

Exploring workplace spirituality among nurse

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Exploring the impact of workplace spirituality on nurse work engagement: an empirical study on Indonesian government hospitals

Impact of
workplace
spirituality

351

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2 Abstract

Purpose – Highlighting the prominence of spirituality at work, this paper aims to scrutinize the mediating role of perceived person-organization fit (P-O fit) on the relationship between workplace spirituality and nurse work engagement in the context of two Indonesian government hospital.

Design/methodology/approach – Cross-sectional survey data of 138 nursing staff from two government hospitals operating in Indonesia were analyzed using structural equation modeling to estimate the mediation effects of perceived P-O fit on the relationship between workplace spirituality and nurse engagement.

Findings – The results of the research proved the positive effect of workplace spirituality on nurse work engagement. Likewise, P-O fit act as a mechanism through which workplace spirituality affects nurse engagement.

Research limitations/implications – This study only uses a sample of two government hospitals, which may limit the generalizability of the outcomes. Despite of the small sample, the result of this inquiry provides new insights into the advancement of human behavior theory in hospital service, especially on the factors that influence nurse work engagement. On a broader sense, top management might set a necessary program to wholly nurture nurse spiritual potential as a step to convalesce their spiritual awareness.

Practical implications – Based on the discovery, the study presents strong theoretical and managerial implications that can be used by health care institutions to evaluate the importance of workplace spirituality on employee engagement among nurses. This paper contributes by fulfilling the fissure in the management literature of health care, in which empirical studies on workplace spirituality in the relationship with employee engagement have been scarce until now.

Originality/value – The present perceived P-O fit in the relation between the spirituality of the workplace and nurse engagement enhances human behavior theory in the health care context.

Keywords Employee engagement, Workplace spirituality, Nurse, Work engagement,
Person-organization fit

Paper type Research paper



Introduction

Being the pre¹¹minant professional groups in health care institutions, nursing staff are considered to play a cardinal role in providing¹¹erative and vital health-care services (Anvari *et al.*, 2017). They play numerous roles such as caregiver, nurturer, advisor and counselor on the physical and psychological needs of patients, as well as promote on patients' health, well-being and remedial (Solli *et al.*, 2015). The previous study also showed

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that health care workers, particularly, nurses, were considered one of the most stressful occupations (Karimi *et al.*, 2014). Furthermore, as noted by Zeller and Levin (2013), professionals with job profiles dealing with service to a human being such as health care employees may have an adverse impact on their mental health and more predisposed to experience symptoms of emotional exhaustion, depersonalization and burnout, which eventually lead on depression and decrease of their qualification. Therefore, a profession 11 nurses needs to incorporate devotion to the higher purpose, which inserts caring for the spiritual 6 dimension as part of their clinical activity (Taylor, 2002; Hamid *et al.*, 2019).

The concept of spirituality is prominent and forms the foundation of nursing activities (Van Leeuwen and Cusveller, 2004). Hence, including spirituality into nursing care could affect not only the outcomes of a nurse such as increasing contentment level and work engagement, yet the patient outcomes as well, such as well-being, mental health and recovery. A preceding body of research proved that workplace spirituality had recognized some positive impacts of encouraging spirituality at work that contains greater nurse resilience (Hunter-Hernández *et al.*, 2015), low depression (Barton and Miller, 2015) and high affective commitment (Djafri and Noordin, 2017). Earlier research of workplace spirituality also revealed the benefit of spirituality at work in enhancing human wellness; this is because the spiritual aspect does not only divert to the physical aspects but rather to the social and emotional concerns (Adawiyah *et al.*, 2020; Carmody *et al.*, 2008). The professional nursing future depends on discovering ways to form positive and high-grade workplace environments, which encourage meaning and wellness in life through mutual interconnectedness between individuals, relatives, community, society, nature and the significant or sacred (Mohammad *et al.*, 2011).

The proponents of workplace spirituality theorists argue that spirituality is a powerful instrument for a heartening sense of meaning, purpose and connectedness in organizational activities that result in greater personal fulfillment and organizational effectiveness (Adawiyah dan Pramuka, 2017; Vallabh and Singhal, 2014). Despite the bountiful interests and theoretical connection linkages of workplace spirituality to various positive business outcomes, its relationship to work engagement remains woefully underexplored and, to a lesser extent, in nursing. An intensive effort has been made to learn more about Indonesian nurses, especially in a spiritual context. As argued by Lucchetti *et al.* (2016), Indonesia has become a central area of inquiry on spirituality and stressed the need to study Indonesian health-care employees' spirituality on the basis of the cultural aspect, local particularizes and religion distinctions. In the context of cultural foundation, Biro (2012) also referred to the dearth of the "spiritualism movement" in cross-cultural health care research and further investigation is needed into the role of spirituality and health worldwide and how best to address this important issue in clinical care outside of western society.

Roof (2015) suggested that research into spirituality-engagement connections more likely when a sense of community, meaning and alignment with organizational value and connection with something greater can profoundly affect those engagement-related psychological work conditions. This attitude can only be carried out by nurses who are capable of finding ultimate meaning in life and transcendence to a higher purpose that will create energy and extra motivation in working dealing with patients and exert significant effort toward their organization. As nurses working meaningfulness strongly influence the quality of health care services, which significantly improve patient care, it is worthwhile to hold empirical research to observe the concept of workplace spirituality as a regulative ideal (McGhee and Grant, 2008). So, it expected that workplace spirituality perspective could encourage nurses to search for meaning to their work (Izak, 2012), promotes nurse connectedness (Corner, 2009) and, in turn, create an effective strategy for setting a

spiritually- nurturing work environment and enhancing work engagement (Rego and Pina e Cunha, 2008). Perceived person-organization fit (P-O fit), which is described as employees' congruence or suitability of work values to their organization, has been recognized as an essential key factor to maintaining flexible adaptation, individuals' resilience and promoting individual well-being (Sekiguchi, 2004; Bissett, 2014). This impresses that when an individual has value alignment in the organizational ideals, they are more probable to strengthening the sense of meaning and connectedness as a form of workplace spirituality and increasing intrinsic task motivation as a manifestation of engagement in appreciated activities (Magidson *et al.*, 2014). Urgent attention is needed to investigate the potential of a beneficial process over which the alignment among the nurses' inner value and his or her organizational spiritual values affects work engagement. For this reason, it was expected to further contribute to our comprehension of the possible mediation effect of person-organization value fit in the relationship between workplace spirituality and nurse work engagement.

To conclude, the ultimate purpose of this research was to examine an integrated model linking workplace spirituality with work engagement theory to attain a deeper comprehension of the mechanisms by which workplace spirituality affects psychological condition of work engagement and also the mediating effect of perceived P-O fit among nurses.

Theoretical framework

Workplace spirituality

Ashmos and Duchon (2000) describe workplace spirituality as an "experience of an employees' spirituality in the workplace, is nurtured by meaningful work and takes place in the context of community." Workplace spirituality has been mainly uttered as a function of an organization that directing their energy toward spiritual values and providing meaning and purpose to employees work activity, generate an open system work culture, give emphasis to employees work performance and contribute to society in a meaningful way (Simpson, 2009). Giacalone and Jurkiewicz (2003) asserted that the fundamental prominence of workplace spirituality is an energetic factor in building trust between employers and their employees, the substance that positively affects overall organizational effectiveness and performance.

Additionally, prior theorist has recognized the usefulness of approving spiritual practices at work that increase employee morale and decrease work stress and burnout. Consequently, spirituality as a phenomenon turns out to be a significant element of organizational spiritual principal necessary for sustainable performance growth (Palmer and Wong, 2013). To buttress this rationale, Milliman *et al.* (2017) stated that from a humanistic standpoint workplace spirituality seeks to understand employees' experience of connections with others in the workplace by fulfilling deeply personal and transcendent needs for growth, community and association with something greater.

Work engagement

Work engagement has a manifold inheritance as a concept (Schaufeli and Bakker, 2010). Macey and Schneider (2008) divided the construct of work engagement into three classifications, namely, trait, state and behavioral engagement. As a psychological state, engagement reflecting how much of involvement of themselves in work activity and relatively steady affect that related to high energy, identification and absorption dimensions of an employees' connection with their work experience (Macey and Schneider, 2008). Kahn (1990) proposed that employees should have adequate physical, cognitive, emotional and

meaningful psychological resources to be engaged at work. Hence, an organization with limited resources available have associated with more negative attitudes from employees (Macey and Schneider, 2008). Schaufeli *et al.* (2002) built on his initial frame on engagement and elucidated that rather a temporary psychological state, engagement is more interpreted as the persistent and pervasive affective-cognitive psychological state of work impression and reflecting the willingness to invest to their work role (Stander and Rothmann, 2010). Work engagement is a motivational construct developed as the opposite of burn out and revealed in a set of three unique dimensions defining an individuals' persistent and positive affective-emotional state of fulfillment in employees' condition categorized by vigor, dedication and absorption (Schaufeli *et al.*, 2002). Vigor refers to the degree to which individuals' body and mind function at the high level of energy, enthusiasm to persist and invest effort in ones' task amid job complications and more emotionally resilient. Dedication discloses to feel energetic and love their job and experiencing a sense of involvement, significance, enthusiasm and challenge at work even if the job is difficult. Absorption contained a sense of pleasure, full of concentration and satisfied in engrossing the work role and fell standing apart from daily work activity.

Person-organization ¹

Chatman (1991) defined P-O fit as the suitability or congruence of work values between the focal person and the patterns of organizational values. Considered in this light, this statement relies on a basic premise that when the perceptions of the members of an organization express shared values and represent the organizational values, this, in turn, lead to improved individual and organizational outcomes. Research evidence suggests that high levels of congruency will result in effective communications, enhanced trust and encourage cooperation among two parties and mitigate the detrimental effects of diversity. Moreover, According to Byrne (1961), as values reflect a predisposition of behavior, similarity perception allows employees to exchange more positive and supportive behaviors, which results in the consequence that workers with higher P-O fit receive greater degrees of support and acceptance from coworkers and supervisors (Jin, 2015). Empirical evidence from previous studies, in general, support the positive impacts of

P-O fit on employees' work demeanors and behavior. It has been discovered that value congruence leads to interpersonal trust, high job satisfaction and better employee performance (Verquer *et al.*, 2003; Hoffman and Woehr, 2006). In addition, based on Tajfel and Turner's (1979) foundational lens of social identity theory, Ashforth and Mael, (1989) proposed that employees may become predisposed to attach in the organization to emphasize their self-concepts, they assumed that individuals will be attracted to each other, willing to join and retain membership in an organization that share symmetrical fundamental characteristics, thus if an individual perceives the organization reflected value that employees desired (Dutton and Dukerich, 1991), likely, they will possibly use the organization as a foundation for building social identity (Ashforth and Mael, 1989).

³ The relationship between workplace spirituality and work engagement

Empirical research consistently revealed that work engagement had been correlated with numerous important organizational outcomes, for instance, commitment relationship (Indartono and Wulandari, 2014), job performance (Bakker, 2011; Rich *et al.*, 2010) and discretionary behavior (Sholikhah *et al.*, 2019). Further, Shuck and Wollard (2010) also argued that as an individual-level construct, engagement is affected by employee attitudes and perceptions about the work environment. To explain this, Roof (2015) further stated that the connection between spirituality as an employees' inner life reflection and engagement is

grounded in how spirituality can be able to meaningfully affect engagement perceptions linked to the psychological condition of work-related contextual factors. As pointed by Saks (2011) there are many similarities between workplace spirituality and work engagement, for instance, feelings of being appreciated and involved, a sense of completeness and wholeness, connection and identification with the organization. Hence, spiritual feelings assist individuals to participate in work relevant cognitive process (Luis Daniel, 2010), as well as emotionally connected to a meaningful relationship with co-workers or supervisor and concern for other feelings (Harter *et al.*, 2002; Luthans and Peterson, 2002). Spirituality at work is desiderated to be connected to an individuals' demeanors and exerts significant effort toward their work (Milliman *et al.*, 2003), a work situation that most likely encourage intrinsic motivation (Saks, 2006), which may escalate the possibility of them engaging in supportive development of psychological work role (Bakker *et al.*, 2008). Finally, as noted by Karakas (2010) employees who feel themselves spiritually empty, unconnected with ones' work also with co-workers and others related to work, lost and lack of searching for meaning is likely related to individual frustration and burn out (Maslach *et al.*, 2001), a circumstance essentially the opposite of being engage. Therefore, when an individual perceives that his organization boosts spirituality, then it is heightening the people to engage in a more rigorous understanding of meaning, purpose, feel an impact and fulfillment in their work and mission in the workplace and bring their whole self to dignified work responsibility. Therefore, the relationship between workplace spirituality and nurse work engagement is assumed as being:

H1. Workplace spirituality relates positively to work engagement.

The relationship between workplace spirituality and person-organization fit

Rego and Pina e Cunha (2008) argued that perception of workplace spirituality as humanistic organizational values affected employees' behavioral outcomes such as job involvement, employee retention and organizational identification. Prior research has established an intellectually robust study in this field, and concluded that the higher individual spirituality, the lower is their burn out (Kumar, 2015) and the higher is their engagement and organizational commitment (Rich, 2010). In this regard, employee consistently seeks completeness, joy and meaningful work along with a sense of self-worth, connection with a higher purpose in work activities, sense of contribution to the community and an integrated value system (Giacalone and Jurkiewicz, 2015). This will create a collective and supportive positive climate, which is recommended in research as a factor that can diminish the negative effect of deteriorating of mental health (Mitroff, 2003) and promote the psychological well-being of employees (Lawrence and Callan, 2011). To increase employees' engagement, the organization should integrate and building workplace spirituality, either by properly management practice or through escalating uniform sense of missionary ardor. In response, employees will have an opportunity to improve a sense of obligation and are willing to reciprocate with more proactive and supportive actions for fair and ethical treatment from the organization.

A P-O fit characterized by value alignment gives a better viewpoint of how expectation from the organization can meet individual recognition and fostering a meaning to the persons' life. Kolodinsky *et al.* (2008) stated that employees who transcend spirituality at the workplace are better connected to the organizational intention and values, and assume their daily activities at work having spiritual significance (Richards, 1995). When a strong fit exists between the employees' spiritual values and the organizations' values, worker identification with the organization is amplified and, in turn, they are more likely to be an

active contributor to the whole community. On the other hand, if their experience of workplace spirituality collides, their perception of perceived P-O fit will be degraded. They will experience loss of meaning, higher anxiety and alienation from their work environment, which may, in turn, result in poor job performance. In short, as noted by Afsar *et al.* (2016) it is reasonable that workplace spirituality as an exegesis of how individual perceived their workplace, fulfilled the contentment of their spiritual needs and meaning in their task, this spiritual experience. Sequentially, increase the sense of perceived P-O fit, as their individual growth and individual values are appropriate with the pursuance of organizational values and objectives. Thus, in the present study, we hypothesized that there is a positive relationship between workplace spirituality and P-O fit:

H2. Workplace spirituality relates positively to P-O fit.

The relationship between person-organizational fit and work engagement

The basic broad definition of perceived P-O fit is stated as a similarity of individual values and whole organization values (Chatman, 1989; Edwards and Cable, 2009; O'Reilly *et al.*, 1991). Research conducted by Rich *et al.* (2010) found that perceived P-O fit influences positive work attitudes such as organizational citizenship behavior and organizational commitment (Verquer *et al.*, 2003) and work behaviors of an employee, for instance, creativity and innovativeness (Hoffman and Woehr, 2006). Unfortunately, less research has been handed over to the role of perceived P-O fit in investigating organizational outcome such as engagement.

Saks (2006) proposed that individual with a good P-O fit frequently display similar goals and pleased with their task, primarily motivated and subsequently exhibit higher job and organizational engagement (Rich *et al.*, 2010). Thus, it assumed that when an employee has a good perceived organizational fit within the workplace, work engagement behavior are observed more often, than those who do not perceive value congruence. Moreover, other than the mentioned viewpoint and propositions, a strong theoretical rationale for the connection between perceived person-organization value fit and work engagement can be discovered in the social exchange theory (Saks, 2006). The social exchange theory (Blau, 1964) assumed that in a mutual relationship, where the perceived P-O fit is present, it would give a better comprehension of compatible organizational role expectations and individual realization centered on their preferred self-image (Chatman, 1989; Kahn, 1990). This process becomes an essential rule for constructing trustful social relationships with mutual faithfulness and, in turn, will powerfully encourage personal sacrificed in the hunt of organizational productivity because of the experienced significance and purpose of their daily work activity (May *et al.*, 2004). Sequentially, employees will display a higher level of engagement with their jobs and organizations, as a primary contributor to sustainable performance outcomes. Therefore, the above arguments lead to the following hypotheses:

H3. A positive relation exists between P-O fit and nurse engagement.

The mediating role of perceived person-organization fit

As discussed by earlier research, humanistic nature of individual at the workplace (Milliman *et al.*, 2017) and the chance to do meaningful work also advance employee morale, individual self-esteem, optimism, health, happiness and personal growth (Rego and Pina e Cunha, 2008) and reducing stress, burnout and frustration (Karakas, 2010). Therefore, employees may develop favorable social ties, greater emotional intimacy and enhanced social cohesion

(Afsar *et al.*, 2016). They will bring their whole self cognitively, concentration on his daily task psychically, experiencing to their work and to others emotionally, feel connected to the transcendent higher power spiritually (Moxley, 2000) and more willing to immerse themselves in the work role to the organization (Rego and Pina e Cunha, 2008). Consequently, broad experience and stable alignment between their values and organizational values, that leads them to consider the work being undertaken as a mission rather than a regular job and in sequence make them more dedicated to their organizations' values and goals (Gavin and Mason, 2004). It has been proposed that spirituality needs at the workplace such as a search for meaning, purpose and transcendence to a higher power will help employees to find for the sacred in their existence (Koenig, 2010) and provides importance as the employee connects with supportive work relationships (Kahn, 1990). Empirical research studies suggested, employees who hold values and beliefs similar to those of the organization, create a natural connection among people throughout the organization in such a way that relationships can be personalized to meet expectations. According to Afsar *et al.* (2016), when employees experience spirituality at work, they feel better alignment with the aim and values of an organization and this condition will lead employees to experience consciousness, personal growth and development. Thus, this condition will encourage P-O fit and subsequently will increase the likelihood of engagement with work. As a result, P-O fit characterized by value congruence plays an intermediary role in the relationship between workplace spirituality and nurse engagement. Therefore, from the above point of view, it is hypothesized that:

H4. P-O fit mediates the relationship between workplace spirituality and nurse engagement.

Research method

Participants and procedure

This research examined the relationship between nurses' workplace spirituality, P-O fit and nurse work engagement through hypotheses testing based on field survey using questioner. Data were gathered from two government hospitals of Indonesia to have a better and more in-depth understanding of the relationship structure among these hypotheses variables. Research participants were contacted through their top-level manager of these employing hospitals, and the questioner was emailed to participants' email addresses, which contained within a cover letter that provided further details concerning the project. To address social desirability bias and diminish evaluation apprehension, which denotes the tendency for participants to presents a positive image of themselves, this research emphasized the voluntary nature of participation in this research and confidentiality of the survey responses. They were required to immediately return the questionnaires after completing the data requested by the researcher. A total of 325 survey questioner distributed to nurses resulted in a total of 138 usable questionnaires being returned, for a response rate of 42.5%.

Based on the survey participants' responses, descriptive data involved as much as 56.51% women and 43.5% men. Regarding the age, 52.2 of the participants were between the ages of 36–45, while the rest of the respondents (47.8%) were younger than 35. Considering the number of years working with the organization, the nurse had 12.28 years of work experience with a standard deviation of 6.94. Regarding their job position, 75 participants (54.3) were junior nurse, whereas 63 (45.7%) participants were a senior nurse. Of participants, 69 (50%) were permanent nurse, while 69 (50%) were contract nurse.

Measures

Cable and Judge (1996) P-O fit survey with three items was used to measure the alignments between employees' value and organizational values. The fit scale was measured by a five-point Likert scale ranging from 1 (strongly disagree) to 5 (strongly agree) (e.g. "I feel my values "match" or fit this organization and the current employees in this organization," "my values match those currently in the organization" and "the values and "personality" of this organization reflect my own values and personality").

The workplace spirituality survey includes 21 questions settled by Milliman *et al.* (2003). Survey replies are based on a five-point Likert type scale, with survey assessment response options ranging from strongly disagree (1) to strongly agree (5). The higher values show greater workplace spirituality. Sample items: "experience joy in work" (meaningful work); "belief people support each other" (sense of community); "feel connected with organization goals" (alignment of values).

To measure nurse engagement, a nine-item scale developed and validated by Utrecht work engagement scale (UWES) (Schaufeli *et al.*, 2006) was used. The UWES-9 was designed in a five-point frequency rating scale response format ranging from (1) never to (5) always. The UWES measurement measures the three dimensions of nurse engagement, namely, vigor, dedication, absorption. Sample items included "at my work, I feel like I am bursting with energy".

Control variables

Prior research has recognized many demographic variables, which are related to nursing engagement. For the current research, we controlled for age (Krishnan and Mary, 2012), gender (Hochwarter *et al.*, 2001), employment status (Fan and William, 2010) and job position (Otis-Green *et al.*, 2002). We tested if nurses' age, gender, employment status and job position had a statistical correlation with nurse work engagement in this research and found that none of these demographic variables presented substantial statistic relationship with nurse engagement. (age $r = -0.075$, $p > 0.05$, respectively; gender $r = 0.50$, $p > 0.05$, respectively; employment status $r = -0.03$, $p > 0.05$, respectively; job position $r = -0.23$, $p > 0.05$) so as such, we followed Becker's (2005) recommendation and did not use them as control variables in our structural model analyzes, as they have the potential to weaken statistical power.

Evaluating for common method bias

As all measurements of both dependent and independent in this study were self-reported, we conducted a technique to test for bias because of common method variance. Podsakoff MacKenzie, Lee, and Podsakoff (2003) recommending various procedures to test for common method bias (CMB). CMB is a problem due to the simultaneous collection of criterion and response variables. One of the most broadly used techniques to check the occurrence of CMB is Harman's single factor test. Using exploratory component assessment, the Harman factor analysis was performed to examine whether common method variance existed. This method has an underlying assumption that the occurrence of common method variance (CMV) is indicated by the presence of one single factor that accounts for the majority of covariance among measures (Podsakoff *et al.*, 2003, p. 889). Cumulative variance from factor analysis show that the eigenvalue in measures attributed to CMV is equivalent to 5 or less on average; thus, CMV does not produce considerable bias (Malhotra *et al.*, 2006). The result of the present study revealed that three factors from extraction could not account for the difference in the data (eigenvalue > 1). Therefore, this shows that the CMB may not a significant problem in the present study. The next *post hoc* procedure was based on Bagozzi

method; this technique uses the correlation matrix procedure to traces the occurrence of CMV. As displayed in Table 1, the highest correlation [0.752 for workplace spirituality-employee engagement WS-EE)] between the research construct is far below 0.90 (Bagozzi *et al.*, 1991), showing no indication of CMV.

Data analysis and results

In the first stage of research, we reported the test result of overall descriptive statistics and inter-correlations among construct in Table 1. Further, in the second stage of the study, following the work of Anderson and Gerbing (1988) reliability and validity analysis using confirmatory factor analysis was used. Table 2 provides evidence of acceptable factor loading on the corresponding latent construct and significantly surpassed the 0.60 minimum threshold criteria (Hair *et al.*, 2010). This study further examined for item reliability, composite reliability and average variance extract (AVE). The Cronbach's alpha of all construct indicator ranged from 0.825 to 0.977, which significantly above the recommended level of 0.70 (Nunnally and Bernstein, 1978), achieving satisfactory internal consistency. Further, composite reliability in this research ranged from 0.825 to 0.977, suggesting that the reliability explained by each construct surpassed the recommended level of 0.70 (Hair *et al.*, 1998). For establishing reliability, the AVE for all constructs must surpass 0.50, the result in Table 2 shows that the construct ranged between 0.604 to 0.673 suggesting that the variance explained for each construct provides evidence of satisfactory reliability. Finally, The overall result of model statistics show an adequate fit of the structural model to the sample data with $X^2 = 533.239$, $df = 492$, $Cmin/df = 1.084$, goodness of fit index (GFI) = 0.816, adjusted good of fit (AGFI) = 0.790, comparative fit index (CFI) = 0.989, Tucker Lewis index (TLI) = 0.988, root mean square error approximation (RMSEA) = 0.025.

Structural model. The hypotheses relationship were estimated using structural equation modeling (SEM) and tested using the maximum likelihood estimation technique using AMOS 20th version. The results show an acceptable fit of the structural model to the overall sample data with $X^2 = 533.239$, $df = 492$, $Cmin/df = 1.084$, GFI = 0.816, AGFI = 0.790, CFI = 0.989, TLI = 0.988, RMSEA = 0.025.

Direct effect. All of the three paths in the research model are significantly supported. The standardized parameter estimates for the offered hypothesized model combine aspect of multiple regression and factor analysis was used to predict a series of interconnected association among variables simultaneously. As shown in Table 3, the path estimates statistically show workplace spirituality as a strong predictor of nurse work engagement ($H1: \beta = 0.482, p < 0.001$). $H2$ predicted that workplace spirituality significantly and positively connected to P-O fit ($H2: \beta = 0.619, p < 0.001$). Further, as expected, the P-O fit has a remarkable effect on nurse work engagement ($H2: \beta = 0.424, p < 0.001$). Hence, the data from the SEM analysis supports all direct effect.

Mediating effects. Simultaneous maximum likelihood estimation technique following the procedure of Holmbeck (1997) were used as our analytical approach to observing the

Variable	Mean	SD	1	2	3
Workplace spirituality	3.7792	0.8260	0.820		
P-O fit	3.8164	0.8380	0.609	0.782	
Work engagement	4.4025	2.2515	0.752	0.732	0.777

Note: The square root of the AVE value is presented on the diagonal

Table 1.
Means, standard
deviations and
correlations among
the constructs

IJOES
36,3

360

		4			
Items		Factor loading	Composite reliability	Average variance extract	α
10 Workplace spirituality			0.977	0.673	0.977
WS_1		0.821			
WS_2		0.837			
WS_3		0.800			
WS_4		0.813			
WS_5		0.862			
WS_6		0.803			
WS_7		0.818			
WS_8		0.813			
WS_9		0.847			
WS_10		0.805			
WS_11		0.845			
WS_12		0.800			
WS_13		0.790			
WS_14		0.804			
WS_15		0.817			
WS_16		0.805			
WS_17		0.823			
WS_18		0.799			
WS_19		0.849			
WS_20		0.815			
WS_21		0.857			
Person-organization fit			0.825	0.612	0.825
PO-FIT_1		0.798			
PO-FIT_2		0.758			
PO-FIT_3		0.790			
Work engagement			0.932	0.604	0.931
EE_1		0.740			
EE_2		0.759			
EE_3		0.754			
EE_4		0.814			
EE_5		0.792			
EE_6		0.782			
EE_7		0.776			
EE_8		0.787			
EE_9		0.786			

Table 2.
Results of
measurement model

5				
Path		Path coefficient	SE	t-value
Direct effect model				
H1: WS- EE		0.482	0.090	5,357**
H2: WSP-O fit		0.619	0.095	6,515**
H3: P-O fit - EE		0.424	0.092	4,587**
Note: Significant at ** $p < 0.001$ level				

Table 3.
The result of
hypotheses testing

4
intervening effect. Table 3 shows the result for compatibility indices of direct, full and partial mediation simulations. We used three phases procedure, to form the presence of mediation effect and four requirements must apply:

- (1) The dependent variable should statistically influence the mediator variable.
- (2) The mediator variable must fully influence the criterion variable.
- (3) The stimulus variable should significantly influence the response variable.
- (4) The final step in the Kenny Baron mediation analysis is that after controlling, for intervening variables, we must ensure that the influence of the predictor variable on the variable dependence must be insignificant as an indication of full mediation or reduced as a signal of partial mediation (Baron and Kenny, 1986).

This study also uses the Sobel's test (Sobel, 1988) to ensure that the indirect effect of the independent variable on the dependent variable through the intervening variable is significant.

As mentioned above, *H4* predicted that workplace spirituality would statistically influence nurse work engagement and P-O fit would mediate this association. As shown in Table 4, Model 3 encounters the first two condition. Namely, workplace spirituality affects the P-O fit [workplace spirituality (WS) → P-O fit: 0.619, $p < 0.001$]. Further, P-O fit significantly affects nurse work engagement (P-O fit → nurse work engagement: 0.424, $p < 0.001$). Model 1 meet the requirements of the third condition; workplace spirituality affects nurse work engagement (WS → nurse work engagement: 0.741, $p < 0.001$). The fourth condition holds if the influence of workplace spirituality on nurse work engagement turns out to diminish or be inconsequential after the intervening variable of P-O fit is involved. Partial mediation model results confirm that the effect of workplace spirituality on nurse work engagement was significantly diminished in the occurrence of P-O fit (from 0.741 to 0.482). Consequently, the relationship between workplace spirituality and nurse engagement was partially mediated by P-O fit. Finally, considering Model 3, the mediation effect of workplace spirituality on nurse engagement through P-O fit is 0.588 (0.692×0.851). The result of mediation test using Sobel test also proven to be significant ($Z = 3.31 > 1.96$, $p < 0.01$). Hence, *H4* is statistically supported.

Path	Model 1 No mediator	Model 2 Partial mediation	Model 3 Complete mediation
<i>Direct effect model</i>			
WS-EE	0.741**	0.482**	—
WS – P-O fit	—	0.619**	0.692**
P-OFit – EE	—	0.424**	0.851**
<i>Goodness of fit criteria</i>			
χ^2	426.042	533.239	564.209
CMIN/df	1.055	1.084	1.144
RMSEA	0.020	0.025	0.032
GFI	0.832	0.816	0.808
AGFI	0.807	0.790	0.781
CFI	0.994	0.989	0.981
TLI	0.993	0.988	0.980

Note: Significant at ** $p < 0.001$ level

Table 4.
Results for
competing model and
fit indices of
structural models

Theoretical implication

The result of this study implies gaining a more in-depth insight of how organizations can encourage engagement among their nurse staffs on daily work activity (Ferinia *et al.*, 2016), we have examined the correlation between workplace spirituality and the work engagement of nurses. Speaking a current issue that has accepted relatively little attention from prior social researchers, this research thereby identifies the contributions that spirituality at work can make in fostering a highly engaged workforce (Bakker *et al.*, 2011; Schaubroeck *et al.*, 2011). This research suggests at least two crucial conclusions. First, as expected, our findings found a positive association between workplace spirituality and work engagement, this conclusion is steady with the previous study and extends the findings of Saks (2011) and Roof (2015), who proves that spirituality at work enhanced work engagement.

Furthermore, our outcomes revealed that nurse who is contemplated higher level on purpose or spiritual sense in their work are likely to expend more energy on work-related tasks. Further, they will be more enthusiastic about working harder throughout difficult times and performing extra-role performances at work than others who do not feel this sense of purpose and meaningfulness (Jurkiewicz and Giacalone, 2004). Moreover, this spirituality at the workplace performs as a way to apply satisfactory community-building among nurses and boost them to build strong interconnectedness with one another. Hence, the feeling of being part of an interconnected community further increases nurses' well-being and later, their commitment to organizational goals. Workplace spirituality provides a nurse with opportunities for search of the ultimate source of meaning, life purposes (Ashforth and Pratt, 2003; Giacalone and Jurkiewicz, 2003; MacLagard, 2000) and interconnectedness between self and others (Liu and Robertson, 2011) as an authentic self-expression in their life activities (Kahn, 1990). Therefore, when a nurse works in an environment that encourages meaningfulness, they will feel that his/her role is more valuable and believe that every goal will be achieved.

Furthermore, spirituality at the workplace provides nurses with a sense of compassion, kindness and caring, cultivating the nurses' sense of community and interconnectedness. Consequently, seeing their institution as one that offers them the opportunities with a higher sense of purpose of their work goals and self-worth development, strengthens their enthusiasm to engross themselves wholly at work (Bakker and Demerouti, 2008). Additionally, nurses are likely to devote high levels of energy in their work activity both cognitively and emotionally, if they have opportunities to find meaning in their work, have a more profound sense of connection with coworkers and hold personal values or core beliefs that are compatible with the values of their organization (Mitroff and Denton, 1999). As a result, organizations who identify themselves as spiritual are possible to get nurses who believe the environment is mentally progressive and promote interconnectedness in nature (Kahn, 1990) resulting in decreasing employee turnover and higher work engagement (Harter *et al.*, 2002).

Second, another purpose of the current study was to observe the connection between workplace spirituality and work engagement by emphasizing on P-O fit as a mediating variable. Specifically, we are the first to observe the mediating role of nurses' P-O fit in the relationship between workplace spirituality and nurse work engagement; thereby this study advanced the unexplored mechanism by which workplace spirituality affects nurse work engagement.

Workplace spirituality as an essential component of the human experience includes a more holistic association with work, an association that reflects the need for greater fulfillment and completeness in daily life experience. Therefore, profoundly personal experience and sense of connection will create significant work in the context of a community. According to Marques (2007), a person that nurtures compatibility within the workplace it is likely to embolden sense of community and connectedness to one another

and to their workplace environment (Ashmos and Duchon, 2000; Mitroff and Denton, 1999), heightening employee attachment and sense of belonging to the organization (Oswick, 2009) and finally, resulting in higher effectiveness. Contrariwise, when there are spaces or variances exist within the values and spiritual aspiration, between the employee and the organization, this condition may encourage employees to create a more negative impression of the organization (Penman *et al.*, 2009). Hence, employees will lose their feelings of completeness and joy on working condition, impairing the sense of meaning at work conflicting with the sense of community and triggering a breach in the individual-organizational alignment. Subsequently, the result can be reduced employees' psychological well-being, as well as a consequent decline of individuals' intrinsic motivation and reducing in organizational attachment.

Managerial implication

This study also provided two critical practical implications from our findings concerning workplace spirituality in the context of Indonesian nurse. Based on current findings, a manager must understand that workplace spirituality is a significant component for organizational effectiveness (Sani *et al.*, 2016). Thus, the management should create cultures and policies that strengthen the spiritual character trait of their nurses (Penman *et al.*, 2009).

Moreover, it is worthwhile for organizations to accommodate the spiritual request because of different backgrounds, spiritual beliefs and respect individual differences. Furthermore, given that workplace spirituality is sturdily connected to nurse engagement, it is advised that organizations should analyze how to plan a spiritual-rich working environment to help nurses make the connection from what they contribute individually to what the organization achieves as a whole (Rego and Pina e Cunha, 2008; Herlianita *et al.*, 2018). This condition is likely will amplified meaning from their work and developing a sense of connectedness to the higher purpose of their lives and community, encourage nurse loyalty and feeling of belonging to the organization. As a result, these characteristic can provide tremendous benefit in the overall creation of engagement in work, lead to a better adjustment through higher psychological well-being and form a more positive perception of the organization.

Finally, to enhance the level of fit between nurses and organization, it is recommended that top organizational management can arrange an intervention program to assist their nurses to reach their full potential at work. Top management might set a necessary program to support their nurses' fully spiritual potential as a step to keep their spiritual awareness. According to Marques (2007), individuals with high-level spirituality, when matched with the organization of high spirituality, will promotes satisfaction and meaning and are possible to be involved with their work and are a complete, more productive nurse (Albrecht *et al.*, 2015).

Limitation

Despite the noteworthy contributions that the research has delivered, several limitations need to be considered and may be subject to criticism. First, the data were collected from nurses working in two government hospitals from a single province in Indonesia. Moreover, the sample were Muslim majority, which may affect the generalization of findings. Therefore, future research can use respondents from a broader socio-demographic background. Second, this study used the self-reported data collection method, which could make some of the results affected by CMB problem (Podsakoff and Organ, 1986) that could be leading to a systematic error variance of statistical relationships. This research used two *post hoc* assessments from Podsakoff *et al.* (2003) and Bagozzi *et al.* (1991) to check the possibility of common method variance and revealed that the CMV issue did not pose a

problem in the data validity. Furthermore, only a single proposed mediating variable have been considered. It is presumed that additional intervening variables are also relevant in clearing up the outcome.

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Further reading

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