CHAPTER 5

Conclusion, Implications, and Recommendations

This chapter is presents conclusion based on the findings and discussion, followed by implications for the nursing profession and recommendation for further study on workplace spirituality and OCB.

Conclusion

The purposes of this descriptive correlational study was to describe the level of workplace spirituality and the level of OCB perceived by nurses that worked at four general hospitals and also to explore the relationship between workplace spirituality and OCB. Subjects in this study were 219 nurses who had worked at least one year at Sanpya General Hospital, West Yangon General Hospital, Insein General Hospital, or East Yangon General Hospital, Yangon, the Republic of the Union of Myanmar. The data were collected from February to March, 2014. The research instruments used in this study were the self-administered questionnaires and included three parts : a demographic data form, OCB questionnaires developed by Konovsky and Organ (1996), and workplace spirituality questionnaires developed by Milliman et al. (2003). The validity of both instruments were not tested in this study as the original authors have already tested them (Konovsky & Organ, 1996; Milliman et al., 2003). The Cronbach's alpha coefficient of the internal consistency reliability of workplace spirituality and OCB was .90 and .77, respectively. Based on the study objectives, data were analyzed by using descriptive statistics and Spearman's rank-order correlational coefficient analysis. The findings of this study were as follows:

1. The majority of the subjects were female (99.09 %) with the average age of 33.53 years, almost half of the subjects were between 31-40 years old. Among the subjects, about 70% of the subjects were single and held the Diploma of Nursing. Approximate 60% of them were staff nurses. Over 70% of the sample had between 1-10

years of experience. The main group (16.44 %) of the nurses had been worked at the operation theatre, and around one-third of the sample (33.33 %) had been working at Sanpya General Hospital.

2. The overall mean score of workplace spirituality perceived by nurses (\overline{X} = 5.18, SD = 0.80) and mean scores of all three dimensions were at high levels. Among three dimensions of nurses' workplace spirituality, sense of community (\overline{X} = 5.37, SD = 0.80) had a higher mean score than meaningful work (\overline{X} = 5.11, SD = 1.00) and alignment with organizational values (\overline{X} = 5.07, SD = 0.97).

3. The overall mean score of OCB among nurses was at a high level ($\overline{X} = 5.67$, SD = 0.47) and mean scores of all five dimensions were also at high levels. For the dimensions of nurses' OCB, generalized compliance ($\overline{X} = 5.84$, SD = 0.64) had the highest mean score among the dimensions, followed by sportsmanship ($\overline{X} = 5.77$, SD = 0.83), courtesy ($\overline{X} = 5.62$, SD = 0.73), civic virtue ($\overline{X} = 5.54$, SD = 0.77), and altruism ($\overline{X} = 5.51$, SD = 0.75).

4. There was a significant positive moderate relationship between workplace spirituality and OCB as perceived by nurses from four general hospitals in Yangon (r = 0.359) at p < 0.01.

Implications

Implication for Nursing Administrator and Managers

1. The study results could provide baseline data for hospital administrators and nursing administrators concerning workplace spirituality and OCB.

2. The hospital administrators and nursing managers could maintain workplace by providing a happy and healthy environment, proper leadership behavior, encouraging nurses' career and professional development, which in turn increase workplace spirituality, thereby increasing nurses' OCB.

3. Comprehensively, the administrators should encourage their nurses to obtain more experiences which provide a strong sense of alignment between the nurses' personal values and the hospitals' missions and purposes.

4. For the nurses' behavior, both hospital and nurses administrators should facilitate their behavior especially in helping others directly and intentionally in face to face situation.

Implication for Nursing Research

The results of the study could provide the basic information for further research studies in the area of organizational behavior in the healthcare setting, especially in general hospitals.

Recommendations

Based on the result of this study, some recommendations need to be considered for further study.

1. Further study should be conducted in all areas of Myanmar as a regional or national level research study to get greater generalizibility as well as to verify the results over time.

2. An additional study should explore OCB among nurses in different units/ wards and across different sectors because OCB can change across time and situations as public vs. private sector, general hospital vs. specialty hospital.

3. Further study should consider strategies to control social desirability to get more valid results such as providing separate boxes for returned questionnaires and consent forms in the data collection procedure to assure anonymity, or using different sources such as self, peer and supervisory ratings.

4. An additional study should be conducted by using the qualitative research method in exploring nurses' workplace spirituality and their OCB.

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