

Workplace Spirituality And Turnover Intentions Among The Doctors Working In Private Hospitals In Karachi, Pakistan: A Cross Sectional Study

Sana Hussain¹, Zareen Hussain²

1. Department of Social Sciences, Shaheed Zulfiqar Ali Bhutto Institute of Science and Technology (SZABIST), Karachi, Pakistan
2. Department of Quality Enhancement, Ziauddin University, Clifton, Karachi, Pakistan

***Corresponding Author:**

Dr Sana Hussain

Email: sanpsychologist@gmail.com, sana.hussain@szabist.edu.pk

Postal Address: Shaheed Zulfiqar Ali Bhutto Institute of Science and Technology 100 Campus, Clifton, Karachi 75600.

ABSTRACT

Objective:

Health workers are pillars of the health care system and a shortage of health care providers is one of the greatest challenges. The high turnover rate of the doctors leads to hazardous consequences. Therefore, human resource management of the hospital industry is concerned to retain their valuable assets. Many researches have established the relationship between employees' turnovers intentions and workplace spirituality, but there is little or no empirical data available on this phenomenon in the healthcare industry. So, the purpose of this research was to fill the gap in the literature and to identify the relationship of different dimensions of workplace spirituality with the turnover intention of the doctors working in private hospitals in Karachi, Pakistan.

Methodology:

This was a cross-sectional quantitative study and data was collected through convenience sampling from 280 doctors working in private sector hospitals in Karachi, Pakistan. All the doctors were male and between the ages of 30-45. To collect the data, a questionnaire was framed by adopting two scales, i.e. workplace spirituality and turnover intention.

Result:

To analyze the data, linear regression was used and internal reliability of the items was analyzed through cronbach alpha. The findings of the study show that the out of four dimensions of workplace spirituality two dimensions of spirituality, i.e. alignment of values and compassion were found to have a significant effect on turnover intention.

Conclusion:

To reduce a turnover rate of doctors, it is imperative for the hospital industry to enhance workplace spirituality by focusing its two factors, compassion and alignment of organizational values with personal values of doctors.

Keywords: *Workplace Spirituality, Doctors, Turnover Intention, Health care facility*

INTRODUCTION

At the present time organizations are finding it difficult to survive [1]. Therefore, organizations require learning the ways that can be helpful for them to remain competitive [2]. To achieve this goal, employees are very important for the organizations [3]. Likewise, in health care system health workers are the backbone of this system and without them health care related endeavors cannot be accomplished [4]. Adequate numbers of health workers are essential, but a shortage and retention of health care providers are the biggest challenge in this sector [5]. According to WHO, there would be a shortage of 12.9 million health care workers by 2035 [6]. One of the main reasons for the deficits and uneven distribution of health workers is turnover [5]. When an individual crosses the boundary of an organization and leaves their membership behind, it is defined as turnover [7], but tracking actual turnover behavior is difficult because it is hard to trace an employee after they leave the organization [8]. Literature shows that turnover intention is positively correlated with the actual act of turnover [9] and it can be used as a substituting factor in the study and literature of turnover itself, considering the fact that turnover intention data is far more easily tracked and accessible [10]. This

can be anticipated by examining the employee's intent to leave their present company [11, 12].

Many factors lead to turnover and it tends to be both voluntary and involuntary [13, 14]. A number of people have tried to study the antecedents of turnover intentions. Researchers have suggested that abuses done by supervisors can result in turnover intentions [15]. Whereas other suggested that health workers leave their organization due to these factors such as job dissatisfaction [16], nature of work [17], work environment [18], supervision [19], lack of autonomy [20], peer group relationship [21], remunerations [22], organizational commitment [23] and other demographic characteristics of the health care employees [24].

As a result, non-availability of health practitioners in the health care system leads to negative consequences at many levels. It does not affect the employees only, but organizations also bear the cost of losing its experienced and knowledgeable employees [25]. Moreover, an increased employee turnover rate may adversely affect the reputation and good will of the organization. Therefore, organizations are more interested to retain their competent human resource by increasing association of the employees in the organization. Because of the fact that happy and content employees are more committed towards the organization [26]. Further, adopting proper leadership qualities may help the managers in diminishing the turnover intentions [27]. However, one cannot underestimate the role of spirituality in the efforts to curb the turnover intentions. Spirituality in the workplace is a unique characteristic of organizational values and served as integral part of organizational culture [28]. Organizations that have the concept of spirituality are interested in motivating their employees through providing a culture of spiritual association between the employees and organization along with the feeling of completeness. Workplace spirituality is the subject of great interest for most of the researchers because it is strongly relevant to the well-being of employees as individuals and society collectively [29]. However, it has a positive relationship with performance, productivity, satisfaction, commitment, and reduced absenteeism and turnover [30].

There are four dimensions of workplace spirituality, i.e. meaningful work, spiritual orientation, compassion and alignment of values [31]. Meaningful work can be described as engaging in a work that has a higher purpose [32]. If the employees find their work interesting and meaningful, they start to enjoy it. This positivity, results in a successful relationship between the employees and their organizations in the long run because they feel themselves more motivated, engaged and satisfied. Spiritual orientation is

defined as the transcendental experience an individual gets at work. It can also be described as the degree of meaningfulness employees finds in their job [32]. Compassion is described as an emotional relation exists among the employees that motivate them to help others [33] and the alignment of values can be defined as the consistency between one's own convictions and values of one's workplace [34]. In other words, it is the psychological association of the employees with their workplace.

Literature shows that spirituality enables an individual to profit by expanding "joy, peace, tranquility, job satisfaction and commitment" [28]. Spirituality is also connected with expanded creativity, honesty, and by relying on the assurance of employment [35].

Although few researches have proven the relationship between employee turnover intentions and workplace spirituality [36, 37], but there is a visible research gap in the literature and rarely any study has been conducted to assess the connection of different dimensions of workplace spirituality among doctors' turnover intentions. Therefore, the objective of the research was to study the relationship between different dimensions of workplace spirituality & turnover intentions of doctors working in the private hospitals of Karachi.

Theoretical and conceptual Framework

There are two theories behind this research project. One is perceived organizational support theory and another is a social exchange theory. According to the first theory, employees create a generalized concept about the degree to which organization values their efforts, contributions and cares about their well-being [38].

As organizational support has a significant direct impact on employee engagement with their organizations. If an organization has the culture of considering their employees as an asset, the employees will stick to their organization in the long run and benefit the organization in return [39].

The social exchange theory describes that individuals or employees of an organization calculate the worth of a relation by subtracting its opportunity costs from the rewards it provides. Spiritual connectedness considered as the cost in the sense of time and lost opportunities while working at any workplace. Thus, current study aimed to motivate HR managers of the hospitals to pay significant attention towards different supportive activities by which they can enhance the commitment of their employees and reduce turnover intention.

METHOD

Hypotheses

For this study following four hypotheses were formulated:

1. There is a significant relation between meaningful work and employee turnover intention
2. There is a significant relation between the spiritual orientation and employee turnover intention
3. There is a significant relation between alignment of personal and organizational values and employee turnover intention
4. There is a significant relation between compassion and employee turnover intention

Procedure:

A total of 300 questionnaires were distributed to doctors working in ten private sector health care facilities, but 280 respondents provided their opinion for the present study and this data was used for further statistical analysis.

Sample:

The convenience sampling technique was used for data collections. All Participants were medical doctors working in a private sector hospitals. All of them were males between the ages of 30-40 with at least two years of working experience in a hospital setting.

Instruments for Data Collection:

A structured questionnaire was designed for all the variables used in this study. There were total 23 questions. To measure workplace all the four dimensions of workplace spirituality 20 questions were adapted from the workplace spirituality scale [31]. This adapted scale has also been used in Karachi, Pakistan [40]. While, to measure turnover intentions remaining 3 questions were adopted from the Michigan organizational assessment questionnaire [37]. This instrument has also been previously used in Karachi [27].

Statistical Technique

Data analysis was done by using the statistical analysis tool of SPSS 23. After the collection of data, reliability of data was checked by cronbach alpha. Linear Regression was used to test the impact of independent variables (dimensions of workplace spirituality) on the dependent variable turnover intention. To analyze the impact of the dimensions of the workplace spirituality on the turnover intentions, following regression model was developed:

$$TI = \alpha + \beta_1 MW + \beta_2 C + \beta_3 SO + \beta_4 (APOV) + \epsilon$$

RESULTS

Table I: Reliability

To check the internal reliability of data and correlation between various items, the Cronbach alpha test was run. Table I shows that the values of cronbach of all the variables are greater than 0.7, so it can be said that the data of this study is reliable. The cronbach alpha values of the variables are presented below:

Variable Name	Number of Items	Cronbach alpha
Meaningful work	08	0.901
Spiritual Orientation	11	0.881
Compassion	04	0.829
Alignment of personal and organizational values	05	0.870
Turnover intention	03	0.798

Table II: Shows the significance of independent variable with respect to dependent variable i.e. turnover intention.

Independent Variables	Beta (β)	t-value	p-value	VIF
(Constant)	0.084	79.389	0.000	
Spiritual Orientation	0.102	-1.212	0.227	75.591
Compassion	0.102	-10.436	0.000	111.842
Meaningful Work	0.057	0.540	0.590	33.396
Alignment of values	0.007	-1.982	0.049	1.009
Adjusted R ² = 0.985		F-Statistics = 3477.533		
Sig = 0.00		Standard Error 6.660		

*Dependent Variable: Turnover Intention

$$TI = \alpha + \beta_1 MW + \beta_2 C + \beta_3 SO + \beta_4 (APOV) + \epsilon$$

$$TI = 0.084 + 0.057MW + 0.102 C + 0.102 SO + 0.007APOV + 6.660$$

Interpretations

The regression summary table shows that the value of the adjusted R² is 0.985. This shows that turnover intention is strongly explained by the independent variables, i.e. meaningful work, spiritual orientation, compassion and alignment of personal and organizational values. In order to identify that whether the model, selected for this study is a good fit or not, F Value in ANOVA test was used. In the table, F statistics in ANOVA test is 3477.533 which is greater than 4 which means that the appropriate model was selected for this study. Further, the probability of relationship between meaningful work and turnover intention is greater than 0.05 (0.590). Moreover, probability of relation

between spiritual orientation and turnover intention is also higher than 0.05 (0.227). It shows that meaningful work and spiritual orientation have no significant relationship with turnover intention.

DISCUSSION

Analysis of data shows that alignments of values and compassion have more significance as compared to remaining two factors; meaningful work and spiritual orientation. The findings of the present study affirm the exploration of the literature that compassion and alignment of personal values with organizational values have a significant relationship with turnover intention [41], but the finding of the study is contradictory with the study conducted in the past showing that meaningful work has a significant impact on turnover intention [41]. The possible reason of this finding could be that in Pakistan, doctors are considered as a symbol of prestige and parents start to save their money either for the marriage or medical education of their children since when their children are born. Generally, children grew up hearing the importance of medical science and are encouraged to adopt this as a career. They are told that saving lives and serving humanity is a noble act. It means that doctors are well aware about the worth of their profession and compassionate about their work. On the other hand, they cannot neglect the fact that their parents have put all of their resources at stake to make them doctors. In this situation, they want to pay back to the family for their continuous support and whenever they find good opportunities with better incentive they immediately switch. Most of the doctors go abroad and contributing factors towards doctors' migration in a developing country are lack of career advancement, poor structure [42], absence of research culture and unavailability of funding, stressful work environment and greater workload [43]. In a resource limited country [44] it is challenging to find an adequate number of trained health workers [45].

In the light of the above discussion it can be said that health industry should focus on enhancing

the compassion and alignment of values by providing appropriate personal and professional growth opportunities. As, these two components are strongly related to turnover intention of the doctors. Because of the fact, that when organizational values are similar to the employee's personal values and they are compassionate about their job, this creates a connection between the employee and their organization. Eventually, they begin to feel energized enough by their work and the people around them. They become more enthusiastic towards their job and able to maintain work life balance. This balance creates a strong bond between the employee and the organization, thus automatically reduces the turnover intention.

This study has few limitations, as the purpose of this research was mainly to determine the relationship between workplace spirituality and turnover intention of male doctors working in private hospitals in Karachi. Thus, not applicable to other sectors and gender unless further explores by using different variables. This study was conducted only in health care providing organizations of Karachi, but it has provided the foundation for future researchers and further researches can be conducted on different types of healthcare providers in different other cities of Pakistan and around the globe with larger sample size.

CONCLUSION

Employee turnover rate is an important concern for all the organizations around the globe [46] and with this purpose, current study tried to fill the gap in the literature related to workplace spirituality and turnover intention of health professionals. The study revealed similar results from the previous studies, but there are some contrary findings between the relationship of different dimensions of the workplace spirituality and turnover intention. In this state, HR professionals of the health care facilities need to understand that by neglecting and giving no importance to spirituality at work, the health industry is losing its most valuable asset. If managers want to retain the backbone (doctors) of the health industry, they should pay heed to spirituality at work, so that employees feel themselves much energized by the work and their work environment. This will not only increase the connotation of employees with their organizations, but will also be helpful in reducing turnover intention of the employees.

ACKNOWLEDGEMENT

Authors pay deepest gratitude to all the respondents and support staff of health facilities for their valuable support.

REFERENCES

1. Khan, M. M. S., Ghayas, M. M., & Kashif, S. Why firms fail to sustain? Evidence from Dow Jones Index. *South Asian Journal of Management Sciences*. 2019. 13(1), 116-136.
2. Ghayas, M. M., & Khan, M. M. S. Learning Organizational Practices and Job Satisfaction: A Case of IT Sector of Karachi. *International Journal of Experiential Learning & Case Studies*. 2019; 4(2), 269-277.
3. Ghayas, M. M., & Hussain, J. Job satisfaction, service quality and the customer satisfaction in the IT sector of Karachi. *International E-Journal of Advances in Social Sciences*. 2015; 1(3), 443-451.
4. Initiative J. L. Human Resources for Health: Overcoming the Crisis. *Global Equity Initiative*; 2004.

5. Yumkella F. Retention of Health Care Workers in Low-Resource Settings: Challenges and Responses. Intra Health International; 2006.
6. Truth A. U. No Health without a Workforce. World Health Organisation (WHO); 2013.
7. Price, J.L. "Reflections on the determinants of voluntary turnover", *International Journal of Manpower*. 2001; Vol. 22 No. 7, pp. 600-624. <https://doi.org/10.1108/EUM000000006233>
8. Linda K. Johnsrud & Vicki J. Rosser. Faculty Members' Morale and Their Intention to Leave, *The Journal of Higher Education*. 2002; 73:4, 518-542, DOI: 10.1080/00221546.2002.11777162
9. Bluedorn, A. C. A Unified Model of Turnover from Organizations. *Human Relations*. 1982; 35, 135-153. <http://dx.doi.org/10.1177/001872678203500204>
10. Fang, Y. Turnover propensity and its causes among Singapore nurses: An empirical study. *The International Journal of Human Resource Management*. 2001; 12(5), 859-871. <https://doi.org/10.1080/09585190110047875>
11. Bothma C. F., Roodt G. The validation of the turnover intention scale. *SA Journal of Human Resource Management*. 2013; 11(1):1-12.
12. Kivimäki M., Vanhala A., Pentti J., et al. Team climate, intention to leave and turnover among hospital employees: prospective cohort study. *BMC Health Services Research*. 2007; 7(1):p. 170.
13. Price J. L., Mueller C. W. A causal model for turnover for nurses. *Academy of Management Journal (AMJ)* 1981; 24(3):543-565.
14. Im U. L. Literature Review on Turnover-To Better Understand the Situation in Macau. 2011.
15. Ghayas, M. M., & Jabeen, R. Abusive Supervision: Dimensions & Scale. *New Horizons*. 2020; 14 (1), 107-130
16. El-Jardali F., Alameddine M., Jamal D., et al. A national study on nurses' retention in healthcare facilities in underserved areas in Lebanon. *Human Resources for Health*. 2013; 11(1):p. 49.
17. Ahmad T., Riaz A. Factors affecting turn-over intentions of doctors in public sector medical colleges and hospitals. *Interdisciplinary Journal of Research in Business*. 2011; 1(10):57-66. [Google Scholar]
18. Yaya Bocoum F., Koné E., Kouanda S., Yaméogo W. M. E., Bado A. R. Which incentive package will retain regionalized health personnel in Burkina Faso: A discrete choice experiment. *Human Resources for Health*. 2014; 12 (1, article no. S7) doi: 10.1186/1478-4491-12-S1-S7.
19. Masum A. K. M., Azad M. A. K., Hoque K. E., Beh L.-S., Wanke P., Arslan Ö. Job satisfaction and intention to quit: an empirical analysis of nurses in Turkey. *PeerJ*. 2016; 4, article e1896
20. Galletta M., Portoghese I., Battistelli A. Intrinsic motivation, job autonomy and turnover intention in the Italian healthcare: the mediating role of affective commitment. *Journal of Management Research*. 2011; 3(2, article 1)
21. Asegid A., Belachew T., Yimam E. Factors influencing job satisfaction and anticipated turnover among nurses in Sidama zone public health facilities, South Ethiopia. *Nursing Research and Practice*. 2014; 2014:26. doi: 10.1155/2014/909768.909768
22. Gautam A., Tuswa I. Factors affecting voluntary staff turnover: a case study of springs parklands hospital, South Africa. *European Scientific Journal*. 2016; 12(10)
23. Omar K., Anuar M. M., Majid A. H. A., Johari H. Organizational commitment and intention to leave among nurses in Malaysian public hospitals. *International Journal of Business and Social Science*. 2012;3(16)
24. Abera E., Yitayal M., Gebreslassie M. Turnover intention and associated factors among health professionals in university of gondar referral hospital, Northwest Ethiopia. *International Journal of Economics and Management Sciences*. 2014; 3(4):1-11.
25. Ferede A, Kibret GD, Million Y, Simeneh MM, Belay YA, Hailemariam D. Magnitude of Turnover Intention and Associated Factors among Health Professionals Working in Public Health Institutions of North Shoa Zone, Amhara Region, Ethiopia. *Biomed Res Int*. 2018; 2018:3165379.
26. Ghayas, M. M. Impact of Job Satisfaction on Organizational Commitment in the Pharmaceutical Industry of Karachi. *NUML International Journal of Business & Management*. 2015; 10(1), 63-73.
27. Prakasch, J. N., & Ghayas, M. M. Impact of Servant Leadership on Turnover Intentions in Banking Sector of Karachi. *RADS Journal of Business Management*. 2019; 1(1), 22-30.
28. Giacalone, R.A., Jurkiewicz, C.L. Right from Wrong: The Influence of Spirituality on Perceptions of Unethical Business Activities. *Journal of Business Ethics*. 2003; 46, 85-97.
29. Sheep, M.L. Nurturing the Whole Person: The Ethics of Workplace Spirituality in a Society of Organizations. *J Bus Ethics*. 2006; 66, 357-375.
30. Fry, L., & Nisiewicz, M. Maximizing the triple bottom line through spiritual leadership. Stanford: Stanford University Press. 2013.
31. Pradhan, R.K., Jena, L.K. and Soto, C.M. "Development and validation of workplace spirituality scale: an Indian perspective", *Business: Theory and Practice*. 2017; Vol. 18 No. 1, pp. 43-53.

32. Kinjerski, V. M.; Skrypnek, B. J. Defining spirit at work: finding common ground, *Journal of Organizational Change Management*. 2004; 17(1): 26–42.
33. Krishnan, V. R. Effect of transformational leadership and leader's power on follower's duty-orientation and spirituality, *Great Lakes Herald*. 2007; 1(2): 48–70.
34. Mitroff, I. I.; Denton, E. A. A spiritual audit of corporate America, a hard look at spirituality, religion, and values. San Francisco: Jossey-Bass. 1999b
35. Goodarzi, T. Hojjat; Kaviani, Mostafa (2013). The Relationship between Spirituality and Job Satisfaction. *IOSR Journal of Business and Management*. 2013; 12 (5) : 108-116.
36. Soder, Paula F., "Workplace spirituality and employee work intentions: examining the relationship and the mediating role of ethical leadership." (2016). Electronic Theses and Dissertations. Paper 2569.
37. Cummann, C., Fichman, M., Jenkins, D., & Klesh, J. The Michigan organizational assessment questionnaire. Unpublished Manuscript, University of Michigan, Ann Arbor, Michigan. 1979.
38. Eisenberger, R., Huntington, R., Hutchison, S., & Sowa, D. Perceived organizational support. *Journal of Applied Psychology*. 1986; 71(3), 500–507.
39. Colakoglu, Ulker and Culha, Osman and Atay, Hakan, The Effects of Perceived Organisational Support on Employees' Affective Outcomes: Evidence from the Hotel Industry . *Tourism & Hospitality Management*. 2010; Vol. 16, No. 2, pp. 125-150.
40. Zaidi, H., Ghayas, M. M., & Durrani, T. I. K. Impact of Work Place Spirituality on Job Satisfaction. *RADS Journal of Business Management*. 2019; 1(1), 49-57.
41. Ashmos, D. P., and D. Duchon. 2000. Spirituality at work: A conceptualization and measure. *Journal of Management Inquiry*. 2000; 9 (2) : 134-44.
42. Shakir S, Ghazali A, Shah IA, Zaidi SA, Tahir MH. Job satisfaction among doctors working at teaching hospital of Bahawalpur, Pakistan. *J Ayub Med Coll* 2007; 19: 42-5.
43. Afzal S, Masroor I, Shafqat G. Migration of health workers: a challenge for health care system. *J Coll Physicians Surg Pak* 2012; 22: 586-7.
44. Hussain S, Hasnain J, Hussain Z, Type of Treatment Supporters in Successful Completion of Tuberculosis Treatment: A Retrospective Cohort Study in Pakistan. *Open Infect Dis J*. 2018; 10:37-42.
45. Hussain S, Malik A.A, Hussain Z. A Randomized Controlled Intervention Trial: Effect of Counselling on Treatment Adherence and Self-Esteem of Women Patients Receiving Tuberculosis Treatment. *Open Medicine Journal*. 2016; 3:27-33.
46. Ghayas, M. M., & Siddiqui, S. J. (2012). Impact of job satisfaction on turnover intentions in the pharmaceutical industry of Karachi. *South Asian Journal of Management Sciences*. 2012; 6(2), 42-49.