

Original Article

Exploring Spiritual-Based Transformational Leadership Indicators in Palu City Hospital: A Qualitative Study

Fajrillah Kolomboy^{1*}, Andi Fatmawati Syamsu¹, Rizkaningsih¹

¹Politeknik Kesehatan Kementerian Kesehatan Palu, Palu, Central Sulawesi, Indonesia

(Correspondence author's: fajrillah73@gmail.com)

ABSTRACT

Due to contextual issues, including social culture and pluralism, spiritual-based leadership in the nursing field has rarely received attention, resulting in comparatively few research projects. Whereas such research can lead to a spiritually supportive environment, benefiting the patients, nurses, and organizations. Current research aims to explore indicators of spiritual-based transformational leadership in Palu City Hospital. This research was done qualitatively through a grounded theory approach and Focus Group Discussion (FGD). In this case, 12 informants were chosen by purposive sampling. The instrument used was Focus Group Discussion (FGD) guidelines. In this study, the results of the FGD were analyzed using the N Vivo 12 Plus. Based on the qualitative data analysis results, a spiritual-based transformational leadership required three primary skill indicators, namely emotional skills, including emotional proficiency and emotional intelligence, spiritual skills including spiritual attitudes and spiritual intelligence, and social skills, namely being able to behave socially. For further research, it is necessary to carry out model intervention and model evaluation under new normal conditions and add other variable components such as performance and commitment.

Keywords: *Spiritual-Based Transformational Leadership, Palu City Hospital*

<https://doi.org/10.33860/jik.v17i3.2299>



© 2023 by the authors. Submitted for possible open access publication under the terms and conditions of the Creative Commons Attribution (CC BY SA) license (<https://creativecommons.org/licenses/by-sa/4.0/>).

INTRODUCTION

In general, the era of globalization has influenced our lives. Humans in this era are required to be more creative in dealing with various kinds of problems, including those regarding leadership styles. Leadership factors in an organization is very important because it affects the process of achieving goals. The problem of leadership has long been a concern as well as evaluation material. Some assumptions that the leadership factor is an urgent problem which solution needs to be found, for instance, looking for a model for the formulation of an approach to leadership aspects suitable and appropriate to find solutions in the health sector, especially in the field of nursing services. Therefore, it is essential to apply a leadership style, one of

which is transformational leadership so that further it can be a strategy to achieve common goals.

Transformational leadership is the ability of a visionary leader to convince others to make significant changes, prioritize common interests and foster other people or groups to achieve goals¹. In this case, transformational leadership is a relatively new model in leadership studies. This model describes quality leader as one that sees the interaction between leaders and their followers as elevating both sides to a higher moral level². This leadership is reported as one of the effective future leadership styles in facing the globalization and modernization era and in improving human resources because it gives extra attention to the charismatic and affective elements of a leader³.

The spiritual component of human

connection in an organization was not taken into consideration by previous leadership theories, which instead focused on one or more components of the physical, mental, or emotional dimensions. A leader will bring the worldly dimension to the spiritual dimension in accordance with the emerging paradigm of spiritual leadership, which aims to create internal motivation to aid in the change of a business. Spiritual leadership approach is a leadership approach that is seen to be most successful in addressing contemporary issues as a consequence of the erosion of human values due to ethical crisis⁴. Research related to spiritual leadership conducted by Alimudin, Septian, Sasono, and Wulandari discovered a positive relationship between spiritual leadership and organizational culture. Furthermore³. Jahandar et al added that spiritual leadership can increase organizational productivity and nurse satisfaction. Despite the fact that a spiritually supportive workplace benefits patients, nurses, and organizations, spiritual leadership in the area of nursing is comparatively understudied due to contextual considerations including social and cultural heterogeneity⁴.

Not all of the organization's executives have yet embraced the fundamentals of transformational leadership and spiritual leadership. Our research is urgent because leaders need to have certain personality traits, moral principles, and spiritual beliefs in order to guide the business toward a culture of patient safety. The expected leader figures are those who have the capacity to lead by example, create influence by love, and move through other heavenly attributes⁵. Therefore, research aims to explore indicators of spiritual-based transformational leadership in Palu City Hospital.

METHOD

This study was done qualitatively through a grounded theory approach applying Focus Group Discussion (FGD). FGDs aim to collect data regarding participants' perceptions and views of something, not trying to seek consensus or decision making. The FGDs in this study were conducted to look for additional indicators of transformational leadership styles and spiritual leadership. This activity consisted of three phases, namely the orientation phase, the work phase and the termination phase.

Focus Group Discussion (FGD) was conducted online through zoom meeting media. This research was conducted at Palu City Hospital from August to December 2020.

In order to select the informant subjects, the researchers applied purposive sampling. In this case, some criteria were determined, including having knowledge of the issue, possessing data, living in Palu area, and being prepared to offer thorough and accurate information. The informants consisted of 2 key informants, namely the top management of the hospital (Director/ head of the quality and patient safety team for the Head of Nursing at Anutapura Hospital), and 4 main informants namely, the head of the room and the implementing nurse and 6 supporting informants namely religious leaders, community leaders, organizations profession.

The instrument used in qualitative research was Guidelines for Focus Group Discussion (FGD) or directed, systematic discussion groups which are very popular for exploring specific issues or problems⁶. In this study, the results of FGDs were analyzed using N Vivo through the mechanism of draft coding, reduced coding, determining sub-themes and themes that were used as indicators or additional dimensions (sub-variables) in the study. Collecting data procedure carried out in this study was an application for a research ethics test from the Faculty of Public Health, University of Hasanuddin Makassar No : 7620/UN4.14.1/TP.02.02/2020.

Data analysis in this study aims to find additional indicators using the Nvivo 12 Plus application which is effective for data triangulation and researcher triangulation, so that it can assist in producing reliable qualitative research⁷.

RESULTS

Research results were presented in the form of narratives, tables and/or pictures as well as statistical test results with explanations without discussion. The table title was written above it while the figure title was written below it. In this section, Focus Group Discussions (FGD) carried out online through the media zoom meeting. FGD activities were attended by informants whose characteristics can be seen in table 1.

Table 1. Informants Characteristics in the Study of Spiritual-Based Leadership Variables

No	Element	Gender	Education Degree	Occupation
1	Executive Nurse	Male	Bachelor	Nurse
2	Executive Nurse	Male	Bachelor	Nurse
3	Head of Room	Female	Bachelor	Nurse
4	Head of Room	Female	Bachelor	Nurse
5	Hospital Management	Female	Master	Nurse
6	Hospital Management	Female	Master	Nurse
7	Professional Organization of Indonesian National Nurses Association	Male	Master	Nurse
8	Professional Organization of Indonesian National Nurses Association	Male	Master	Lecturer
9	Islamic religious leaders (Spiritual advisor)	Male	Doctorate	Lecturer
10	Christian clergy	Male	Bachelor	Civil Servants
11	Hindu Priest	Male	Master	Civil Servants
12	Community Leader	Male	Doctorate	Retired

The characteristics of FGD informants consisted of elements of the Islamic religion with academic background as well as the chairman of the Indonesian Ulema Council in Palu City. Christian clergy and Hindu priest, had a health education background. Informants from community leaders had bureaucratic backgrounds. Further, there were two people from professional organization of the Indonesian National Nurses Association. While the hospital informants, there were 2 respondents from the hospital management, 2 head of room and 2 implementing nurses. The researcher acted as a moderator and the promoter team was also present at the activity. The results of qualitative data analysis in this study showed that indicators of spiritual-based transformational leadership are composed of 3 additional indicators, namely emotional skills, spiritual skills and social skills.

a. Theme 1: Emotional skills

- 1) Emotional Proficiency
- 2) According to the study's findings, the informants in the discussion group fit one of the definitions of a spiritually-based transformational leader, namely having emotional skills. It includes the ability to provide motivation and inspiration; becoming a role model, exemplary and committed; having empathy and sympathy; responding to conflict management and be able to be a motivator; able to work in a team, having good skills and comply with the

rules. Statements from informants include the following:

“First, the leader should be able to motivate and take the patient directly so he does not get injured. The second, the leader should always inspire both his patients and his colleagues. When he gives motivation, he raises the patient's enthusiasm, for example, now it not just patient safety, everyone's safety, people do not want to wear masks” (Group of professional organizations).

“A leader definitely should have that skill. Nice skills....” (Head of Personnel Department)

“the important aspect is trust and commitment” (community leader).

3) Emotional intelligence

The group of informants said that A leader should have a high emotional quotient (EQ), which includes the capacity to understand and control one's own emotions as well as those of others. It also includes the capacity to respond to others' emotions and engage in emotional negotiation. Statements from informants include the following:

“A spiritual-based leadership style is closely related to a leadership style that upholds the values of trust, has a high sense of density or sensitivity in leading. A leader is not only able to move but must lead based on religious ethics and be able to control emotions. So, a leader not only has an Emotional

Quotient but must have an Emotional and Spiritual Quotient” (Group of executive nurses).

b. Theme 2: Spiritual Skills

- 1) Spiritual attitude
- 2) The findings of this study showed that the group of informants views a leader as someone who thinks that all activities are deserving of worship and who makes work into a charity; a trustworthy leader to foster a sense of security; someone who has good character and attitude; upholds the value of trust; and presents Allah in all endeavors. Statements from informants include the following:

“in carrying out its activities, there is God who is always watching and whatever is done is always worth worship. Whatever he does is forever solely because of the value of the worship we do both to ourselves and to others. Everything he does there is God there, whatever he moves. Wherever his footsteps then his thoughts, feelings and others are inspired or believed that there is God there, so the spiritual approach is trustful leadership. The Prophet said that a person does not have faith if he is not trustworthy, so one of the indicators is that person has faith if he carries out the mandate” (Group of religionists).

- 3) Spiritual intelligence
The group of informants said that having a high degree of awareness, being able to learn from mistakes, being flexible and adaptable, living up to the purpose and vision, and being autonomous are all qualities that a leader should possess. Statements of

informants include the following:

“...there is faith or hope. Spiritual leadership has a clear vision and mission” (Group of room heads).

“...has a clear vision, a strong spiritual that is also seen in leading and sticking to the applicable rules” (Group of executive nurses).

“...rusts his spiritual ability” (Community leader).

c. Theme 3: Social Skills

- 1) Being able to behave socially
Informants stated that leaders must have honesty, patience and good faith; have a caring nature; using a bio, psycho, social, spiritual approach; respect others' rights, act responsibly, be kind, wisely choose our actions, have an optimistic outlook, and be aware of fundamental human needs. These qualities may be summed up as having the capacity for social behavior according to Abraham Maslow's Theory. Statements from informants include the following:

“...here must be a dimension of patience in it. Leaders must be patient. Then be kind. Leaders must fully understand human beings in a biosocial-spiritual health approach” (Group of professional organizations).

“... what must be possessed is caring for patients” (Group of head of the room).

“Actually, the primary aspect is honesty, if a leader cannot be honest how about the others” (Head of Personnel Department).

Table 2. Analysis of the themes and sub-themes of the FGD Results Related to Spiritual-Based Transformational Leadership

CODING	Coverage	SUBTHEME
Emotional skills		
1. Giving motivation and inspiration	10.42%	Emotional
2. Able to be a role model, and commitment	6.24%	Proficiency
3. Having empathy and sympathy	5.21%	
4. Responding to conflict management, becoming a mediator	4.16%	
5. Able to work in a team, have good skills, obey the rules	2.08%	
6. Have EQ (having the capacity to recognize and control one's own emotions, to be sensitive to others' feelings, to react and bargain with	6.24%	Emotional Intelligence

others on an emotional level, and to utilize emotions as a tool to inspire oneself)		
Spiritual Skills		
1. Believing that everything is worth worship, Working as a charity field	10.96%	Spiritual
2. A trustworthy leader who creates a sense of security	3.12%	Attitude
3. Have good character, good attitude	1.04%	
4. Uphold the values of trust	1.04%	
5. Presenting God in every activity	1.04%	
6. Have SQ (flexible, adaptable, have a high level of awareness, able to take lessons from a failure, live according to vision and mission, independent)	7.83%	Spiritual Intelligence
Social Skills		
1. Being able to be honest, patience, and good faith	22.92%	Being able to behave socially
2. Have a caring nature	6.25%	
3. Using a bio, psycho, social, spiritual approach	5.21%	
4. Maintain people rights, be responsible	4.17%	
5. Have concern, be wise in making decisions	4.16%	
6. Give a positive touch	3.12%	
7. Understand basic human needs (Abraham Maslow's theory)	1.04%	

Table 2 displays the coding of the FGD results, percentage coverage, namely the percentage of all quoted sentences from the respondents' dialog in the transcript that refer to coding so that it is used in determining the order of coding and categorizing sub-themes. Based on table 2 it can be concluded that a spiritual-based transformational leader needs to have three basic skills, namely emotional skills, spiritual skills and social skills.

DISCUSSION

Emotional skills, spiritual skills and social skills are new findings from the FGD results which become indicators of forming spiritual-based transformational leadership.

Emotional skills

A collection of crucial leadership abilities, known as emotional intelligence (EQ), includes how individuals perceive and express themselves, establish and sustain social connections, overcome obstacles, and use emotional information in productive and meaningful ways.

Several studies present a positive relationship between leaders with high emotional intelligence including having happiness, satisfaction, attention, trust, confidence and commitment at work. This is related to a leader's ability to understand his employees better and adjust his leadership behavior correctly.

Leaders who have emotional skills can recognize and understand their emotions and

the emotions of their employees, then manage and redirect these emotions into positive energy for change. Leaders are able to channel unsettling impulses and moods into energizing energy for organizational transformation by knowing when to engage with emotions and when to engage with reason, without passing judgment but rather thinking things through before acting. Emotional skills are very important for a leader to have because leadership is an emotionally charged process that involves recognizing other people's emotions, listening, caring about other people's emotional states, and helping others manage their emotions.

Spiritual skills

Spiritual skills are a major part of the concept of spiritual intelligence or spiritual quotient (SQ) which is considered as the basis of rational and emotional intelligence. Reimer-Kirkham, Pesut, Sawatzky, Cochrane, and Redmond stated that spirituality in nursing leadership is rarely done due to many contextual factors. Nurse leaders in qualitative studies attest to awareness of the influence of spirituality and pay attention to the health care but are wary of integrating spirituality into leadership practice due to organizational and social influences^{7,8}.

Research by Jahandar, Tafreshi, Rassouli, Atashzadeh-Shoorideh, and Kavousi concluded that organizational productivity and nurse satisfaction can both be increased via spiritual leadership. To obtain excellent

organizational results, nursing leaders must give this style of leadership more consideration; as a result, they require additional training in spiritual leadership. This potential may be used by nursing management to influence nursing care outcomes ⁴.

Abdurrahman and Agustini concluded that the spiritual leadership behavior carried out by hospital leaders is highly valued by employees, in accordance with the facts observed by employees ⁷. The role of mediation according to Chen, et al. and Chen, et al., emphasized the mediating role of spiritual well-being^{5,15}. Their studies demonstrated that meaning and membership boost awareness, productivity, organizational behavior, and organizational commitment while also positively predicting employee benevolence toward coworkers. Spiritual leadership can improve organizational commitment, work unit productivity, and employee life satisfaction in addition to reducing burnout among medical laboratory professionals ⁹.

Spiritual intelligence is very important for leaders, to create spirituality in place. Spirituality is a determining factor for the success of an organization in creating a positive work environment, and influences positive emotions. Spiritual intelligence can be a driving force for a leader.

Social skills

Social intelligence is considered as a complex construct to understand how successfully a leader manages social relations. Leaders that are emotionally intelligent can use their social abilities to establish and sustain partnerships. The emotionally intelligent leader utilizes his social abilities to persuade those who are reluctant to join in organizational transformation initiatives by acknowledging the worry of specific members.

Social competence and social intelligence are intimately tied to the meanings of social skills¹⁰. Emotionally intelligent leaders can use their social skills in building and maintaining relationships¹¹. In addition, emotionally intelligent leaders utilize their social abilities to persuade people who appear hesitant to take part in organizational transformation initiatives by identifying their individual members' concerns¹². Social intelligence in organizations, refers to the effective use of leadership skills that will affect

others positively - impacts that are biologically based and observable¹³.

The core of social intelligence is leveraging knowledge of the important role connections play in performance to assist leaders in raising the bar for those they are in charge of ^{14,15}. As tools for leadership, individuals must demonstrate initiative, empathy, flexibility, and persuasion. Regardless matter how knowledgeable or skilled he is in his work, a leader might fail in management if they are unaware of their emotional influence on others ¹⁶.

Since it is a leader's capacity to relate to, comprehend, and successfully engage with others, social intelligence is highly significant ¹⁴. According to studies, defining these social intelligence traits is a crucial component of effective leadership. Most of social intelligence may be picked up within an organization. It can be concluded that social skills are the most important activity of a leader because they relate to other people to strengthen their leadership performance ^{17,18,19}.

Research limitations encountered in this research process become the concern to researchers and further research, namely: the condition of the Covid 19 pandemic and the existence of government policies in the form of social distancing and physical distancing. The limitation faced in this study was that Focus Group Discussion (FGD) activities with informants was carried out online (zoom meeting) so that expression, behavior, and communication were sometimes challenging due to signal interference, network and others.

CONCLUSIONS

A spiritually based transformational leader requires three main skill indicators: emotional skills, including emotional skills and emotional intelligence, spiritual skills, including spiritual attitude and spiritual intelligence, and social skills, including the capacity to act in a socially appropriate manner.

Based on the results of the research, suggestions and recommendations are submitted to interested parties so that this research can contribute to the policy development at both the regional and national levels. It is hoped that elements of spiritual-based transformational leadership will be included in the elements of the Hospital

accreditation assessment. It is expected that the hospital will make a policy regarding the implementation of this leadership model to be implemented and allocate training funds related to the spiritual-based leadership model for heads of rooms who are front line leaders in the hospital.

For further research, it is necessary to carry out model intervention and model evaluation in this study under new normal conditions and add other variable components such as performance, commitment and so on.

ACKNOWLEDGEMENT

Gratitude is expressed to 1) parties who have financially assisted and supported this research, 2) departments and institutions that have also supported this research, 3) professionals who have contributed to the making of this report.

CONFLICT OF INTEREST

The authors declare that there is no conflict of interest.

REFERENCES

1. Northouse PG. Leadership: Theory and practice. Sage publications; 2021 Feb 2.
2. Rafsanjani H. Kepemimpinan spiritual. Jurnal Masharif al-Syariah: Jurnal Ekonomi dan Perbankan Syariah. 2017 Nov 22;2(1).
3. Alimudin A, Septiani D, Sasono AD, Wulandari A. Effect of spiritual leadership to organizational culture and employee's loyalty. Jurnal Terapan Manajemen Dan Bisnis. 2017;3(2):76-86.
4. Jahandar P, Tafreshi MZ, Rassouli M, Atashzadeh-Shoorideh F, Kavousi A. Nurses' perspective on spiritual leadership: A qualitative study based on fry's spiritual leadership model. Electronic physician. 2017 Nov;9(11):5721.
5. Chen CY, Yang CF. The impact of spiritual leadership on organizational citizenship behavior: A multi-sample analysis. Journal of business ethics. 2012 Jan;105:107-14.
6. Kolomboy F, Palutturi S, Rivai F, Saleh LM, Masudin M, Amiruddin R. Spiritual-Based Transformational Leadership Style at Anutapura Regional General Hospital, Palu. Open Access Macedonian Journal of Medical Sciences. 2021 Jul 29;9(E):524-9.
7. Abdurrahman D, Agustini PM. Hubungan Kepemimpinan Spiritual dan Spiritualitas Tempat Kerja. Prosiding SNaPP: Sosial, Ekonomi dan Humaniora. 2011 Aug 5;2(1):527-42.
8. Reimer-Kirkham S, Pesut B, Sawatzky R, Cochrane M, Redmond A. Discourses of spirituality and leadership in nursing: A mixed methods analysis. Journal of nursing management. 2012 Dec;20(8):1029-38.
9. Najaflye, T. Z. The effect of spiritual leadership with organizational commitment, productivity and knowledge performance with mediating spiritual wellbeing and learning organization, in employees of bidboland gas company. 2015.
10. Björkqvist, K., Österman, K., & Kaukiainen, A. (2000). Social intelligence– empathy= aggression? Aggression and violent behavior, 5(2), 191-200.
11. Goleman, D., Welch, S., & Welch, J. What makes a leader? : Findaway World, LLC New York. 2012.
12. Issah M. Change leadership: The role of emotional intelligence. Sage Open. 2018 Sep;8(3):2158244018800910.
13. Kolski-Anderaco A. Social intelligence. City, ST: Smart Business Network. Kouzes, JM, & Posner, BZ (2008). The student leadership challenge: Five practices for. 2010.
14. Marti, S. J. W. Autonomous interactive intermediaries: social intelligence for mobile communication agents. Citeseer. 2005.
15. Chen CY, Yang CY, Li CI. Spiritual leadership, follower mediators, and organizational outcomes: evidence from three industries across two major Chinese societies 1. Journal of applied social psychology. 2012 Apr;42(4):890-938.
16. Ross EJ, Fitzpatrick JJ, Click ER, Krouse HJ, Clavelle JT. Transformational leadership practices of nurse leaders in professional nursing associations. The Journal of Nursing Administration. 2014 Apr 1;44(4):201-6.

17. Kolomboy F, Palutturi S, Rifai F, Saleh LM, Amiruddin R. Leadership style based on the study of multifactor leadership questionnaire in Palu Anutapura hospital. *Gaceta Sanitaria*. 2021 Jan 1;35:S432-4.
18. Kolomboy F, Palutturi S, Rivai F, Saleh LM, Amiruddin R. Nurses' Perceptions Of Leadership Styles Among Nurse Managers In Palu Anutapura Hospital. *Turkish Journal of Physiotherapy and Rehabilitation*. 2021.
19. Kolomboy F, Palutturi S, Rivai F, Saleh LM, Amiruddin R. Analysis of the work culture in head of inpatient room at Madani Hospital, Palu. *Enfermería Clínica*. 2021 Dec 1;31:S761-4.