

Workplace Spirituality, Self-esteem, and Psychological Well-being Among Mental Health Professionals

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The aim of the present study was to explore the relationship between workplace spirituality, self esteem and psychological well being and to investigate the predictors of psychological well-being in mental health professionals. The participants were consisted of 120 mental health professionals which includes 30 psychiatrists with mean age 36.3 ($SD = 10.8$), 30 psychologists with mean age 33.3 ($SD = 8.9$), 30 nurses with mean age 31.1 ($SD = 10.0$) and 30 attendants with mean age ($M = 34.9$, $SD = 10.7$) were recruited from different Hospitals and Clinics of Lahore. Purposive Sampling technique was employed in the study. Instruments used in the study were: Spirituality at Work (Ashmos & Duchon, 2000). Rosenberg Self Esteem Scale (Rosenberg, 1965) and Ryff Psychological Well Being Scale (Ryff, 1989). The results of the study revealed significant positive association of workplace spirituality and self esteem with psychological well-being among mental health professionals. Self esteem and workplace spirituality were predictors of psychological well being.

Keywords: Workplace spirituality, self-esteem and psychological well-being

Work and workplace holds an important position in an individual's life. People work for many reasons such as for economic, familial and social reasons and so on. There is another view of studying work and workplace spirituality. Many researchers have explored linkage between workplace spirituality and organizational behavior (Fry, 2005; Milliman, Czaplewski, & Freguson 2003; McKee, Discroll, Kelly, & Kelloway, 2011) but the attention towards the connection between workplace spirituality, self esteem and

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psychological well-being of mental health professionals is least focused. The World Health Organization's (WHO; 2003) definition of health includes four domains of well-being; physical, mental, social and spiritual (WHO, 2003). In the modern world health is not static or passive state of being rather a continuous process of developing or achieving higher levels of wellness in each dimension as stated above. The focus of the present study was spiritual aspect of health in the workplace and its effect on self esteem psychological well being of mental health professionals. Thus, the need to study spirituality and spiritual connection with oneself, others and organization has also become important because of the ongoing changes in organizational structure, which affects the individual feelings of security regarding one's position in the organization which in turn effects the employees self esteem (Marschke, Preziosi, & Harrington, 2011). According to Komala and Ganesh (2006) spirituality is not limited to personal lives of individuals but they are also seeking spirituality in their work environment as they spend most of time at their workplace.

Giacalone and Jurkiwicz defined workplace spirituality in relation to those aspects of workplace which enhance satisfaction through transcendence either in the individual, the group or the organization (Noor & Arif, 2011). Ashmos and Duchon (2000) defined workplace spirituality as "the recognition that employees have an inner life that nourishes and is nourished by meaningful work that takes place in the context of community". Four major components of workplace spirituality mentioned by them are: inner life, meaning and purpose in work, a sense of connection with community and alignment with organizational values.

Spirituality is a part of intrinsic human nature that found in all human beings in varied intensities (Javanmard, 2012). The notion of inner life is related to individual identity (Shamir, 1991) and workplace provides an environment which enables an individual's spiritual identity to energize the group in which he works. On the other hand, belonging to a social group shapes one's self concept (Javanmard, 2012). People have outer life as well as the inner life. The nourishment of the inner life is important because it leads towards the more meaningful and productive outer life (Ashmos & Duchon, 2000).

The core of spirituality at workplace depends upon the feeling of individual sense of meaningful and purposeful work (Ashmos & Duchon, 2000). It involves the interaction of employees on the daily basis at the individual level. This is based on the assumption that every individual has his/her own levels of motivation and truth to get involved and participate in the activities that add some meaning to

his/her life as well as to the lives of others (Milliman, Czaplewski, & Freguson, 2003). If the work content provides individuals with positive spiritual experiences, it will result in the spiritual growth and development of the individual, compassion for work and feelings of joy and well being (Javanmard, 2012).

Feeling oneself as a part of community (being connected to other human beings) is an essential element of the spiritual development (Ashmos & Duchon, 2000). This is a critical dimension of workplace spirituality occur at the group level where employees interact with each other and other co-workers on one hand and on the other hand and developing a strong connection between inner self of each other which result in deep sense of connection among them and they show genuine care and support for one another (Milliman, et al., 2003). In the work environment employees depend on each other as they are working together for the larger purpose. Therefore they need each other to succeed and attain the particular goal of that organization. When people work together under an organization for the common goal it brings solidarity which provides ground for the development of spirituality at workplace (Javanmard, 2012).

Alignment with organizational values is based on the larger purpose: It involves individual's contribution to its society and community rather than working only for the satisfaction of their selves (Milliman, et al., 2003).

According to Stamp (as cited in Sendjaya, 2007), spirituality brings awareness in individuals regarding the sense of connectedness that exist between inner self of the individual and the world. Interconnectedness brings sense of alignment between his/her capabilities and the contribution he/she made to the world on the basis of his/her capabilities. An individual holds distinct roles while interacting in a social network. An individual's self emerges from different social interaction and the self emergence is the reflection of the character and structure of the society where these social interaction takes place and it determines individual's self esteem (Owens, Sheldon, & Goodman, 2001).

Self-esteem is a positive or negative orientation toward oneself; an overall evaluation and sense of one's worth or value. It is also defined as confidence, self respect, satisfaction and conditional form of acceptance. High self esteem indicates positive self regard, holding opinion about one's own self, not egotism (Dryden & Neenan, 1995; Ellis & Abraham, 1978; Edelstein, 2000; & Rosenberg, 1965). DeBord (2009) also explains self esteem as how an individual feels about himself/herself. It is an image an individual creates of himself

which is based on many images; the images build how an individual look upon himself in different roles.

Rosenberg (as cited in Owens, Sheldon, & Goodman, 2001), conceptualizes self esteem towards the positive dimension. According to him, those individuals who have high self- esteem are more keen for personal growth and development. They try to enhance personal growth by using their capabilities. Self esteem also determine the type of work and work environment an individual chooses for himself (Owens, et al., 2001) because sociability is one of the strongest predictor of self esteem; it involves the connection with others at workplace and feeling of connectedness. Feeling for others, job competence (productive and meaningful work) and morality is also the strongest predictor of overall self esteem (DeBord, 2009). Those individuals who are involved in meaningful and purposeful activities become more healthier by the time because theses meaningful activities involves social involvement of the individual which is associated with the spiritual well being and enhanced self-esteem (Leung, Chenug & Liu, 2011). In simple words, workplace spirituality enhances self esteem of the employees. Employees raise their self esteem by indulging in meaningful and productive work.

Well-being refers to a person's own assessment of their happiness and satisfaction with life. World Health Organization (2003) defined mental health as "Concepts of mental health include subjective wellbeing, perceived self-efficacy, autonomy, competence, intergenerational dependence and recognition of the ability to realize one's intellectual and emotional potential. It has also been defined as a state of wellbeing whereby individuals recognize their abilities, are able to cope with the normal stresses of life, work productively and fruitfully, and make a contribution to their communities" (Friedli, 2009, p.7).

According to the Ryff (as cited in Seifert, 2005), psychological well-being has multi-facets which include: Self-acceptance, the development of quality and strong relationship with other, a sense of autonomy in one's thought process and the way he/she acts, the ability to manage hard environment according to one's needs and shape it according to one's values. The individual's motivation towards meaningful goal in life provides a sense of purpose in life and continuous process of growth and development as a person.

Ryff's multi-faced model explains psychological well-being in a positive manner where individuals multi-factors contribute meaningfully to a productive personality. His model can be illustrated in figure as follows:

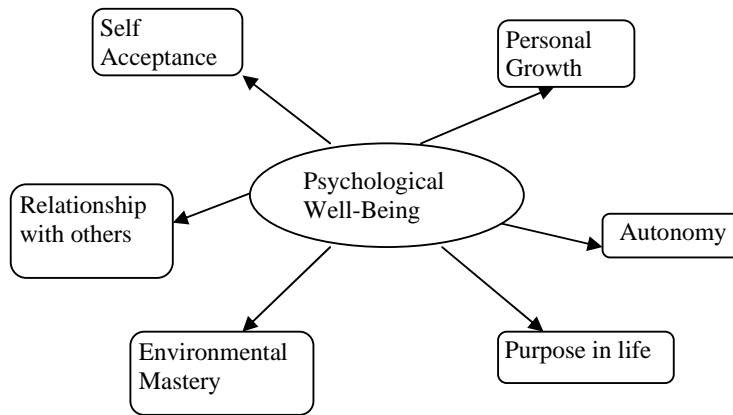


Figure 1: Dimensions of Psychological well being

Workplace spirituality enhances self-esteem of employees. It can also influence job satisfaction and satisfaction in personal life because it encourage individual to use his full potentials and bring their whole self into it (Zafar, 2010). According to DeBord (2009) psychological well-being is directly associated with the kind and number of roles an individual occupies which determines an individual self esteem. At workplace, the pathway to raise personal value and self esteem is to do productive and meaningful work. Studies have shown that the developmental growth and manifestation of workplace spirituality may not only address and resolve the issues of stress and burnout, but also promote the well-being of employees.

Research has found that workplace spirituality facilitate self discovery but also a greater sense of personal security. It is also found that self realization and security improves employees self esteem and perception about their environment. Therefore, spirituality might be a contributing factor to boosting employees' inner security holistically even if the external organisational environment is not secure (Mat & Naser, 2012). Mitroff and Denton (1999a, 1999b) in their research observes that in their spiritual journey, people face a great struggle in finding the true meaning of their work. Reave (2005) found a significant correlation between spirituality and mental health indices of life satisfaction, happiness, self esteem, hope and optimism, and meaning in life.

It is concluded that workplace spirituality enhances self esteem and psychological well-being among mental health professionals. High self esteem is associated with psychological well-being. Workplace spirituality and high self esteem is the predictor of psychological well-being.

The number of studies has examined the different aspects of relationship between workplace spirituality, self esteem and psychological.

Several researches (e.g., Geh, 2009, & Milliman, et al., 2003) had found the positive relationship between workplace spirituality and organizational based self esteem in the organizational setting and it also enhance job satisfaction of the employees.

This study focuses on psychological well-being of paramedical health care employees. Aqarwal and Sharma (2011) conducted the study with the aim of investigating the effects of perception of the hospital workplace factors on the job satisfaction and psychological well-being of a sample of paramedical health care employees ($N = 200$) from a medical college (teaching) hospital and public (non-teaching) government-run hospitals. Stepwise regression analysis of the data revealed that the organization's structure-related factors, coordination and work autonomy were significantly predictive of job satisfaction and psychological well-being of health care employees, while the process-related workplace factors, participative decision making and intra-professional relations, emerged as significant predictors of psychological well-being and job satisfaction in both types of hospitals.

This study explores the relationship between self esteem and psychological well being. Paradise and Kernis (2002) examined the relationship between self esteem level and self esteem stability with psychological well being. They examined the extent to which self esteem level and self esteem stability predict psychological well being. Results revealed that there are main effects for SE Level emerged on all six subscales, indicating that high self-esteem was associated with greater well-being than was low self-esteem.

Rationale of the Study

It is important to highlight the aspect of workplace spirituality which is rarely studied in regard to mental health professionals and its relation with self esteem and psychological well-being. Similarly, the work on psychological well being of mental health professionals is of

great importance as they work for others well-being. So, it is important to study workplace spirituality, self-esteem, and psychological well-being collectively. The phenomenon of workplace spirituality in health care organization and for mental health professionals is important because mental health professionals deal with sufferings and sanity of other individuals which is a tedious task. Mental health professionals experience stress as they deal with disturbed individuals and because of the nature of their work, workplace spirituality provides them with inner strength and the ability to cope with stress. This stress affects the self esteem and psychological well being of the mental health professionals and on the other hand workplace spirituality provides solutions to deal with. If mental health professionals do not experience spirituality themselves then how they can provide services or fulfills needs of the patients. So, it is important to study workplace spirituality among mental health professionals and to know how workplace spirituality raises mental health professionals self-esteem and psychological well-being.

The purpose of the study is to examine the level of workplace spirituality at individual, work unit and organizational level and to investigate the relationship of workplace spirituality components and self esteem with psychological well being. This study will undertake the objectives to investigate the relationship of workplace spirituality, self esteem and psychological well being with mental health professionals (psychiatrists, psychologists, nurses and paramedical workers).

Hypotheses

1. Workplace spirituality would be positively associated with self esteem.
2. Workplace spirituality and self-esteem would positively predict psychological well-being.

Method

The aim of the study was to investigate the predictive relationship of workplace spirituality, self-esteem for psychological well-being among mental health professionals and for this purpose coorelational between subject research design was employed in the study.

Sample

The sample comprised of 120 mental health professionals including 30 psychologist, 30 psychiatrist, 30 psychiatric nurses, and 30 ward attendants working in the field of mental health. Data was collected from psychiatry departments of different hospitals, a half way house and a psychiatric clinic which includes Mayo Hospital, Punjab Institute of Mental Health, Services hospital, Jinnah Hospital, Ganga Ram Hospital, Fountain House, and Pak Lane Clinic. G-power analysis had shown that study has above 90% power with alpha level 0.5, effect size 0.3 and for number of predictors 3 and 15, respectively.

Mean age of psychiatrist 36.3 ($SD = 10.8$) was greater than psychologist mean age 33.3 ($SD = 8.9$), nurses mean age 31.1 ($SD = 10.0$) and attendants mean age 34.9 ($SD = 10.7$). The sample was comprised of 74% males and 26% of female psychiatrists, 13.3% male psychologist and 86.7 % female psychologist, all nurses were female and similarly all attendants were male. It also suggests that psychologists were more educated as compared to other mental health professionals. Demographic result showed that psychiatrists' monthly income was higher than other mental health professionals. Psychologists and nurses had almost same income level. Attendants' monthly income was lowest among mental health professionals.

Inclusion Criteria

The participants must have been working in the hospital/clinic for at least one year.

Measures

Spirituality at Work. It was developed by Ashmos and Duchon (2000) to measure spirituality in the workplace. The three levels of Spirituality at Work (SAW) are: individual level, work unit level and organizational level, each level was comprised of different factors. The instrument measures perception of the organizations and also the perception of individuals working in organizations. SAW is the 7-point Likert Scale ranged from 1= *strongly disagree* to 7 = *strongly agree*. The scale gives separate scores for each factor and Urdu version of the scale was used in the study.

Individual level. It measures the aspects of workplace spirituality which contribute at the individual level such as inner life, contemplation etc. It is further divided into seven factors.

Conditions for community. It assesses the extent to which the enabling conditions for community are available. These enabling conditions make this community a workplace where people feel valued, experience personal growth and a sense of working together. This aspect represents the “fellowship” dimension of spiritual development. There are total nine items in this factor. The reliability of the English scale was .86 and for the present study data is .84

Meaning at work. It includes items that measure what an individual find important, energizing and joyful elements about work. It measures the work related dimensions of human experience which is spiritual in nature. There are total seven items in this factor. The reliability of the English scale was .86 and for the present study data is .84.

Inner life. It is composed of items that capture an individual’s hopefulness, awareness of personal values and concern for spirituality. There are total five items in this scale. The reliability of the English scale was 0.80 and for the present study data is .64.

Blocks to spirituality. It assesses the conditions that would inhibit the development of spirituality in the workplace. There are total six items in this factor and all the items are reversed score items. The reliability of the English scale was .74 and for the present study data is .85.

Personal responsibility and positive connections with others. It assesses those aspects of community which enrich the concept of spirituality. There are total two items in the personal responsibility factor and there are three items in positive connections with others. The reliability of the English scales was .77 and .74 and for the present study data is .68 and .41.

Contemplation. It includes additional behaviors associated with expressing an inner life. There are two items in this factor. The reliability of the English scale was .69 and for the present study data is .7.

Work unit level. It measure the aspect of spirituality related to the current department in which the individual is working and how the work unit values effects an individual. It is further divided into two parts.

Work unit community. It describes informants’ sense of their work unit as a community and the extent to which the work unit is

encouraging and caring. There are total eight items in this factor. The reliability of the English scale was .87 and for the present study data is .89.

Positive work unit values ($\alpha = .91$). It describes the extent to which the individual identify with the work unit's goals, values and mission. There are total six items in this factor. The reliability of the English scale was .91 and for the present study data is .9

Organizational level. This factor measures the individual's perception regarding the organization and its values. It is further divided into two factors.

Organizational values ($\alpha = .93$). It assesses individual's perception of and attitudes about the values of their organization. There are total seven items in this factor. The reliability of the English scale was .93 and for the present study data is .9.

Individual and the organization ($\alpha = .84$). It includes an evaluation of the individual in relation to his or her organization. There are total six items in this factor. The reliability of the English scale was .84 and for the present study data is .75.

Translation of Scale

The SAW was translated into Urdu using Lexicon Equivalence method of translation. The English version of the measure was given to five bilingual individuals whose minimum education was Masters and have psychology and research background. The translation was then evaluated by the researcher, supervisor of this study and another person who was also good at both languages. Those statements were selected that gave closest meaning to the original statements of the scale. After final selection of all items of Urdu version, this scale was administered to thirty students to find out the understandability and conceptual clarity of Urdu version. Difficulties in understanding two items were reported and standard alternatives were given to clarify meanings.

Final version was given to other five bilinguals for translating the Urdu version back to English and their English back translation was evaluated by the researcher and her supervisor who were also bilinguals with qualification from Masters to PhD keeping in mind the comparability/ correctness of English.

Final back translated English and Urdu version was administered on 30 more bilingual masters' students. 15 students were given Urdu version first & other 15 participants were given English version first

in order to control order effect. Correlation between English & Urdu versions was ($r = .89$). Item correlation mostly ranged from .70 to .92.

Rosenberg self esteem scale (RSES). The RSES was developed by Rosenberg in 1965, it is one of the most widely used and well validated self report measures of global self esteem. RSES is a Gutman Scale includes 10 items rated from strongly disagree to strongly agree. There are five reverse items in the scale. The scoring ranges from 0 = strongly disagree to 3 = strongly agree. The scale ranges from 0-30, with 30 indicating the highest score possible. The higher score means the higher self esteem. The reliability of the scale is 0.88. The reliability of the scale for the present data is .72. The Urdu version of this scale was used and it was translated by Bano and Kausar (2006).

Psychological well-being scale. Ryff (1989) developed the psychological well-being scale to measure the dimensions of autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. It has a 6 point Likert scale ranges from strongly disagree to strongly agree. There are total 84 items and total 6 sub-scales each consisting of 14 items. It also includes negatively scored items which are reversed in the final scoring. Higher the scores the higher will be wellbeing or 1.5 standard deviation above the mean indicates high well-being. The Urdu version of the scale is used which is translated by Aslam and Kausar (2010).

Autonomy. The individual who score high on this scale is self-determining and independent in resisting social pressures against his/her beliefs and values and regulate his/her own behavior and evaluate himself according to self made standards. The individual who score low on this scale reflect the other way. The scale is comprised of 14 items including 7 reverse score items. The reliability of the English scale was .83 and for the present study is .62.

Environmental mastery. The individual with high score on this scale has a sense of mastery and competence in managing the environment and external activities by using opportunities effectively and make his surroundings according to the needs and values. The individual with low score on this scale has diminished sense of control over his environment. The scale is comprised of 14 items including 6 reverse score items. The reliability of the English scale was .86 and for the present study is .78.

Personal growth. This scale determine a feeling of continued development, growth and expansion with openness to experience,

determination of improvement by evaluating potential in one self over time who score high on this dimension. On the other hand it determines a sense of personal stagnation, bored and uninterested with life and found no improvement in one self and behavior over time. This scale is comprised of 14 items which includes 8 positive items and 6 reverse score items. The reliability of the English scale was .85 and for the present study is .72.

Self-acceptance. High score on this scale reflect that an individual possesses a positive attitude toward the self, acknowledges and accepts multiple aspects of self, rather they are good and bad and feels positive about past life. On the other hand low score on this scale means that the individual feels dissatisfied with self and the events which have occurred in the past life. There are total 14 items of this scale including seven reverse scored items. The reliability of the English scale was .91 and for the present study data is .71.

Purpose in life. This scale indicates that the individual who gain high score has goals in life which provides sense of directedness with aims and objectives for livelihood and found their past present life as meaningful and the individual with low score lacks a sense of meaning in life and have no direction in life and living without any aims and objectives set for life and found his past life as purposeless. The scale is comprised of 14 items including 7 reverse score items. The reliability of the English scale was .88 and for the present study is .75.

Positive relations with others. High score on this scale indicates that the individual has warm, satisfying, trustworthy relationships with others based on genuine care, empathy, intimacy and concerned regarding the welfare of others and understand human relationship as a two way process. Low score on this scale reflect unsatisfying relationships with others. The scale is comprised of 14 items including 7 reverse score items. The reliability of the English scale was .88 and for the present study data is .76.

Procedure

In order to collect data different hospitals and clinics were approached by the researcher. Permission from the Heads of the Psychiatry Departments and administrator of Clinics was obtained. Participants which include doctors, psychologists, nurses and attendants were individually approached. The consent was taken from the participants of the study. The participants were briefed about the nature and purpose of the study. Each participant was assured of privacy and confidentiality of their identity and information. The

participant's understood that their involvement was purely voluntary and that they can stop participating I research anytime if they feel that they do not want to continue. They were also told that the information got from them will only be used for academic and research purposes. The demographic information form and other questionnaires were administered to the participants. Data was individually gathered with oral administration of questionnaires to keep the administration standard. The researcher had faced many difficulties during data collection process. Altogether 170 participants were approached but data was collected from 120 participants. Refusal rate was 30%. The reason for refusal given by most participants was busy time schedule. Some attendants could not complete the questionnaire as their supervisors called them for work.

Given the nature and length of the questionnaires the refusal rate found in this study was more than the other surveys, for example Sitwat (2005) reported a rate of 12% and Brown and Harris (1978) reported a rate of 17% refusal for the survey carried out. Therefore, results of the study should be interpreted with caution.

Results

The purpose of the present study was to assess the workplace spirituality, self esteem and psychological well being among mental health professionals in Lahore. In the present chapter firstly correlation between workplace spirituality, self esteem and psychological well being are presented. Secondly, findings from regression analyses for prediction of psychological well being are presented, where predicted variable are workplace spirituality and self esteem.

Table 1
Means, SD and correlations of Study Variables

Measures	1	2	3	α
WS	—	.53**	.45**	.94
SE		—	.52**	.72
PWB			—	.92
<i>M</i>	330.52	21.64	379.78	
<i>SD</i>	45.73	3.48	43.52	

Note: WPS = Workplace Spirituality, SE = Self Esteem, PWB = Psychological Wellbeing, *M* = Mean, *SD* = Standard deviation

** $p < .01$.

Results in Table 1 indicate significant positive correlation between workplace spirituality, self esteem and psychological well-being.

Table 2

Predictors of Psychological Well-being (N=120)

Variable	Psychological Wellbeing		
	Model 1 <i>B</i>	Model 2	
		<i>B</i>	95% <i>CI</i>
Constant	237.08***	196.35***	[144.94, 247.76]
SE	6.6***	5.02***	[2.79, 7.24]
WPS		.227**	[.06, .4]
R ²	0.27	.31	
F	54.48***	27.4***	
ΔR ²		.04	
ΔF		7.01	

Note. SE = Self-Esteem, WPS = Workplace Spirituality

ΔR² = Adjusted R² (explained variance), *B* = Unstandardized Coefficient, *CI* = Confidence Interval ***p*<0.01, ****p*<.001

Using the stepwise regression analysis, total score of workplace spirituality, self-esteem, gender, monthly income, education and occupation was entered. Two significant models were emerged.

The findings in Table 2 shows as the first model was significant, $F(1,118) = 54.48$, $p < .001$. The model explained 27% variance (adjusted $R^2 = .27$). So, self-esteem was the only predictor psychological wellbeing and the other variables such as, gender, education, occupation, monthly income and workplace spirituality were excluded.

In second model, self-esteem and workplace spirituality were significant predictors excluding all other variables. The model was significant at $F(2,117) = 27.4$, $p < .001$. The model explained 31% variance (adjusted $R^2 = .31$).

So it was concluded that self-esteem and workplace spirituality both were predictors of psychological wellbeing among mental health professionals.

Table 3
Predictors of Psychological Well-being Sub-scales (N=120)

Autonomy					
Variable	Model 1		Model 2		
	<i>B</i>		<i>B</i>		95 % CI
Constant	35.17***		39.97***		[30.19, 49.75]
SE	.88***		.93***		[.51, 1.35]
Gender			3.87**		[-6.75, -.99]
R ²	.13		.18		
F	16.67***			12.72	
ΔR ²				.05	
ΔF				7.01	

Environmental Mastery					
Variable	Model 1	Model 2		Model 3	
	<i>B</i>	<i>B</i>	<i>B</i>	<i>B</i>	95% CI
Constant	42.41***	29.81***	37.64***	40.85***	[28.91, 52.79]
OV	.56***	.42***	.47***	.47***	[.27, .68]
SE		.83**	.92***	.95***	[.49, 1.42]
C			-1.01*	-.92*	[-1.7, .15]
Gender				-3.21*	[-6.18, -.24]
R ²	.21	.29	.39		.35
F	32.23***	23.33***	18.52***		15.47***
ΔR ²					.03
ΔF					4.58

Personal Growth				
Variable	Model 1	Model 2	Model 3	
	<i>B</i>	<i>B</i>	<i>B</i>	95% CI
Constant	49.83***	48.43***	40.1***	[29.8, 52.19]
PWUV	.48***	.42**	.48**	[.21, .74]
PCO		.22*	.26*	[.05, .47]
Edu			1.26*	[.03, .11]
R ²	0.1	.13		.16
F	12.88***	8.65***		7.54***
ΔR ²				.04
ΔF				4.75

Self Acceptance				
Variable	Model 1 <i>B</i>	Model 2 <i>B</i>	Model 3	
			<i>B</i>	95% CI
Constant	28.61***	25.39***	31.36***	[20.53,42.19]
SE	1.49***	1.31***	1.37***	[.93, 1.82]
OV		.19*	.23*	[.04, .42]
C			-.77*	[-1.49, -.05]
R ²	.31	.33		.36
F	51.21***	28.52***		20.92***
ΔR ²				.03
ΔF				4.53
Purpose in Life				
Variable	Model 1 <i>B</i>	Model 2 <i>B</i>	Model 2	
			<i>B</i>	95% CI
Constant	41.41***	36.58***	31.66***	[21.85,
SE	1.2***	1.02***	1.04***	41.47]
IL		.27**	.27**	[.63, 1.45]
Occu			1.73**	[.11, .44]
R ²	.21	.27		.32
F	31.25***	21.77***		18.02***
ΔR ²				.05
ΔF				7.91
Positive Relations with Others				
Variable	Model 1 <i>B</i>	<i>B</i>	Model 2	
			<i>B</i>	95%CI
Constant	45.96***	36.94***		[27.03, 46.86]
BS	.69***		.53***	[.27, .73]
SE			.64**	[.16, 1.13]
R ²	0.23			.27
F	33.59***			21.11***
ΔR ²				.04
ΔF				6.92

Note: SE = Self Esteem, OV= Organizational Values, C = Contemplation, PWUV = Positive Work Unit Values, IL = Inner life, PCO = Positive Connection with Others, BS = Blocks to Spirituality, Edu = Education and Occu = Occupation.

B= Unstandardized Coefficient; β = Standardized Coefficient, R^2 = R square, ΔR^2 = adjusted R square.

* $p < .05$, ** $p < .01$, *** $p < .001$

Results in Table 3 showed that self-esteem was the significant predictor of five out of six sub-scales (autonomy, environmental mastery, self acceptance, purpose in life and positive relations with others) of psychological wellbeing. Organizational values and contemplation were the significant predictors of environmental mastery and self acceptance. Gender was the significant predictor of autonomy and environmental mastery. Result further indicated that positive work unit values, positive connection with others and education were the significant predictors of personal growth. Similarly, inner life and occupation were the significant predictors of purpose in life and blocks to spirituality was the significant predictor of positive relations with others. Conditions for community, meaning at work, personal responsibility, work unit community and individual and the organization were excluded. Range of variance explained 0.1 to .36 for variables that significantly predicted sub-scales of psychological wellbeing.

Discussion

There were three main objectives of the present research. First, the researcher was interested in finding the relationship between workplace spirituality, self esteem and psychological well being. Second, to investigate the predictive relationship of workplace spirituality and self esteem for psychological well being.

The first hypothesis predicted a positive relationship between workplace spirituality, self esteem and psychological well being. The results of the study showed significant positive relationship between workplace spirituality, self esteem and psychological well being. The results revealed that moderate positive association existed between variables. The results were also supported by various previous researches that positive association existed between workplace spirituality and organizational based self esteem (Geh, 2009; Milliman, et al., 2003; Riasudeen & Prabavathy, 2011). Paradise and Kernis (2002) found that high self esteem was associated with greater well being. The study of Moshki and Ashtarian (2010) also found the relationship between self esteem and psychological well being. They found the significant relationship between low perceived internal health, locus of control, self esteem and psychological well being. It indicates that individuals with high workplace spirituality also experience high self esteem and also experience greater well being on the other hand. Similarly, individuals with high self esteem have greater psychological well being. It showed that workplace spirituality

give boost to the individual self esteem and also provides psychological security and satisfaction which enhances psychological well being.

The second hypothesis was that workplace spirituality and self esteem would positively predict psychological well being where total sum of three variables were used. Results supported hypothesis as workplace spirituality and self esteem positively predicted psychological well being. The findings of the present study are in line with what Betton (2004) found in his study that self-esteem was the best predictor of psychological well-being in Caucasian participants while spirituality was the strongest predictor of well-being in African American respondents. In the present study workplace spirituality and self esteem both predicted psychological well being among mental health professionals. Paradise and Kernis (2002) revealed that high self esteem positively predicted psychological well being. Ashtarian (2010) also found that direct relationship among self esteem and psychological well being among students. McKee, Driscoll, Kelloway, and Kelly (2012) found that workplace spirituality predict psychological well being. Workplace spirituality helped mental health professionals to maintain their psychological well being working under the challenging situations. Mental health professionals who can practice according to their spirituality in the work environment and with high self esteem have greater psychological well being.

The result of the present study showed the connection between workplace spirituality and self esteem and psychological well being. It showed that those mental health professionals who use workplace spirituality in their work environment had better self esteem and psychological well-being. They feel more satisfied as they were fulfilling their inner life needs as well as they were serving other people which in return again provide satisfaction which help them to maintain their self esteem and psychological well-being.

The result indicated that self esteem and components of workplace spirituality predicted different dimensions of psychological well-being. The result also indicated that self esteem and gender predicted autonomy. No components of workplace spirituality predicted autonomy but different components of workplace spirituality predicted other dimensions of psychological well-being among mental health professionals. Bean and Northrup (2009) found that psychological autonomy and control were significantly related to self esteem. It shows that self esteem helps people to become independent and make decisions. As no components of workplace spirituality predicted autonomy indicating that mental health professionals were perhaps facing hinder areas in being autonomous.

They might be facing workload or organization had not given them autonomy to implement their decisions in their workplace or autonomous in choosing the suitable style for their work. Gender was also the predictor of autonomy which contradicts with previous literature as Lafso (2011) found no significant difference in gender in autonomy and environmental mastery.

Results also revealed that self esteem was not a significant predictor of personal growth which contradicts the previous researches result. One reason could be that personal growth phenomenon was more related to spirituality and components of workplace spirituality undermine the significance of self esteem.

The result indicated that organizational values (organizational level) and contemplation (individual level); two components of workplace spirituality and gender were the predictors of Environmental Mastery. Weick and Sutcliffe (2006) have explained that when people become more mindful, they develop the capability to act in a wiser way which enhances their performance and satisfaction. They behaved competently in their environment by observing distractions in the environment and letting them go. It shows that an organizational value such as how much the organization is concerned about their employees may enhance environmental mastery. The stronger the organizational values, easier it is to master the environment for the mental health professionals. Environmental Mastery of the mental health professionals were also depended upon the gender of the participant.

Analysis was computed for the prediction of personal growth; third of the six sub-scales of psychological well-being. The result revealed that positive work unit values, positive connection with others and education level were the predictors of personal growth. Level of education enhances personal growth of the individuals. It indicates high level of education result in greater personal growth. This result is also supported by previous researches. According to Simmons and Nelson (2001) found a positive relationship between positive psychological states such as hope, positive affect and meaningfulness with the perception of health in hospital nurses. Work environment is the place where individuals can establish positive and healthy relationship with others which promotes personal growth of the individual, working under the environment that take cares of their employees and their needs and employees have opportunity to work according to their spiritual beliefs. Work unit values of the department provide chances for personal growth. Karasek and Theorell (1990) explained that employees experience higher wellbeing, learning and

personal growth, if organization provides independence to their employees in choosing the way of work.

Analysis had been computed for the prediction of self acceptance; fourth of six sub-scales of psychological well-being. The result indicated that two components of workplace spirituality; organization values (organizational level) and contemplation (individual level) were the predictor of self acceptance. It suggests that mental health professional that incorporates contemplation in their personal life were more likely to accept themselves with their good and bad qualities. Individuals working in the organization where the importance was given to organizational values were more likely to accept themselves. Researches which focus on workplace spirituality found that spiritual issues facilitates greater self discovery and enhance feeling of Personal Security. Duchon (as cited in Javanmard, 2012) stated that belonging to a social group and working for the betterment of the society shapes one's self concept.

Regression analysis for the prediction of 5th factor of wellbeing i.e., purpose in life reflected that factors of workplace spirituality such as inner life (Individual level) and occupation were positive predictors of purpose in life. According to Ventegodt, Andresen & Merrick, (2003) inner life includes connection with Allah and the value which the individual places to spirituality in life, provides purpose in life. Those individuals who have positive work unit values lead their life purposefully. Shapiro, Brown and Beigel (2007) found that therapists were at risk for occupationally related psychological problems. It was found that mindfulness based stress strategies helped to reduce stress and anxiety. These strategies also promote positive affect and self-compassion. Rego and Cunha (2008) found that organizations can enhance organizational commitment by improving the spiritual climate of their organization which in return satisfies spiritual needs of the employees which provides psychological safety and allows them to experience a sense of purpose in life. Strong inner connection with oneself provides direction in life and individual find motivation to complete his/her purpose of life by working with the team who are helpful and concerned. Similarly, occupation was closely related to the individual's purpose in life.

Regression analysis for the prediction of positive relation with others; sixth of the six sub-scales of psychological wellbeing revealed that blocks to spirituality was the predictor of positive relation with others. Blocks to spirituality is the reversed items scale that indicates those individuals who scored high on blocks to spirituality had no blocks in their personality and they were open towards spirituality.

Those individuals who have no blocks to spirituality establish positive relationship with others.

Thus, it is concluded that self esteem is one of the most significant predictor of dimension of psychological wellbeing. Among the factors of workplace spirituality inner life, contemplation, blocks to spirituality and positive connection with others (individual level), positive work unit values (work unit level) and organizational values (organization level) were the significant predictor of psychological wellbeing among mental health professionals. Contemplation was the most significant predictor of different dimensions of psychological wellbeing among mental health professionals. There were factors of workplace spirituality not predicted any dimension of psychological wellbeing. These include conditions for community, meaning at work, personal responsibility (individual level); work unit community (work unit level) and individual and the organization (organizational level). It indicates that these factors were not significant predictor of psychological wellbeing. The reason could be that other factors undermine their significance. There could be other factors which these variables. These factors might be important predictor of psychological wellbeing among employees working in other sectors.

Limitations and Suggestions

Although the results of the present study showed some statistically significant relationships between variables and the hypotheses are fully or partially confirmed. It also has certain limitations.

The sample size was just adequate to establish the moderate relationship among variables. If the sample size is larger, the sample will have more homogeneity which leads to better predictive value of workplace spirituality and self esteem for psychological wellbeing.

To get the consent from psychiatrists and psychologists to participate in the study was difficult which might also effect the representation of the sample. It has already being mentioned before those 170 participants were approached and only 120 completed the task.

Another limitation of the study was that gender could not be controlled for the groups of the present study. Profession of psychology is dominated by females all over the world and profession of psychiatry by men. Similarly, nursing is dominated by females while attendants are both males and females. Although in regression

analysis, gender was not a significant predictor for overall psychological wellbeing. However, gender was a significant predictor of autonomy and environmental mastery (sub-scales of psychological wellbeing). Therefore, any future study can address this problem and result of the present study should be interpreted with caution.

The results of the present research implied that if the organizations or Hospitals provide opportunity to their employees to work accordingly to their spirituality, to ensure them that their workplace is such an environment where spirituality could be practiced at individual level as well as community level. It will enhance their self esteem and psychological well being of the mental health professionals. As a result to that they can serve the patients more effectively and enthusiastically and they will work hard for the betterment of the psychological well being of the patients and as well as for their surroundings.

Conclusion and Implications

In conclusion, workplace spirituality predicts self esteem and psychological well being among mental health professionals. Self esteem is a the independent predictor of overall psychological well being among mental health professionals as well as it is also the predictor of five sub-scales (autonomy, environmental mastery, self acceptance, purpose in life and positive relation with others) of psychological well being except personal growth. It highlights the importance of self esteem and its contribution in maintaining psychological well being among mental health professionals. On the other hand, different factors of workplace spirituality predicted different dimensions of psychological well being. It shows that workplace spirituality is important at three levels: individual, work unit and organizational level.

The present study contributes to fill the gap in workplace spirituality and mental health professional's literature in Pakistan. Further studies should be done to explain why workplace spirituality of psychiatrists is low and how it affects their duties towards their patients.

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