary Academic*, 4(5).
- Beni, K. N., Dewanti, N., Yanriatuti, I., Prakosa, M. M., & Purwanza, S. W. (2019, December 31). Spiritual Intelligence Roles to Improve the Quality of Nursing Care: A Systematic Review. *Jurnal Ners*, Vol. 14, pp. 93–97. Faculty of Nursing, Universitas Airlangga. https://doi.org/10.20473/jn.v14i3(si).169 52
- Faribors, B., Fatemeh, A., & Hamidreza, H. (2010). The relationship between nurses' spiritual intelligence and happiness in Iran. *Procedia Social and Behavioral Sciences*, *5*, 1556–1561. https://doi.org/10.1016/j.sbspro.2010.07. 325
- Heydari, A., Meshkinyazd, A., & Soudmand,
 P. (2017). The Effect of Spiritual Intelligence Training on Job Satisfaction of Psychiatric Nurses. *Iranian Journal of Psychiatry*, 12(2), 128–133.
- Kadkhoda, M., & Jahanic, H. (2012).
 Problem-solving capacities of spiritual intelligence for artificial intelligence. *Procedia Social and Behavioral Sciences*, 32(Iccs 2011), 170–175.
 https://doi.org/10.1016/j.sbspro.2012.01.
 027

Karimi-Moonaghi, H., Gazerani, A., Vaghee,
S., Gholami, H., Salehmoghaddam, A., &
Gharibnavaz, R. (2015). Relation
between spiritual intelligence and clinical
competency of nurses in Iran. *Iranian Journal of Nursing and Midwifery Research*, 20(6), 665–669.
https://doi.org/10.4103/17359066.170002

- Keramati, M., Ebrahimi, H., Bameri, A., Hasan Basirinezhad, M., Mohammad Mirhoseini, S., Hasan, M., & Mohammad, S. (2019). The Relationship between Spiritual Intelligence and Job Performance among Clinical Nurses. *Library Philosophy and Practice (e-Journal)*. Retrieved from https://digitalcommons.unl.edu/libphilpra c
- Kusnanto, K., Kurniawati, N. D., Bakar, A., Wahyuni, E. D., Arifin, H., & Pradipta, R. O. (2020). Spiritual-based motivational self-diabetic management on the self-efficacy, Self-care, and HbA1c of Type 2 diabetes mellitus. *Systematic Reviews in Pharmacy*, 11(7), 304–308.
 - https://doi.org/10.31838/srp.2020.7.47
- Nabirye, R. C., Brown, K. C., Pryor, E. R., & Maples, E. H. (2011). Occupational stress, job satisfaction and job performance among hospital nurses in Kampala, Uganda. *Journal of Nursing Management*, 19(6), 760–768. https://doi.org/10.1111/j.1365-2834.2011.01240.x
- Nazam, F. (2014). Gender Difference on Spiritual Intelligence Among Adolescents Keywords Fauzia Nazam. (November), 423–425.

Presiden Republik Indonesia. (2014). Undang-Undang Republik Indonesia No. 38 Tahun 2014 tentang Keperawatan. Jakarta.

Sahebalzamani, M., Farahani, H., Abasi, R., & Talebi, M. (2013). The relationship between spiritual intelligence with

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psychological well-being and purpose in life of nurses. *Iranian Journal of Nursing and Midwifery Research*, 18(1), 38–41.

- Sharma, S., Navya, G., & Sharma, S. (2022). Impact of Spiritual Intelligence on Perceived Stress among Male and Female University Students. *International Journal of Bio-Resource and Stress Management*, *13*(1), 62–68. https://doi.org/10.23910/1.2022.2511a
- Siswanti, D. N., Khairuddin, R., Halim, F. W., Novita, D., Jalan, S., & Pettarani, A. P. (2021). The Influence of Spiritual Intelligence on Leadership Competency in The Scope of Government Institutions. *Indonesian Journal of Learning Education and Counseling*, 3(2), 170– 182. https://doi.org/10.31960/ijolec
- Skrzypińska, K. (2021). Does Spiritual Intelligence (SI) Exist? A Theoretical Investigation of a Tool Useful for Finding the Meaning of Life. *Journal of Religion and Health*, 60(1), 500–516. https://doi.org/10.1007/s10943-020-01005-8
- Sudendra Singh, & Dr. Prashant Mishra. (2016). A Review on Role of Spirituality at Workplace. *International Journal of*

Indian Psychology, *3*(3). https://doi.org/10.25215/0303.152

- Utami, E. woro, & Dewanto, A. (2013). Pengaruh Adversity Quotient terhadap Kinerja Perawat dengan Motivasi Kerja sebagai Variabel Mediasi Alamat Korespondensi: Pengaruh Adversity Quotient terhadap Kinerja Perawat dengan Motivasi Kerja sebagai Variabel Mediasi (Studi di RSUD "Ngudi Waluyo" Wli. Jurnal Aplikasi Manajemen, 11(1), 1–11.
- Yang, K. P. (2006). The spiritual intelligence of nurses in taiwan. *Journal of Nursing Research*, 14(1), 24–35. https://doi.org/10.1097/01.JNR.0000387 559.26694.0b
- Yang, K. P., & Mao, X. Y. (2007). A study of nurses' spiritual intelligence: A crosssectional questionnaire survey. *International Journal of Nursing Studies*, 44(6), 999–1010. https://doi.org/10.1016/j.ijnurstu.2006.03 .004

Cite this article as: Rahayuwati, L., et al. (2023). Contributing Factors Affecting Spiritual Intelligence of Nurses at Bandung Hospital in Indonesia. Nurse and Health: Jurnal Keperawatan, 12 (2), 181-188. https://doi.org/10.36720/nhjk.v12i2.482