

THE IMPACT OF POSITIVE PSYCHOLOGICAL CAPACITIES ON MEDICAL SCIENCES FACULTY MEMBERS' WORK LIFE QUALITY

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ABSTRACT

Goal: The object of this research is to comparatively study the role of psychological positive capacities on the work life quality of basic science and clinical faculty members of Medical Sciences University, Shiraz. **Perspective/ method/ design:** the participants were consisted of 250 individuals of Shiraz Medical Sciences faculty members (for example, faculty of medicine, faculty of dentistry, faculty of health and nutrition, etc) who have been selected through stratified random sampling. The data were collected by work life quality and psychological positive capacities questionnaires; questionnaires' reliability was measured 0.91 by the help of Cronbach Alpha (α) method. Data were analyzed using SPSS statistic software, Pearson correlation as well as linear and multiple regressions. **Results:** Of research samples, 50.4% were male and 49.6% were female. Findings showed that the highest average rating is related to planning of hope component equals 3.86 with a standard deviation of 0.72 and variance of 0.52; and the least value (2.94) is attributed to work life quality. Results of statistical tests indicated that there is a positive, significant relation between psychological positive capacities and its dimensions to work life quality; however, this relation in Basic Sciences faculty members is less effective. **Recommendations:** Applying capital centered strategies (such as raising social, human ... positive capitals) so that maintain skilled and engaged scientific capitals, involving personnel in setting goals, and time managing of faculty members' schedules all are useful approaches; therefore, it can be boldly said that satisfying members to its favored department is recognized as one of the most critical concerns of managers including universities' chancellors. **Innovation/ value:** The evident and outstanding value of this present paper is to comparatively study measuring the impact of psychological positive capacities in terms of its dimensions on the work life quality of Shiraz Medical Sciences faculty members (Basic Sciences and Clinical faculties) and to provide some approaches for improving.

Keywords: Psychological Positive Capacities; Work Life Quality; Faculty of Medical Sciences

Type of paper: Research paper

INTRODUCTION

The role and significance of human in an organization is as much as that it can be said success and effectiveness of each organization largely depends on appropriately applying manpower. Mental health considered as basic requirement which is critical for improving life quality, since mental health may lead to capability of harmonic and coordinated communication, modifying individual and social environment as well as reasonably, fairly resolving conflicts and personal desires. Mental health is not only the absence of any mental illness but also responding to various different experiences flexibly and significantly (WHO, 2001). The results obtained from studies on positive-oriented organizational behavior indicated that abilities including hope, resiliency, optimism, happiness or mental health and emotional intelligence all together create an element naming psychological positive capacities (Kamani, 2011); thus, psychological positive capacities are consisted of measurable and developable positivism variables with the possibility of implying management. In other word, "psychological capital" challenges people to seek for who are they in order to attain a better self-awareness which is regarded as success prerequisite (Lootanz *et al.*, 2004; cited by Mohebi *et al.*, 2014). Historically, there have been different opinions, even

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conflicting ideas, about hope; though, hope in positive-oriented psychology owns special meaning. Schneider *et al.*, (1991) referred to hope as “a cognitive set based on a sense of achievement due to various sources (functionality: target-directed energy) and paths (planning to achieve goals)” (Karimi *et al.*, 2012). Studies demonstrated that optimism and positivism play a substantial role in dealing with life pressures, overcoming psycho- social difficulties, health related behaviors interventions, life style modification as well (Roberts *et al.*, 2011; Pousadzki *et al.*, 2010). Today, the notion of work life quality has become a major social issue so that its proponents look for new systems for helping staffs in order to balance personal and work life. Work life quality can be defined as satisfaction of any individuals of meeting his needs through sources and activities and consequences of involvement and participation in work place (Niksirat, 2013). This present study focuses on scrutinizing the impact of psychological positive capacities on the work life quality of both faculties of clinical and basic sciences of Shiraz Medical Sciences University. Therefore, the research main hypothesis is studying the role of psychological positive capacities in work life quality of faculty members of Shiraz Medical Sciences University (H1). Research sub-hypotheses investigate the effective dimensions of positive psychological capacities i.e. hope, resiliency and optimism (regarding their components) in work life quality of Shiraz Medical Sciences University faculty members (H2-H7).

MATERIALS AND METHODS

Research Methodology

Participants (Population)

The participants were all faculty members of Shiraz Medical Sciences University selected using Cochran's formula through stratified sampling; of the 250 selected samples 139 individuals were clinical faculty members and 111 of basic sciences’.

Method

This study is considered as an applied one since it was conducted to meet the requirements of aforementioned organization, improve and optimize the organization patterns and styles in promoting faculty welfare. Therefore, it will be regarded in the range of correlation- descriptive researches. In the present study, positive psychological capacities and their dimensions including hope, optimism, and resiliency are independent variable and work life quality is dependent variable.

Tools

2 standard questionnaires, both translated and localized by researchers (2013), were applied in this study. The questionnaires were based on 5 item Likert scale.

Work life quality questionnaire: work life quality was measured by applying Casio questionnaire (1998).

Positive psychological capacities questionnaire: this questionnaire included three hope, optimism and resiliency questionnaires.

Validity and Reliability

The validity of questionnaires was measured by two formal-content and differential (structured) methods. The questions were significantly correlated at error level $\alpha= 0.05$ to total score; hence, tools’ differential validity is also supported. The reliability of research tools was determined by initially distributing 45 questionnaires among samples; then, it was calculated followed by collecting questionnaires with return rate of 99% and Chronbach $\alpha= 0.91$.

RESULTS AND DISCUSSION

Results

Analyzing demographic data indicated that most research samples are attributed to males with 50.4%. About 41.2% respondents were between 36 to 45 years. Findings showed that the highest academic rank belonged to university assistants with the frequency of 117 and frequency percentage of 46.8%. Moreover, 65.6% in terms of managerial positions were managers and 34.4% were not. The least ranking order was related to work life quality equals to 2.94. The data were analyzed by utilizing inferential statistic of Pearson correlation test and regression analysis.

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This finding is quite contrary in Basic Sciences faculty members. Correlation coefficient value between variables of positive psychological capacities and work life quality is 0.151. As it is a positive value; then, there is a direct relation between these two variables; but the relation is weak since this numerical value lies in the range of (0.3 and 0.1). According to the value of Sig=0.114>0.05, the hypothesis that there is correlation between these two variables will be rejected. So, it can confidently be stated that positive psychological capacities have no impact on these individuals’ work life quality; therefore, the above hypothesis is rejected.

Hope dimension and its components, at confidence level of 99%, may influence on the quality of Medical Sciences faculty members’ work life. The second sub-assumption investigating the relation between optimism and its components (general attributes, stable and internal, positive expectation) on work life quality reveals the marked, considerable difference of this relation in two clinical and basic sciences groups. Optimism dimension is the positive and significant relation in emerging work life quality of the clinical faculty.

It is noteworthy that this relation is not confirmed in the faculty of Basic Sciences (P=0.334, r=0.093). Positive expectation in clinical group is able to influence on the quality of staff work life at the confidence level 95%, while not only it has no impact, but also there is seen a negative, inverse relation. Belief in meaningful life at confidence level 99% has a positive, significant relation to members’ work life quality. It must be mentioned that as the numerical value (r) of reality acceptance dimension is within (0.3 and 0.1) there is a weak relation between this variable and work life quality; on the contrary, the value in believing into meaningful life dimension will be within (0.1 and 0.7); therefore, there is seen a strong relation between this variable and work life quality.

Table 1. Correlation coefficient of “ Positive psychological capacities and their dimensions” and “work life quality” among clinical faculty members

Variable	Dimension	Component	Work life quality Pearson correlation coefficient	P- Value	Numbers(n)
Positive psychological capacities			1.000**	0.000	139
	Hope		0.403**	0.000	139
		planning functionality	0.417** 0.274**	0.000 0.000	139 139
	Optimism		0.316**	0.000	139
		Positive expectation Stable and general attributes	0.170 0/245**	0.045 0/004	139 139
	Resiliency		0/144	0/092	139
		Reality acceptance	0/135	0/114	139
		Believe in meaningful life Adaptability	0/146* 0/088	0/087 0/304	139 139

** : α is significant at error level ($\alpha=0.01$)

* : α is significant at error level ($\alpha=0.05$)

Table 2: Correlation coefficient of “positive psychological capacities and their dimensions” with “work life quality” among Basic Sciences faculty members

Work life quality Variable	Dimension	Component	Pearson correlation coefficient	P- Value	Numbers(n)
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Positive psychological capacities		0.151	0.114	111
Hope		0.316**	0.001	111
	planning	0.262**	0.006	111
	Functionality	0.331**	0.000	111
Optimism		-0.018	0.852	111
	Positive expectation	- 0.153	0.109	111
	Stable and general attributes	0.093	0.334	111
Resiliency		0.096	0.316	111
	Reality acceptance	0.218*	0.022	111
	Believing meaningful life	0.809**	0.000	111
	Adaptability	0.037	0.697	111

** : α is significant at error level of $\alpha= 0.01$

*: α is significant at error level of $\alpha=0.05$

Results of regression analysis on the research main hypothesis in clinical faculty, according to R value (1.000), demonstrate model high ability in predicting dependent variable i.e. work life quality. Furthermore, as Sig value is less than 0.05 the above hypothesis will be maintained and the fitted linear regression model is significant. There is no appropriate regression model between these two variables in Basic Sciences faculty due to small value of determination coefficient (0.014). In addition, regarding the value of F statistic and that the significance level of 0.114 is higher than 0.05; therefore, there cannot be found any appropriate regression model between variables of positive psychological capacities and work life quality. Standard and non-standard regression coefficient values indicated that the significant level of model constant parameter (0.00) for Basic Sciences faculty is less than 0.05; hence, $H_0= \alpha=0$ in regression model $Y= \alpha+\beta X$ will be rejected; and regarding to β significance level (0.114) which is higher than 0.05, $H_0= \beta=0$ is maintained.

In the following, the impact of hope dimension on the work life quality of Clinical and Basic Sciences faculty members of Medical Sciences University is studied. Regression analysis results of Clinical faculty regarding to justified value of R^2 reveal that hope dimension generally explained 16% of the Clinical faculty work life quality variance. According to F statistic value and Sig value as is less than 5% the fitted linear regression model is significant. In Basic Sciences faculty as the small value of justified determination coefficient (0.091) there is seen no proper regression model between these two variables meaning that the fitted regression model is not significant. The modified value of ($R^2= 0.168$) in the regression test of planning work life quality component off Clinical faculty presented the model weak ability in predicting dependent variable namely work life quality. Planning component is only able to explain 16% of work life quality variance. Model power in predicting dependent variable in Basic Sciences faculty according to modified value of determination coefficient ($R^2= 0.6$) is regarded as intermediate. Static $F= 8.005$ and the value f Sig=0.006 indicated that the fitted linear regression model is significant in Basic Sciences faculty. The findings obtained from regression analysis of functionality component and its effective role in work life quality provided that the fitted linear regression model is significant in both Clinical and Basic Sciences faculties; model power in predicting dependent variable in Clinical faculty is intermediate whereas in Basic Sciences faculty is weak (Tables 3 and 4). As in optimism dimension in Basic Sciences faculty the F statistic is small and the significance level of 0.852 is more than .05 it can be concluded that there is no proper regression model between this variable and work life quality variable.

Table 3: Summary of simultaneous multiple regression test results (Inter method) in predicting Clinical faculty work life quality

Work life quality	Variable	Dimension	Component	Non-standard coefficient	Standard coefficient	t	df	R ²	Modified R ²	F	Sig
				B	β						
Positive psychological capacities				0.430	1.000	4.521	1	0.13	0.123	20.441	0.000
		hope		0.302	0.403	5.149	1	0.162	0.167	28.777	0.000
			planning	0.172476	0.380	5.376	1	0.174	0.168	28.902	0.000
			functionality	0.171	0.274	3.336	1	0.075	0.68	11.132	0.001
		optimism		0.391	0.316	3.899	1	0.100	0.093	15.202	0.000
			Positive expectation	0.143	0.170	2.019	1	0.029	0.022	4.077	0.45
			Stable and general attributes	0.205	0.245	2.957	1	0.06	0.053	8.746	0.004
		Resilience		0.118	0.144	1.698	1	0.021	0.013	2.883	0.092
			Reality acceptance	0.106	0.135	1.592	1	0.018	0.011	2.535	0.114
			Believe in meaningful life	0.085	0.146	1.726	1	0.021	0.014	2.978	0.087
		Adaptability	0.065	0.088	1.031	1	0.008	0.000	1.063	0.304	

Conversely, in the Clinical faculty since Sig value is less than 5%; hence, the null hypothesis is rejected and the alternative hypothesis is maintained meaning that the fitted regression model is significant. The modified R² value also showed that optimism element totally explained 0.09% of the work life quality variance of Clinical faculty. To study the regression model of positive expectation element and work life quality according to F statistic and Sig values the significance of multiple regressions is explored. Since Sig value in Basic Sciences faculty is larger than 5%; thus, the null hypothesis will be maintained and the alternative one is being rejected; while, the aforementioned value is smaller than 5% in Clinical faculty so

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the fitted multiple linear regression is significant (F=4.077 and Sig value= 0.045). General, stable and internal attributes generally explained 0.06% of Clinical faculty work life quality variance.

Table 4: Summary of simultaneous multiple regression test results (Inter method) in predicting Basic Sciences faculty work life quality

Work life quality										
variable	Dimension	Component	Non-standa	Standard	t	df	R ²	Modified R ²	F	Sig
			rd coefficient	coefficient						
			B	β						
Positive psychological capacities	hope		0.162	0.151	1.594	1	0.023	0.014	2.539	0.114
			0.207	0.316	3.474	1	0.100	0.091	12.068	0.001
		Planning	0.158	0.262	2.829	1	0.060	0.60	8.005	0.006
		Functionality	0.205	0.331	3.665	1	0.102	0.102	13.429	0.000
		Optimism	-0.021	-0.018	-0.186	1	0.000	-0.009	0.035	0.852
		Positive expectation	-0.151	-0.153	-1.615	1	0.023	0.014	2.610	0.109
		Stable and general attributes	0.07	0.093	0.975	1	0.009	-0.001	0.941	0.334
		Resiliency	0.086	0.096	1.007	1	0.000	0.000	1.014	0.316
		Reality acceptance	0.168	0.218	2.331	1	0.47	0.39	5.434	0.022
		Believe in meaningful life	0.889	0.809	14.376	1	0.655	0.652	206.682	0.000
	adaptability	0.027	0.068	0.039	1	0.001	-0.008	0.152	0.697	

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The fitted multiple regression models are significant in terms of these two variables; though, the contrary result is obtained in Basic Sciences faculty. The small F statistic value (0.941) as well as significance level of 0.334 which is larger than 0.05 demonstrated inappropriate regression model between two variables of internalized, stable and general attribute and work life quality. The results of regression analysis about resiliency dimension and its components showed that the fitted regression model of the Clinical faculty in terms of resiliency and its components including accepting reality, believing in meaningful life and adaptability is not significant as their significance level is higher than 0.05 so it can be concluded that this dimension and its components has no influence on the fitted model. Regarding to the small value of the modified determination coefficient ($R^2= 0.013$ in Clinical; $R^2= 0.000$ in Basic Sciences) in Clinical and Basic Sciences faculties there is seen no appropriate regression model between resiliency variable and work life quality. Standard and non-standard regression coefficient values in Basic Sciences faculty according to the significance level of model constant parameter (0.00) which is smaller than 0.05 clarified that the $H_0: \alpha=0$ in the regression model $Y= \alpha+\beta X$ will be rejected and $H_0= \beta=0$ is maintained as β significance level of 0.316 which is larger than 0.05. The results of Basic Sciences faculty demonstrated that reality acceptance ($F=5.434$, Sig value= 0.022) and belief in meaningful life ($F=206.682$ and Sig value= 0.000) are considered as effective factors in fitted model. The values of regression coefficients in the standard and non-standard adaptability component according to significance level (0.00) of the model constant parameter are smaller than 0.05; therefore, $H_0: \alpha=0$ is rejected in the regression model $Y= \alpha+\beta X$; whereas, $H_0= \beta=0$ will be maintained as β significance level (0.697) is larger than 0.05. In other words, adaptability element in Basic Sciences faculty has no effect on the fitted regression model.

Discussion and Conclusion

The present study was conducted to investigate Faculty members (Clinical and Basic Sciences Faculties) of Shiraz Medical Sciences University. Regarding to obtained results of statistical analyses found that amount of positive psychological capacities, dimensions and components' influence on the work life quality are completely different in two Clinical and Basic Sciences faculties.

The results of collected data about the effectiveness of positive psychological capacities in work life quality revealed that this variable can substantially improve the quality of Clinical faculty members' work life; whereas, it has no influence on the work life quality of Basic Sciences (research main hypothesis).

The first research hypothesis that studies the role of hope dimension in work life quality showed the significant influence in both groups at confidence level 99%; it means that the effect of hope dimension is confirmed in the fitted regression model of both groups. In explaining this finding it can be stated that the more support, whether material or spiritual, the more goal oriented acts; therefore the hope level would increase which in itself improves individuals work life quality. Hope components including planning and functionality are significant in both fitted model groups; moreover, the hypotheses are confirmed at 99% confidence level. Planning is more effective and substantial as compared to functionality. In analyzing third and forth sub assumptions it can be understood that optimism dimension and its components including positive expectation; internal, stable and general attributes has no impact on work life quality of faculty members and reject aforementioned hypotheses; whereas, the results are inverse in Clinical faculty. It can be argued that concerning mental, emotional aspects may deeply influence on work life quality; as optimism is a mental attribute referring to people attitude in dealing with problems, optimistic individuals often look at the bright side with supportive thinking. The results of analyzing resiliency dimension role in work life quality point that resiliency are unable to influence work life quality of Clinical and Basic Sciences faculties. Faculty members play a critical role as they are ultimately in the direct charge of nurturing future manpower. Hence, one of the main concerns of organizations managements including universities is satisfying their members so that they are enabled to enhance work life quality, performance as well as efficacy.

Recommendations

Studying the level of each individual psychological capacity requires attention in order to gain adequate information of anyone capacities; since, identifying this issue may appoint the requirements needed for

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increasing these capacities which consequently lead to increasing individuals' satisfaction, job security as well as work life quality. Undoubtedly, high level of job satisfaction in addition to work life quality improvement may provide the necessary background for improving their performance. Utilizing capital-centered strategies such as positive social, human ... capital growth can be useful to maintain academic skilled and engaged capitals, participating staffs in goals setting and time management in scheduling faculty work hours. This research, regarding the constraints, studied three components of psychological capital components; now, it recommends that other components of positive psychological capacities such as self-efficacy, subjective well-being, emotional intelligence, etc be comparatively evaluate in further researches.

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