# Demand & Supply in Health Economics eJournal Vol. 9, No. 36: 2016, ISSN: 1556-5068

## EFFECT OF RELIGIOSITY TO INTENTION TO LEAVE OF THE NURSING STAFFS

## <sup>1</sup>Mursalim Umar Gani

Faculty of Economic, Universitas Muslim Indonesia, gani.murfat@yahoo.com

#### <sup>2</sup>Nurmiati Muchlis

Public Health Faculty, Universitas Muslim Indonesia, nurmi\_marsfkm@yahoo.com

## **Abstract**

This study aimed to analyze the influence of religiosity of the intention to leave the hospital nursing staff in Makassar. This research is classified as a quantitative research conducted cross-sectional study that using a survey method. The study population is all non-permanent nursing staff in three hospitals. Each of the two private hospitals, and a government-owned hospitals that all have same background history. The total samples are 101 nursing personnel. Research design is survey sectional cross method. The sampling using simple random sampling. A questionnaire and interview format were made to measure the level of religiosity nursing personnel associated with intention to leave. The results showed that there was no influence between the ideological dimension (p = 0.291), the ritualistic dimension (p = 0.275), experiential dimension (p = 0.275) 0.189), and intellectual dimension (p = 0.993) of the intention to leave (ITL). There is a significant negative effect between the consequential dimension (p = 0.001) against the ITL. Nurses, who are on the good consequential dimension, tended to intend to be out of the hospital. It is expected that the hospital management keep on providing facilities to support program or activity increase of religiosity by adding the item of organizational performance assessment.

Keywords: religiosity, intention to leave hospital, turnover

#### 1. Introduction

Hospitals around the world are currently experiencing massive changes in its organizational structure. In some cases, organizational change can mean closures of hospital, job loss, change in the status of employees and increase workload (Burke and Greenlass, 2000). Unlike the case in Indonesia, it is precisely the growth of the hospital has increased significantly, mainly managed by private parties. Makassar is a city in South Sulawesi which has the largest population. There are 56.25% of all hospitals in the city of Makassar owned by private parties. Although in terms of quantity, the number of hospitals that managed by the private sector is increasing, but not fully followed by quality increase.

Control of turnover in order to retain nursing staff can increase service effectiveness and efficiency of hospital management. Not much research to measure religiosity on nursing personnel, whereas the nursing profession requires the primacy of human values than worldly importance. The virtue giving good things to fellow human beings are part of the manifestation aspect of religiosity. The history of the hospital also reminds us that the beginning of the hospital was originally a place of worship that is purely social aims. So that the measurement of religiosity in nursing personnel is considered appropriate which is then connected turnover.

This is done by taking into account the theory of core Dimensions by Cornwall, et al (1998) in Duke (1998) that illustrate that one of the consequences of religiosity is a personal welfare (personal well being). With a good level of religiosity, the higher the level of personal well being of a person. Thoits and Hewitt (2001) proved that they were having a personal well-being that good will tend to remain in existence as volunteers although demographic factors and individual characteristics also play a role.

#### 2. Religiosity

The word religion comes from the Latin root *religio* which is *religare* which means binding (Gazalba, 1985). Matdarwan (1986) argued that *religare* is mean carry

out very carefully or it can be mean unite themselves. Although each has its own terminology but in the sense of technical terminology and different but all of those terms have same meaning (Ansari, 1987). Religiosity is more directed to the appreciation of the quality and attitude of someone based on the values of religious beliefs. So more emphasis on substance noble religious values and tends to turn away from religious formalities. Each description of the five dimensions of religiosity as follows;

## 3. Religious Belief (The Ideological Dimension)

Religious belief (the ideological dimension) also called faith dimension is the degree to which a person receives dogmatic things in religion, such as belief in God, angels, heaven and hell. Although it must be acknowledged every religion certainly has a set of doctrinal beliefs that different from other religions, even to his religion that sometimes appear to understand the different and often contradictory. Basically every religion also wanted the element of obedience to every believer. As for the religion professed by a person, the meaning of which the most important is the willingness to abide by the rules that apply in the teachings of their religion. So the belief is more doctrinal dimensions that must be obeyed by religious believers. Dimensions of belief in Islam is manifested in confession (*shahada*) are realized by reading two sentences creed, that there is no god but Allah, and Muhammad was the messenger of God. By itself the dimensions of faith demanded the worship practices in accordance with the values of Islam (Ancok and Suroso, 1995).

## 4. Religious Practice (The ritual dimension)

Religious practice (the ritual dimension) the degree to which a person working obligations in their religious rituals. Elements that exist in this dimension include worship, culture and things that are more indicative of one's commitment to religion. The realization of this dimension is the public behavior of followers of certain religions in performing the rites relating to religion. Dimension practice in Islam can be done by

running the prayers, fasting, charity, pilgrimage or other *muamalah* practice (Ancok and Suroso, 1995).

## 5. Religious Feeling (The experience dimension)

Religious feeling or the dimension of experience is the feelings or experiences that ever experienced and felt. For example feel closer to God, afraid to sin, felt his prayer is granted, saved by the Lord, and so forth. Ancok and Suroso (1995) say that in Islam, this dimension can be realized in a close or intimate feelings with God, feeling tawakkal (resigned themselves in a positive way) to God. Solemn feeling when praying feeling thrilled when on hearing the call to prayer or verses of the Qur'an, gratitude to God, the feeling got a warning or favor of God.

## 6. Religious Knowledge (The intellectual dimension)

Religious knowledge (the intellectual dimension) or dimensions of religious knowledge is a dimension that describes how many people knows about the teachings of their religion. Expecially in the dimensions of religious knowledge is a dimension that describes how much a person knows about the teachings of their religion, especially in the scriptures any more. At least someone that religion should know the basic things about the fundamentals of faith, rites, and trandisi. This dimension in Islam refers to how the level of knowledge and understanding of the Muslims against religious teachings, especially regarding the basic teachings of their religion, as contained in the scriptures (Ancok and Suroso, 1995).

## 7. Religious Effect (The Consequential Dimension)

Religious effect (the consequential dimension) the dimensions that measure the extent of the person's behavior is motivated by the teachings of religion in social life, for example whether he visited his neighbors who sick, helping people in trouble, donated his property, and so forth. Experiential dimension (experience) refers to the

feeling of having to interact with God, experience someone believes there has been a revelation from God, or a powerful experience that is able to convince himself, for example because of he was out of danger saved by God.

#### 8. Intention to Leave

Intention to leave refers to the desire of employees to seek other employment alternative and has not yet made in the form of real behavior (Pasewark and Strawser, 1996). Turnover intentions also indicated as an individual attitude that refers to the results of the evaluation of the viability relation to the organization where he worked and have not materialized in the form of definite actions (Kelvin and Indriantoro, 1999).

Price and Mueller (1981) suggest using intention to turnover than the actual turnover for turnover which is actually more difficult to predict than intentions. Fishbein and Ajzen (1975) stated that the intention is often viewed as tendency to behave of attitude. It is usually assumed as the affective component (concerning one's emotional life) of attitude. That is, it indicates that there is a strong relationship between attitudes and attention. This assumption means that the individual being favorable to an object, then the individual will increasingly lead to the formation of a behavior with respects to the attitude object concerned. Based on the theory and turnover intentions, it can be concluded that the intention to leave is the intention, willingness or desire of the individual to come out by itself from the organization. Prediction of behavior that will arise which is preceded by intention power can be known.

#### 9. Population and Sample

The population is all non-permanent nursing staff working at two private hospitals of type B and one government hospital type B which has the same historical background. The numbers of samples in total are 101 nursing staff selected using simple random sampling.

#### 10. The Result

#### a. The Ideological Dimension

The results showed that no significant effect (p = 0.291) between the ideological dimension of the ITL. Ideology dimension associated with the cognitive dimension which focuses on what people know about religion is religious knowledge (Cardwell, 1980). In general, the entire nursing staff at research sites located in both categories, it is in line with the determination and vision of Hospital *RSI Faisal Ibnu Sina* which incorporates elements of Islamic. This implies the existence of a spiritual meaning that must be carried by all stakeholders in the hospital, particularly for nurses in providing care for patients. However, these activities have not been followed up with regular evaluation effort by the hospital management.

#### b. The ritual dimension

The results showed that there was no significant effect (p = 0.275) between the ritualistic dimension to the ITL. Of the entire nursing staff, mostly in the good category as many as 61 people (60.4%). This is supported by information, that every hospital performs rituals religious activities into programs / activities in increasing religiosity hospital employees. From all hospital where research was conducted, hospital *RSU Haji* is a research site with the most categories for ritualistic dimension in either category (44.3%).

#### c. The experience dimension

The results showed no significant effect (p = 0.189) between the experiential dimension to the ITL. The results showed that hospital *RSU Haji* has the highest nursing personnel for experiential dimension in either category (45.6%). A large number of nursing staff in both categories for the experiential dimension, in line with lower turnover of nursing staff at hospital *RSU Haji* Makassar compared to the other two sites (Muchlis, 2015).

#### d. The intellectual dimension

The results showed that no significant effect (p = 0.993) between the intellectual dimension of the ITL. Hospital Ibnu Sina is a study site by the number of nursing personnel who are in the good category (41.5%). In addition, from the aspect of academic intellectuals, Hospital Ibnu Sina also has a nursing staff for the most recent education and a bachelor of nursing D3 compared to two other hospitals. Already there are no nursing staff who have the educational background D2, so that all nurses in the hospital Ibnu Sina can be said to be the professional nurses.

#### e. The Consequential Dimension

The result showed that there is a negative and significant effect (p = 0.014) between the dimension of the ITL consequential nursing personnel. Based on the description of each parameter consequential dimension, there are differences in the frequency of the number of nursing personnel who are in the category of less well and good. All measurement parameters consequential dimension in nursing personnel are mostly located in both categories. As each description as follows; 1) Keep away from products that are not allowed under Islam. There are as many as 84.16% of nursing personnel who are in the good category, 2) always try to avoid small sin and big sin. There are as many as 55.45% of nursing personnel who are in the good category, 3) acts committed will get a response from God. There are as many as 51.49% of nursing personnel who are in the good category. 4) The results obtained venture is an effort of what has been done. There are as many as 57.43% of nursing personnel who are in the good category.

The results showed that hospital RSU Haji Makassar has the highest nursing staff for intellectual dimension in either category (45.3%). This is consistent with the low rate of turnover in the nursing staff at hospital RSU Haji Makassar than two other research sites. Religious teachings can change the life of a person's personality or group becomes new life in accordance with the teachings of their religion. Receives new life based on the teachings of religion he follows it sometimes is able to change his

allegiance to customary norms espoused life before it (Jalaluddin, 2000). The adherents of the religion according to religious teachings he follows the inner tied to the guidance of the teaching, either individually or as a group. The teachings of religion by adherents considered the norm, so that religion can serve as a social supervision individually or in groups.

#### 11. Conclusion

It is expected that the foundation continues to provide facilities to support program/ activity increase in religiosity, the hospital management to support program improvement religiosity, by adding the organizational performance assessment item. Expected next researcher to conduct studies furthermore about aspects of religiosity on other variables as well as the more varied population. Expected next researcher to conduct further studies about aspects of religiosity on other variables as well as the more varied population.

#### **References:**

- Ancok Jamaluddin dan Fuad Nashori Suroso. (1995). *Psikologi Islami; Solusi. Atas Problem-problem Psikologi*. Pustaka Pelajar, Yogyakarta.
- Cardwell, J. D. (1980). The social context of religiosity. Lanham, MD: University Press of America.
- Chang, Man Kit. (1998). Predicting Unethical Behavior: A Comparison of the Theory of Reasoned Action and the Theory of Planned Behavior. Journal of Business Ethics; Dec. 1998; 17, 16
- Chida Y, Steptoe A, Powell LH. (2009). Religiosity/ spirituality and mortality. A systematic quantitative review. Psychother Psychosom.78(2):81-90.
- Clark, B. H., and D. B. Montgomery. (1998). Deterrence, reputations, and competitive cognition. Management Science 44 (1): 62-82.
- Duke, James T. (1998). The Dimensions of Religiosity: A Conceptual Model with an Empirical Test, in Latter-day Saint Social Life: Social Research on the LDS Church and its Members. Provo, UT: Religious Studies Center, Brigham Young University, 1998, 203–230.

- Fishbein, M. and Ajzen, I. (1975). Belief, Attitude, Intention, and Behavior: An Introduction to Theory And Research, Addison-Wesley Pub. Co,
- Gazalba, Sidi. (1985). Asas Agama Islam. Jakarta: PT. Bulan Bintang.
- Glock, C. Y., & Stark, R. (1965). Religion and society in tension. San Francisco: Rand McNally.
- Greenglass, E. and Burke, R.J. (2000a) The relationship between hospital restructuring, anger, hostility and psychosomatics in nurses. Journal of Comnaunity and Applied Social Psychology, 10, 155-161.
- Hall, Richard. (1992). The strategic analysis of intangible resources. Strategic Management Journal 13: 135-144.
- Imam Ghozali. (2002). Pengaruh religiositas terhadap komitmen organisasi, keterlibatan kerja, kepuasan kerja dan produktivitas. Jurnal Bisnis Strategi Vol. 9 Juli VI/2002 pp.1-13
- Matdarwan, NN. (1986). *Manusia, agama dan Kebatinan*. Yogyakarta: Yayasan Bina Karir.
- Osman Gani, Hashim & Ismail. (2013). Establishing linkages between religiosity and spirituality on employee performance. Emerald Group Publishing Limited, Vol. 35 Issue: 4, pp.360 376
- Pasewark, W.R. & Strawser, J.R. 1996. "The Determinants and Outcomes Associated With Job Insecurity in a Professional Accounting Environment". Behavioral Research in Accounting. Vol. 8. pp. 91-110.
- Price & Mueller. (1981). A Causal Model of Turn over for Nurses. Academy of Management Journal (pre-1986); Sept 1981; 24, 3; ABI/INFORM Complete page. 543-565
- Samsari, Agustinus. (2004). Pengaruh Religiositas Terhadap Keterlibatan Kerja, Komitmen Organisasi, Kepuasan Kerja, dan Produktivitas (Studi Empiris Pada Kantor Akuntan Publik di Semarang). PhD Thesis. Unika Soegijapranata.
- Stark, R., & Glock, C. Y. (1968). American piety: The nature of religious commitment. Berkeley: University of California Press.
- Thoits, PA. and Hewitt, LN. (2001). Volunteer work and well-being. Journal Health Social Behavior. 42(2):115-31.
- Thouless, H. Robert. (2000). *Pengantar Psikologi Agama*. Jakarta: PT Raja Grafindo Persada.