



## Exploring social health and work conscience among nurses working in hospitals of Shiraz, Iran

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**Background and Aim:** In hospitals, it is of high significance to give due attention to the behavioral and social status of nurses as the key staff of the medical environment, and this can guarantee the desirable quantity and quality in providing services for the patients. The present study was conducted to investigate the relationship between social health and work conscience in nurses working in the selected hospitals of Shiraz University of Medical Sciences in 2017. **Methods:** The sample of the present study includes 569 nurses working in the 5 selected hospitals located in Shiraz, Iran. The sampling was conducted with a random stratified sampling in proportion to the strata size. Questionnaires of work conscience and social health as well as the questionnaire of pairwise comparison and decision matrix were used for collecting the data. Structural equation modelling was applied to test the research questions using SmartPLS 3. **Results:** The findings indicated that there is a significant statistical relationship between social health and work conscience (0.483). Moreover, other findings of the present study indicated that there is a significant relationship between all 7 aspects of social health and work conscience. The effect of social responsibility, conscientiousness, family relationship, attitude to society, social participation, empathy, and social interaction on work conscience was 0.366, 0.209, 0.203, 0.299, 0.147, 0.126, and 0.473 respectively. **Conclusion:** Since social health and its aspects have significant effects on work conscience, the hospitals are required to give due attention to the nurses' social health.

### INTRODUCTION

Hospitals are of high importance in any given community; they are known as the main centers for providing health and medical services and they are regarded as centers that receive a main portion of the budget of health systems. Alongside the financial and economic issues of their organizations, giving due attention to non-economic factors (including behavioral and social factors) is of great significance for managers of health organization to help their organizations survive. Given this, it be claimed that it is of high significance to give due attention to the behavioral and social status of nurses as the key staff of the medical environment, and this can guarantee the desirable quantity and quality in providing services for the patients. Work conscience and social health are included as the most important behavioral and social factors that are required to be taken into account by hospital managers.

The findings of numerous studies indicate that nurses lacking proper health (physical, mental, and social) are not able to provide proper cares such as physical and mental support for their patients and this can bring about the likelihood of mistakes and professional accidents the consequences of which can affect both patients and nurses (1). Moreover, if the nurses lack sufficient work conscience, the quality of services provided in medical centers is likely to reduce and this can

result in the patients' dissatisfaction (2). In fact, giving due attention to economic as well as social factors affecting the nursing profession can affect the entire society either directly or indirectly.

Another factor affecting the performance of hospitals and nurses is work conscience. Individuals with high work conscience regard the organization's goals and values as their own goals and values; they do their best to achieve the goals intended by the organization (2). Giving due attention to work conscience in organization is in fact an ethical attitude towards job and organization. In professional behaviors, ethics result in creating commitment for one's own responsibilities in the best ways possible without an external controlling factor. Moreover, ethics result in improved status of the whole society, inner satisfaction, and calm conscience.

Despite the studies conducted on nurses' work conscience, no study has simultaneously investigated the relationship between social health and work conscience in nurses. In other words, although numerous studies have been conducted on work conscience in different occupational groups and in terms of different demographic variables in different areas and countries, no study has been yet conducted to simultaneously investigate social health and work conscience in healthcare and medical environments. Given the significant role of nurses' work conscience in both quality and quantity of medical services as well as the significance of social health status in professional environments, the present study (the first of its kind conducted in Iran) attempts to investigate the relationship between work conscience and social health in nurses working in the hospitals of Shiraz University of Medical Sciences.

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**Table 1** Fitting summary of the measurement model

Construct	AVE	Diagnostic validity	Range	CR loads
Social health	0.653 <sup>*</sup>	It does exist.	0.572-0.898	0.928 <sup>*</sup>
Work conscience	0.638 <sup>*</sup>		0.680-0.868	0.897 <sup>*</sup>

\*: significance at the level 0.05.

**Table 2** Fitting summary of the structural model

Construct	R2	Q2
Work conscience	0.233 <sup>*</sup>	0.132
* Significance at the level of 0.05		

**Table 3** The total fitting of the model

Construct	AVE	$\overline{AVE}$	R2	$\overline{R^2}$	GoF
Social health	0.653	0.646	--	0.233	0.388
Work conscience	0.638		0.233		
The value of 0.490 for GoF indicates the strong total fitting of the research model.					

## MATERIALS AND METHODS

The statistical population of the present study includes 569 nurses working in five selected hospitals located in Shiraz including Chamran Hospital, Namazi Hospital, Shahid Rajaei Hospital, Faghihi Hospital, and Khalili Hospital. The sampling was conducted with a random stratified sampling in proportion to the strata size.

### Data collection tools

For collecting the data related to the nurses' social health and work conscience the validated and localized questionnaires of Rafiey et al., (3) was used.

Social health questionnaire of Rafiey et al., (3) includes 29 questions investigating seven components of social health including social responsibility, conscientiousness, family relationship, attitude to society, social participation, empathy, and social interaction. Using Cronbach's alpha coefficient, the internal consistency was 0.862. The content validity index of the questionnaire was higher than 80 percent (3). The work conscience questionnaire includes 24 questions the purpose of which is to investigate perceived nursing conscience from five aspects including ethical conscience, supervisor conscience, protective conscience, caring conscience and reaction of conscience. Using Cronbach's alpha coefficient, the internal consistency of the questionnaire was 0.945. Moreover, the content validity index of the questionnaire was higher than 90 percent.

### Statistical analysis

Given the research questions, the data collected were analyzed through applying the following three techniques including Kolmogorov–Smirnov test (one sample), structural equation modelling, and MANOVA. The significance level of the data was  $p < 0.05$ . The fitting of the measurement model was investigated by using convergent validity (according to factor loads and extracted mean variance), composite reliability, and discriminant construct validity (diagnostic validity); the fitting of the structural model was conducted by using R2 and Q2 indices. For investigating the fitting of the entire model (controlling both measurement and structural model), GoF criterion was applied. And three values have introduced of 0.01, 0.25, and 0.36 as weak, average, and strong values respectively.

### Ethical Considerations

The present study was confirmed at the Ethics Committee of Yazd University with the code of R.IAU.YAZD.REC.1397.046.

## FINDINGS

The fitting of the measurement model was investigated by using convergent validity (according to factor loads and extracted mean variance), composite reliability, and discriminant construct validity (diagnostic validity). As it can be observed in table 2, the factor load of all questions of the main constructs of the research was larger than 0.05 and significant at the confidence level of 95 percent; there is no need to delete any of them. Furthermore, the values of extracted mean variance and composite reliability are respectively larger than 0.6 and 0.8 and significant the confidence level of 95 percent. Furthermore, the AVE value of both main constructs of the present study is larger than the correlation square of that construct with another construct. This indicates the confirmation of diagnostic validity for both main constructs of the model. Table 1 indicates the fitting summary of the measurement model.

Table 2 indicates the fitting summary of the structural model of the research. According to these findings, R2 value of work conscience is significant. Three values has introduced of 0.19, 0.33, and 0.67 as the criterion value for weak, average, and strong values of R2 respectively. Thus, R2 value of work conscience is significant at the level of 0.05 and it is thus regarded as strong. Q2 index defines the predictive power of the model; the values of 0.02, 0.15, and 0.35 respectively indicate weak, average, and strong predictive value of the model in an endogenous construct. The value of this index for the dependent variable of the research is 0.132 that indicates the average predictive power of the model. Table 3 indicates the total fitting of the model.

According to figure 1, it can be concluded that social health has a significant effect on work conscience. The effect of social health on improved work conscience is 0.483. P and t values are respectively smaller than 0.05 and larger than 1.96. Given P (smaller than 0.05) and t (larger than 1.96) values and the confidence level of 95 percent, it can be claimed that social health is directly and significantly related to work conscience.

## DISCUSSION

The main finding of the present study indicated that social health and its

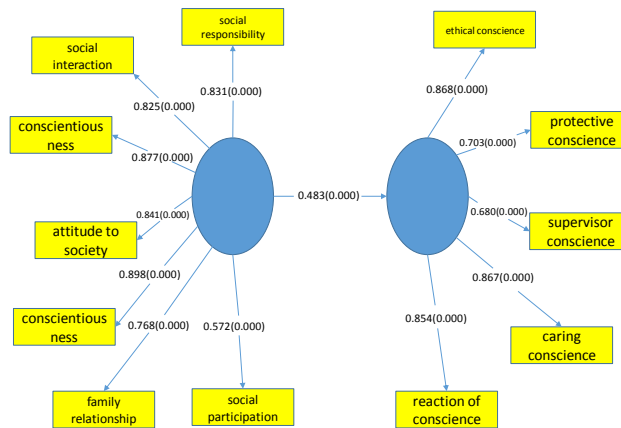


Figure 1. The effect of social health on work conscience (p-value)

aspects are positively and significantly related to work conscience. Although numerous studies have been conducted on work conscience in different occupational groups and in terms of different demographic variables in different areas and countries, no study has been yet conducted to simultaneously investigate social health and work conscience in healthcare and medical environments. However, some studies have pointed out the effect of social health components on work conscience. A study conducted in the Massachusetts on nurses indicated that teamwork and having interaction with others can have direct effects on nurses' work conscience (4). Another study was conducted in South Africa through conducting interviews with the healthcare staff. The findings of the aforementioned study indicated that having communication with coworkers, social interactions, and professional commitment are included as the factors bringing about successful healthcare services and work conscience (5). Moreover, it was indicated that conscientiousness and responsibility toward the society bring about professional commitment and conscience in nursing environments. It can thus be concluded that responsibility and conscientiousness bring about the required motivation for having work conscience. Furthermore, creating the required atmosphere in medical environments for empathy and social interaction (as the other aspects of social health) is likely to increase work conscience in nursing staff (6, 7). The findings of the previous studies indicate that individuals willing to have social participations not only do care about their destiny but also adopt their own responsibility in social, economic, and political actions (8, 9). Nurses who are not indifferent to the destiny of their society will definitely have the same approach in their organizations as well; they are not indifferent to the destiny of their patients. Thus, as the findings of the present study indicated, high social participation is likely to result in higher levels of work conscience.

Having positive attitude and thoughts towards the issues, the individuals surrounding us, and the entire society is included as one of the main qualities of individuals enjoying complete mental health. In dealing with themselves, their families, their colleagues, etc. these individuals tend to see thoughts, actions, and behaviors in a positive way. Every individual with a positive attitude toward the society's developments attempt to lead himself and the entire community towards a better life. Positive thinking makes the individuals to work hard for achieving the main goals of the society that are promoting the economic,

social, cultural, and political aspects to bring about the maximum efficiency. Therefore, the nurses' positive attitude toward the society makes them think of the organization's progress in different aspects. They can promote the patients' health through focusing on their own role; their work conscience is strengthened in this way.

The nurses' improved social health is likely to bring about work conscience in hospital environments. Therefore, it is advisable that healthcare system policymakers and hospital managers be sensitive to mental-social tensions and communicative disorders in nurses' working environments. They are also required to provide programs and plans for improving the nurses' communicative skills, teamwork, social participation, and responsibility. Through appropriate policies for social health (as non-financial policies), the hospital managers are able to strengthening work conscience in their nursing staff and thus better healthcare service are guaranteed in this way.

## CONCLUSION

The findings of the present study indicated that social interactions as well as social responsibility are of great significance in promoting nurses' work conscience. Thus, through considering these factors, nursing policies and programs are likely to promote nursing conscience.

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#### Article Keywords

Social health, work conscience, nurses, hospital

#### Conflict of interests

The authors of the present study assert that there is no conflict of interests.

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