

Investigating relationship between organizational spirituality and organizational health

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Abstract

The current paper studies the relationship between organizational spirituality and organizational health in the Department of Culture and Islamic Guidance consisting of 168 employees. Data were gathered using two questionnaires. The validity of the questionnaires was confirmed by the academic and organizational experts, and the reliability was tested using Cronbach's alpha. The collected data were analyzed by SPSS software applying Spearman correlation and multiple regression analysis. The results of Spearman correlation revealed significant positive relationship between organizational spirituality and organizational health. Moreover, the results of the stepwise regression analysis indicated that organizational health can be predicted by organizational spirituality.

Keywords: Public Administration, Spirituality, Health, Development, Organization

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Introduction

In recent two decades many studies have examined the relationship between spirituality/religiosity and health at the workplace (Aldwin, Park, Jeong, & Nath, 2014; Tuck & Anderson, 2014). Moreover, there is a growing number of studies and interest in investigating the association between these two phenomena (Büssing et al., 2014; Weber & Pargament, 2014). There are many different definitions of spirituality in the workplace. However, little consensus exists regarding the definition of spirituality in the workplace. The definitions are sometimes vague and contradictory (Kinjerski & Skrypnek, 2004).

The concepts, such as morality, belief in God or a higher power, honesty, conscientiousness, forgiveness, trust, compassion, emotions, peace and harmony, altruism and the like in the researches about management and business indicate the emergence of spirituality.

Lance (2014) in the first chapter of his book indicated that the right balance between spirituality and physicality of human being is elusive but those who can manage this two concepts would prosper in the present century. Idler (2014) believes that investigations between spirituality and health are incomplete. Therefore, the goal of the present study is to address these complicated issues and determine whether there is a relationship between organizational spirituality and organizational health.

Literature Review

The concept of spirituality is explained differently in different cultures. Scholars use concepts such as spirituality, spiritual

and spirit in different ways. Some believe that the human essence is spiritual. Yet, spirituality can be associated with humanity, decent and collective values. Individuals can be spiritual or non-spiritual. In the spiritual state, people are aware of their inner power and are able to interact and communicate with the outside world (Dei, 2002).

Kinjerski and Skrypnek used interviews in their research about spirituality. They found that interviewees could not define clearly spirituality but when they were described an experience related to it, they indicated similar values and characteristics. In another recent study (Winters, 2008), spiritual homogenization of corporate culture was developed and the role of individual differences in spirituality and corporate culture was discussed.

Coyle describes spirituality as a religious obligation or behavior that is guided by certain principles and values (Cited in Long & Mills, 2010).

Spirit at work, like spirituality, has multiple, diverse and complicated definitions. Various perceptions and definitions of spirituality in the workplace has created a theoretical challenge on this phenomenon (Marques, Dhiman, & King, 2005).

An area of management that can explain spirituality a lot is organizational change management. It should be noted that organizational change has influence on employees' beliefs, values and perception which in turn affects an individual's job performance and organizational health (Tofighi, Chaghary, Amerioun, & KarimiZarchi, 2011). A healthy organization is the one that is able to achieve the best efficiency and

effectiveness using staff's potential talent and to overcome obstacles in achieving organizational goals (Ghorbani, Afrassiabi, & Rezvani, 2012).

The researchers suggest that encouraging spirituality in the workplace can lead to benefits such as increased openness and trust (Wagner-Marsh & Conley, 1999), increase organizational commitment, employees' positive job attitudes (e.g. increased job satisfaction, job involvement, and reduced turnover) (Milliman, Czaplewski, & Ferguson, 2003).

Horowitz & Strack (2011) developed a theoretical and methodological framework for the studies that link spirituality and religiousness with health and well-being (Cited in Jordan, Masters, Hooker, Ruiz, & Smith, 2013). Jordan et al. (2013) using this approach conducted 3 studies that examined an interpersonal approach to spirituality and religiousness and provided some implications for health and well-being. They found that spirituality was associated with beneficial interpersonal goals such as less loneliness and less conflict. Spirituality and religiousness may promote or damage health and emotional adjustment. It can be interpreted that the same impact can be expected on organizational health.

A recent paper has identified theoretical framework that examine religion/spirituality and health. This study has concluded that spiritual involvement has impacts on health (Idler, 2014). Weber and Pargament (2014) have reviewed recent studies that investigate the relationship between spirituality and mental health. They have reported that spirituality has the power to help or impair mental health.

Mayer and Viviers (2014) investigated the relationship between mental health, culture and spirituality in a South African organization. 27 managers were selected in this study for the interview and the results of this study indicated that spirituality and culture had impacts on mental health of managers. Tuck and Anderson (2014) explored several concepts related to spirituality (such as forgiveness, resilience, and flourishing) and they used their theoretical study as an approach to easier treat their mentally ill patients by spiritual involvement.

Following the above discussed recent studies, this paper investigates the relationship between organizational spirituality and organizational health in a new context and proposes the following hypotheses:

Primary hypothesis: There is a significant relationship between organizational spirituality and organizational health.

Secondary hypothesis 1: There is a significant relationship between meaningful work and organizational health.

Secondary hypothesis 2: There is a significant relationship between sense of community and organizational health.

Secondary hypothesis 3: There is a significant relationship between organizational values and organizational health.

Secondary hypothesis 4: There is a significant relationship between religiosity and organizational health.

Methods

This study is a descriptive and applied research that was conducted in the spring and summer of 2014. Descriptive statistics

has been used to determine the characteristics of the present study. The statistical population of the study includes employees (N=168) of the Department of Culture and Islamic Guidance in Sistan and Baluchestan provinces. A census was conducted and questionnaires were distributed among all employees. Finally, 156 questionnaires were selected collected successfully to be analyzed. This study is an applied research because it aims to develop knowledge and to use the results in a specific context. To gather the data two questionnaires were used. The validity of the questionnaire was verified by academic and organizational experts. A pre-test was conducted among 30 employees of statistical society. Then, reliability of the questionnaire was tested using Cronbach's alpha.

Measures

Organizational spirituality

Organizational spirituality used in this paper includes 25 items developed according to the scale by Milliman et al. (2003): meaningful work (6 items), sense of community (7 items), organizational values (7 items), religiosity (5 items). The scale was developed for the present study to measure organizational spirituality. The internal consistency of the items was confirmed by Cronbach's alpha (.817).

Organizational health

Organizational health used in this paper consists of 40 items. The scale developed by Hoy and Miskel (1996) was used as follows: institutional level contains institutional integrity (7 items); administrative level contains principal influence (5 items), consideration (5

items), initiating structure (5 items) and resource support (5 items); and technical level contains morale (9 items) and academic emphasis (8 items). The internal consistency of the items was confirmed by Cronbach's alpha (.879).

Data analysis

Demographic characteristics of the sample are presented in Table .

Table 1 Demographic Characteristics

Categories	Frequency	Percentage
Age range		
<30	13	8.3
31 to 40	62	39.7
41 to 50	57	36.5
<50	24	15.4
Total	156	100
Gender		
Female	72	46.2
Male	84	53.8
Total	156	100
Tenure		
<5	16	10.3
5-10	27	17.3
10-15	42	27
15-20	40	25.5
>20	31	19.9
Total	156	100
Education		
Diploma and Associate Degree	15	9.6
Bachelor's Degree	113	72.4
Master's Degree or PhD	23	14.7
Unknown	5	3.2
Total	156	100

According to descriptive statistics 8.3% of sample is 30 years old or less while 76.2% of the employees are between 31 and 50

years old and 15.4% are over 50 years old. As to the gender, 53.8% of the sample consists of males and 46.2% of females. Besides, table 1 indicates that most of the participants' tenure is between 10 and 15 years. Further, 9.6% of the sample has diploma and associate degree, 72.4% bachelor's degree, 14.7% master's and higher degree. To test the hypotheses, Spearman correlation is used and the results are reported in Table.

Primary hypothesis: There is a significant relationship between organizational spirituality and organizational health.

The results of Spearman correlation in Table show a strong positive relationship ($r=.856$, $P<0.01$) between organizational spirituality and organizational health. Therefore, the primary hypothesis of study was supported.

Table 2. Spearman correlations between organizational spirituality and organizational health

Variables	R	Sig	N
Organizational spirituality & Organizational health	.856	0.000	156

Secondary hypothesis 1: There is a significant relationship between meaningful work and organizational health.

The results of Spearman correlation in Table 1 show a strong positive relationship ($r=.739$, $P<0.01$) between meaningful work and organizational health. Therefore, the secondary hypothesis 1 is also supported.

Table 1. Spearman correlation between meaningful work and organizational health

Variables	R	Sig	N
Meaningful work & organizational health	.739	0.000	156

Secondary hypothesis 2: There is a significant relationship between sense of community and organizational health.

The results of Spearman correlation in Table show a strong positive relationship ($r=.745$, $P<0.01$) between meaningful work and organizational health. Therefore, the secondary hypothesis 2 is supported as well.

Table 4. Spearman correlation between sense of community and organizational health

Variables	R	Sig	N
Sense of community & Organizational health	.745	0.000	156

Secondary hypothesis 3: There is a significant relationship between organizational values and organizational health. The results of Spearman correlation in Table show positive relationship ($r=.683$, $P<0.01$) between organizational values and organizational health. Therefore, the secondary hypothesis 3 is supported too.

Table 5. Spearman correlation between Organizational values and organizational health

Variables	R	Sig	N
Organizational values & organizational health	.683	0.000	156

Secondary hypothesis 4: There is a significant relationship between religiosity and organizational health. The results of Spearman correlation in Table show positive relationship ($r=.682$, $P<0.01$)

between religiosity and organizational health. Therefore, the secondary hypothesis 4 was supported.

Table 6. Spearman correlation between religiosity and organizational health

Variables	R	Sig	N
Religiosity & organizational health	.682	0.000	156

Multiple regression analysis

The findings of the analysis by Spearman correlation show that there is a direct and significant relationship between organizational spirituality and organizational health. However, the strength of this relationship and the degree of predictability of each variable is determined by multiple regression analysis. In other words, multiple linear regression analysis was used to determine the degree the variance of organizational health can be predicted by the variance of organizational spirituality.

For this purpose, the output of the stepwise multiple regression of 4 tables is used.

The results of Table indicate the selected variables. *Sense of community, organizational values and religiosity* have been selected for having high impact, while *meaningful work* was deleted because of its low impact.

Table 7. Entered/deleted variables

Model	Entered Variables	Deleted Variables	Method
1	Sense of community	Meaningful work	Stepwise regression
2	Organizational values		
3	Religiosity		

The results of Table indicate the summery model including R, R square and adjusted

R square between independent variables and dependent variable. The correlation between dependent and independent variables are respectively .805, .904 and .909 for model 1, 2 and 3. In model 1, R^2 is .805, which indicates that 80% of variance of organizational health is explained by sense of community. Hence, it has the strongest impact on organizational health. In model 2, the variable organizational values, together with the sense of community, increases the predictability of dependent variable to 81 %. Then, religiosity is added to the model increasing the predictability slightly (82%). Hence, among all independent variables, the variance of organizational health can be best explained by sense of community.

Table 8. Regression summery model

Model	R	R Square	Adjusted R Square
1	.805	.648	.645
2	.904	.817	.815
3	.909	.826	.822

As to ANOVA table, which indicates the variance change in dependent variable, regression and residuals are shown. The regression shows variability of the dependent variable. The residuals show the difference between the observed value of the dependent variable and the predicted value. The less is the residual sum of squares as compared to the regression sum of squares, the better the independent variables predict the variance of the dependent variable. In all 3 steps in this study, residual sum of squares is less than regression sum of squares, which indicates that the higher is the level of organizational spirituality, the healthier is the organization. F-value indicates whether the

regression model is a good fit for research, i.e. how well independent variables predict the variance of dependent variable. To answer this question we should rely on the significance of F ($p < .05$). In this study, F-value for model 1, 2 and 3 is respectively 283.02, 342.53 and 239.92 and is significant for all three models as it is less than .01. Consequently, it indicates that independent variables can predict the variance of dependent variable well. In other words, the research regression model is a good fit and we can predict the variance of organizational health by organizational spirituality.

The last point to discuss is stepwise regression. T-value in Table 10 indicates the importance of each independent

variable in the model. It is considered to measure the impact of the independent variable on the dependent variable. Whenever, the absolute value of T is higher than 2.33 and the error level is less than 0.01 or 0.05, the variable has significant impact on predicting the variance of the dependent variable. Standardized Beta coefficients indicate the relation between independent and dependent variables.

Thus, Table reveals the most important predictors of organizational health.

Table 9. ANOVA

Model	Sum of Squares	Df	Mean Square	F	Sig
1 Regression	50509	1	50509	283.02	0.000
	Residual	27483	154		
2 Regression	63754	2	31877	342.53	0.000
	Residual	14238	153		
3 Regression	64394	3	21464	239.92	0.000
	Residual	13598	152		

Table 10. Coefficients

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig	
	B	Std. Error	Beta			
1 (constant)	64.30	6.54		9.83	0.000	
	Sense of Community	3.89	.232	.805	16.82	0.000
2 (constant)	33.56	5.37		6.24	0.000	
	Sense of Community	2.69	.195	.556	13.8	0.000
	Organizational values	2.25	.189	.481	11.93	0.000
3 (constant)	31.03	5.35		5.79	0.000	
	Sense of Community	2.62	.194	.541	13.54	0.000
	Organizational values	1.34	.385	.288	3.5	0.000
	Religiosity	1.52	.569	.221	2.67	0.000

Discussion and conclusion

This study aimed to examine the relationship between *organizational spirituality* and *organizational health*. It was found that *organizational spirituality* had a strong positive relationship with *organizational health*.

The primary hypothesis was confirmed, which means that there is a strong and positive relationship between *organizational spirituality* and *organizational health* in the Department of Culture and Guidance in Sistan and Baluchestan provinces. Accordingly, as the spirituality at workplace increases, organizational health also increases. These results are consistent with the results of Aldwin et al. (2014).

It was also concluded that *meaningful work* and *organizational health* had strong positive relationship in the Department of Culture and Guidance in Sistan and Baluchestan provinces. Therefore, the secondary hypothesis 1 was also supported, which means that as perception of work meaningfulness increases and employees obtain a better sense of what they do, organizational health increases and the level of corruption decreases in the organization. Further, it was determined that *sense of community* and *organizational health* had strong positive relationship too. This result is consistent with the results of Akpotu and Dumka (2013). They found morale, trust and honesty to be strong predictors of organizational health. Therefore, it can be concluded that self-observation and spirituality, improves employee interaction and organizational health.

This study further reveals the relationship between organizational values and health.

Likewise, *religiosity* can contribute to *organizational health*. This result is similar to the findings of Aldwin et al. (2014) which indicates that religiosity is strongly related to improved health behavior habits.

Summarizing the overall results of the current study, it can be concluded that organizations should consider spirituality as one of the most effective factors to build a healthy organization capable to maintain outstanding performance even in the highly competitive markets.

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