

Prediction of Stress Coping Styles Based On Spiritual Intelligence in Nurses*

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Abstract

Nurses are always under stress due to the sensitive nature of their work. Based on psychological theories, encountering approaches play an important role in decreasing the stress. Psychologists, also, define the spiritual intelligence as a kind of compatibility and problem solving behavior. This research aims to investigate the relationship between spiritual intelligence with stress encountering approaches in nurses. In this correlational-descriptive research, 151 nurses of Shahid Beheshti training-treating hospital of Kashan were studies randomly. The tools used in this research were spiritual intelligence questionnaire and stress encountering approaches questionnaire. The data were analyzed using SPSS software, Pearson correlation matrix ,multi-variable linear regression test and independent T test. The results showed that there was a significant and positive relationship between aspects of spiritual intelligence and stress encountering approaches ($P < 0.01$). There was no significant relationship between spiritual intelligence variables and encountering approaches, based on gender ($P > 0.05$).The spiritual intelligence variables predicted a 0.29 variance of problem oriented approaches and a 0.22 variance of excitement oriented approaches. So, the stress encountering approaches is predictable, based on the meaning of some spiritual intelligence aspects.

Keywords: Spiritual Intelligence; Stress Coping Styles; Nursing

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Introduction

Stress is one of natural and inevitable aspects of modern man's life. Some people define it in one word as "stress", and some other consider it as human's physiologic response to threatening environmental stimulus. According to "emotional cognitive theory" stress will emerge when someone evaluates a situation as challenging and overwhelming, or has no enough resources to adapt the situation. In case that stress is continuous and more than person's capability to adapt the situation; it will be resulted in physical and mental exhaustion, and disturbs natural activities of him/her in different aspects of life (Kheir & Seif, 2004). People's occupation is one of the most important sources of creating stress. Each job's characteristics such as nature, variety, and importance of freedom at work, in addition to receiving feedback are among the most important sources of creating stress (Azadi et al., 2014). Therapeutic jobs are considered as stressful jobs, because of necessity of quick response to the needs of patients and their families; and any mistake or error in this respect may result in high costs or in some cases is life threatening and irrecoverable (Moieen & Adib, 2015). National Institute for Occupational Safety and Health in America (NIOSH) has introduced nursing as top of 40 stressful jobs along with high prevalence of related diseases (Safari et al., 2013). However, nurses are considered as a critical part of the health care system in such a way that, they form the biggest group form about 56% of hospital's employees (Dall et al., 2009). Due to occupational nature of their works, nurses are continuously under stress (Zeighami et al., 2011). Mental and physical health of nurses directly is related to their quality of performance in relation to patients (Bigdeli & Karimzadeh, 2006). In most studies, Iranian nurses have reported their stress resulting from their job to be stemmed from various factors such as: manpower shortage, low level of respect, recognition, and wages, high volume of work load, and low level of contribution in decision making in the health care system (Mohammadi & Roshanzadeh, 2014). Studies regarding stress suggest that what threatens human's health is not stress itself, it is the way he evaluates stress, and the methods he uses to cope with stress (Addelyan Rasi et al., 2013; Rastgar et al., 2012).

Coping concept was first introduced by Lazarus (1996), then people's coping methods with stress was studied, and some tools were prepared for their assessment (Zonoozian et al., 2010). He believed that stress includes three stages: first, primary evaluation upon observing a danger; second, secondary evaluation to seek a response mentally; and third, making use of that response, or in other words the coping intended (Costa & McCrea, 1990). Coping as a psychological process is considered as cognitive and behavioral efforts of persons to solve the stressful situations. Coping includes all action-based and psychological efforts to manage and control environmental and inner demands, and the conflict between them (Lazarus & Folkman, 1984). Copying styles have various categorizations such as problem-oriented and emotion-focused categories (Lin & Chen, 2010).

In problem-oriented coping style, the person under stress is seeking to change the external stressful event, and tries to cope cautiously with the problem through recognizing it via rational thinking, and finding a suitable solution. From among the style's behavior we may cite writing priorities and time scheduling. In emotion-focused coping style, the person changes his internal and external reactions to adjust stressors, in coping with stress (Twamley & Hami, 2004). Problem-oriented method is considered as the most suitable and compatible stress controlling methods, and is directly related to mental health of the person; while, emotion-focused methods may reduce people's effort in solving the problem (Farzad et al., 2013), and may cause the person to turn to some behaviors to cope with his stress as: taking support from friends and families, and also exercising, (Sarafino, 1931).

A study by Douglas et al. showed that from among coping styles, problem-oriented method (e.g. making effort to solve the problem, and considering alternatives) has been prevailing among nurses (Douglas et al., 1996).

Studies show that, always type and severity of reaction of persons against stress are of no direct relationship with severity of stressful factors; primarily, it is related to their conception of the event (Jafari et al., 2013). Zohar and Marshall believe that, spiritual intelligence causes people to find a deep insight towards life's events and incidents, not to fear from hardships of life, to cope with them through patience and contemplation, and to find rational and humane solutions (Zohar & Marshall, 2000). Spiritual intelligence construct is one of the novel, attractive, and controversial concepts mentioned and developed in the light of global interest of scholars, experts, and especially psychologists in spirituality and religious field of study (Sedighi Arfaie et al., 2015). Spiritual intelligence consists of some kind of compatibility and problem solving behavior which includes highest levels of development in various fields such as cognitive, ethical, emotional, and inter-personal fields, and helps the person to be coordinated with environmental phenomena and to achieve an internal and external integration. This kind of intelligence gives some overall insight about life and all events and experiences, and enables the person to re-frame and re-interpret his experiments, and deepens his cognition (Ghobari Bonab et al., 2007).

Smith showed that, spiritual intelligence is prerequisite of better compatibility with environment, and those people of higher spiritual intelligence have more tolerance against the life pressures, and demonstrate more compatibility with environment (Smith, 2004). Elkins and Cavandish (2010) believe that, spiritual intelligence causes people to consider the problems more softly, make more effort to find a solution, endure more the hardships of life, and make their life dynamic. King (2008) suggests that coping strategies and problem solving techniques through spirituality are in fact, adaptive applications of spiritual intelligence. He also suggests that, this relationship is indirect and spiritual intelligence acts as a mediator in these relations. From his perspective, spiritual intelligence has 4 components: "existential thinking", "personal meaning production", "conscious state expansion", and "transcendent awareness" (King, 2008). George (2006) believes that, the most important application of spiritual intelligence in workplace is creation of peace of mind, mutual understanding between colleagues, job satisfaction and reduction of stress, as a result. The findings also refer to the point that, spiritual intelligence leads to increase of mental health, and also reduction of job stress (Baezzat & Sharifzadeh, 2012).

Since, nurses are considered as critical elements of health services system, they play a significant role in evolution and progress of health care and treatment issues; and their health has a direct relationship with other people's health, in society. Considering the role of spiritual intelligence and stress coping styles in understanding and reduction of stress, present research is going to study the relationship between spiritual intelligence, and various stress coping styles in order for nurses performance to be improved.

Research Methods and Tools

This is a descriptive- solidarity research performed in 2016. 151 nurses from Kashan's Shahid Beheshti Hospital were selected through convenience random method, according to the Morgan Table. The research tools were the two following questionnaires: "spiritual intelligence self-report inventory" (by King), and "coping strategies".

King Spiritual Intelligence Scale

The questionnaire was designed and prepared by King on 2008, including 34 yes or no questions in Likert five point rating scale regarding critical existential thinking, personal meaning production, transcendent awareness, and conscious state expansion. The questionnaire's reliability (0.92) was obtained according to Cronbach's alpha coefficient. In verification of validity of each of subscales Cronbach's alpha 0.78, 0.78, 0.87, and 0.91 were achieved for critical existential thinking, personal meaning production, transcendent awareness, and conscious state expansion, respectively (King, 2008).

In a research performed by Raghieb et al., reliability of the scale (0.88) was estimated using Cronbach's alpha (Raghieb et al., 2010).

Coping Strategies Scale

The questionnaire was prepared by Lazarus and Folkman in 1985, including 66 yes or no questions in Likert 4 point rating scale, assessing 8 coping strategies. These octal patterns have been divided into two sets of problem-oriented and emotion-focused methods. Problem-oriented coping methods are: "social support seeking", "responsibility taking", "planned problem solving", and "positive reevaluation"; while, emotion-focused methods are: "coping", "distancing", "escape-avoidance", and "self-control". Internal consistency for each of coping methods has been reported as 0.66 to 0.79 by Lazarus (Lazarus, & Folkman, 1990). Zarei and Assadi (2014) have reported 0.82 as Cronbach's alpha coefficient, in their research.

To analyze data, SPSS 18 has been used. Correlation coefficient test has been used to assess the relationship between variables, independent T-test for assessment of variables under study upon gender, and regression method was applied for measurement of level of predictor variables' influence on criterion variables.

Results

114 of 151 persons under study were female (75.5%), and 37 person were male (24.5%), among which 113 individuals were married (74.8%), and 38 other were single (25.2%). 116 persons were permanent employees (76.8%), and 31 others were employed on contractual basis (20.5%). According to the results, the mean of spiritual intelligence was 73.34. The problem-oriented and emotion-focused coping methods' means were 34/13 and 35.76, respectively. Table (1) shows related findings in detail.

Table 1: Research variables' descriptive indices

Variables	Mean	Standard deviation	Maximum	Minimum
Critical existential thinking	22.10	3.60	33	14
Personal meaning production	16.38	2.84	25	9
Transcendent awareness	21.22	3.37	33	12
Conscious state expansion	13.62	2.94	22	5
Spiritual intelligence	73.34	10.05	113	45
Problem-oriented coping style	34.13	7.99	59	11
Emotion-focused coping style	35.76	8.75	66	11

The mean of spiritual intelligence in female and male nurses respectively were 73.24 and 73.63, and according to independent T-test no significant difference was observed between female and male nurses' scores ($P= 0.275$). The mean scores between problem-oriented and emotion-focused coping methods were also compared, in male and female nurses (Table 2).

Table 2: Spiritual intelligence descriptive indices and criterion variables according to gender difference and the comparison

Variables	Female		Male		p-value
	Mean	Standard deviation	Mean	Standard deviation	
Spiritual intelligence	73.24	9.72	73.63	11.14	0.79
Problem-oriented coping style	35.13	8.19	35.13	7.35	0.85
Emotion-focused coping style	35.15	8.69	37.26	8.79	0.86

There was a significant relationship between spiritual intelligence and both subscales of coping styles i.e. problem-oriented ($p<0.01$, $r=0.504$), and emotion-focused style ($p<0.01$, $r=0.406$). There was a significant relationship between all four dimensions of spiritual intelligence and problem-oriented method, i.e. critical thinking ($p<0.01$, $r= 0.375$), personal meaning production ($p<0.01$, $r= 0.505$), transcendent awareness ($p<0.01$, $r= 0.409$), and conscious state expansion ($p<0.01$, $r= 0.305$). There was a significant relationship between all four dimensions of spiritual intelligence and emotion-focused coping style, i.e. critical existential thinking ($p<0.01$, $r=0.321$), personal meaning production ($p<0.05$, $r= 0.181$), transcendent awareness ($p<0.01$, $r= 0.328$), and conscious state expansion ($p<0.01$, $r= 0.443$). (Table 3)

Table 3: Predictor and criterion variables' correlation matrix

Variables	1	2	3	4	5	6	7
1- Critical existential thinking	1						
2- Personal meaning production	0.44**	1					
3- Transcendent awareness	0.65**	0.57**	1				
4- Conscious state expansion	0.41**	0.29**	0.51**	1			
5- Spiritual intelligence	0.82**	0.72**	0.88**	0.69**	1		
6- Problem-oriented coping style	0.37**	0.50**	0.40**	0.30**	0.50**	1	
7- Emotion-focused coping style	0.32**	0.18**	0.22**	0.44**	0.40**	0.62**	1

From among other results, spiritual intelligence was a better predictor in terms of problem-oriented method, in a way that dimensions of spiritual intelligence (0.29) were predicting problem-oriented method's variance (Table 4).

Table 4: Criterion variables' predictor model in brief (problem-oriented)

R	R Squared	R ² Adjusted	Standard error	F	Significance level
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0.54	0.29	0.27	0.79	15.43	0.000
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From within these dimensions, personal meaning production ($\beta=0.39$) had significant and positive influence on problem-oriented method ($p<0.01$) (table 5).

Table 5: Standard and non-standard coefficients of final regression model for predicting problem-oriented style through spiritual intelligence dimensions

Predictor variables	Standardized Coefficients	Non—standardized Coefficients	t	Significance level
	B	β		
Critical existential thinking	0.27	0.12	1.33	0.18
Personal meaning production	1.09	0.39	4.58	0.000
Transcendent awareness	0.10	0.04	0.41	0.68
Conscious state expansion	0.31	0.11	1.42	0.15

Moreover, spiritual intelligence dimensions (0.22) were predicting emotion-focused method's variance (Table 6).

Table 6: Criterion variable's predictor model in brief (emotion-focused)

R	R Squared	R ² Adjusted	Standard error	F	Significance level
0.47	0.22	0.20	7.83	10.35	0.000

From among spiritual intelligence dimensions, conscious state expansion ($\beta=0.35$) had positive and significant influence on emotion-focused method ($P<0.01$) (Table 7).

Table 7: Standard and non-standard coefficients of final regression model for predicting emotion-focused style through spiritual intelligence dimensions

Predictor variables	Standardized Coefficients	Non—standardized Coefficients	t	Significance level
	B	β		
Critical existential thinking	0.34	0.14	1.44	0.15
Personal meaning production	-0.74	-0.24	-0.26	0.78
Transcendent awareness	0.17	0.65	0.58	0.56
Conscious state expansion	1.06	0.35	4.14	0.000

Conclusion

Nursing as a profession creates high stress because it needs improved skills and concentration during work, strong team work, and provision of 24 hours healthcare. Nursing personnel are confronting many physical and mental stressors in workplace (Gholamnedjad & Nikpeyma, 2009). Coping styles may play an important role in reducing stress and improving public health, as a result. Coping styles are divided into two *problem-oriented* and *emotion-focused* methods. Meanwhile, spiritual intelligence provides

person with overall view towards life, experiments and events; and makes him capable of using spiritual capacities and sources for important decision makings and day to day problem solvings (Karimi Moonaghi et al., 2011). In this research, there is a significant and positive relationship between spiritual intelligence and both the problem-oriented and emotion-focused coping strategies. In other words, in people with higher spiritual intelligence, application of coping strategies will be increased. Consequently, in these people stress will be reduced. In conformation to aforementioned finding, we could refer to a research by Sung and Chu (2013) which indicates that spiritual sensations are supplementary to various parts of the life and give meaning to it; which makes man capable of using his spiritual experiences to cope with problems and to find related solutions.

The research findings showed that there is a stronger correlation between spiritual intelligence and problem-oriented coping style. That is, through increase of spiritual intelligence, nurses mostly use problem-oriented coping method. It could be argued that, those strategies concentrated on problem solving are more compatible than emotion-focused strategies (Afshari et al., 2007). Other studies in line with this research have been made, though no direct reference has been made to the relationship between spiritual intelligence and various styles of coping, in them. For example, in a study it became clear that educational interference of spiritual intelligence is effective in reduction of nurses' stress, and there is a negative relationship between spiritual intelligence and job stress (Mahmoudyari & Bagherian, 2015).

Last finding of present study showed that, from among spiritual intelligence dimensions, personal meaning production has significant predicting capability in comparison to problem-oriented method. In coping with stress, personal meaning production enables person to create new condition and find a meaning or goal in it, so that, he could adapt the situation; this way, stressor is changed and its negative impacts are reduced, which is considered as an effective problem solving method (Khodabakhshi Kalaie et al., 2013).

Also, conscious state expansion is a significant predictor for emotion-focused style and in line with findings of the research in which, personal meaning production and conscious state expansion are of high impact on understanding and management of emotions (Kaur et al., 2015).

Another finding shows no significant difference existing between female and male nurses in applying coping styles, which is in line with the findings in another research in which no significant relationship was found between coping strategies and gender difference (Shirazi et al., 2011) (Shaban et al., 2012).

Maybe the reason for lack of difference could be looked for in socio-cultural factors and society expectations towards these two genders.

Since, problem-oriented style is more effective and efficient method of coping with stress, and because spiritual intelligence is a kind of capability in problem solving and compatibility which guides person towards reaching transcendent goals, its expansion within treatment departments especially among nurses has created calmness in workplace and in society, as a result. Therefore, according to the results we may take steps towards reduction of nurses' stress through provision of some strategies as: holding workshops and educational seminars, making contribution of nurses in decision makings feasible, and creating a suitable intellectual space.

As far as limitations of the study are concerned, it could be mentioned that the research has been performed in a specific area in Iran and could not be generalized to the community of nurses all around the country; and some nurses have not respond to the questionnaires. So, performing research with bigger sample size and in several medical centers within vast geographical area is recommended. It should also

be mentioned that, more studies regarding spiritual intelligence will make clear more expanded dimensions of it, in nurses.

References

- Addelyan Rasi H, Timpka T, Lindqvist K, Moula M. (2013). Can a psychosocial intervention programme teaching coping strategies improve the quality of life of Iranian women? A non-randomised quasi-experimental study. *BMJ Open*; 3(3):e002407.
- Afshari R, Khooshabi K, Pooretemad H R, Moradi SH. (2006). Coping Strategies and Mental Health of Mothers of autistic children. *Family Re*; 2(7):286-292.
- Azadi M M, Akbari balootbangan A, Vaezfar S S, Rahimi M.(2014). The Role of Coping styles and Self-efficacy in Nurses Job Stress in Hospital. *Psychiatr Nurs*; 2(2):22-32.3
- Baezzat F, Sharifzadeh,H.(2012). Relationship between spiritual intelligence and emotional intelligence with job stress in university employees quarterly. *Journal of Career and Organizational Counseling* ;4(13):55-68.
- Behzadipoor S, Spah mansoor M, Keshavarzi arshad F, Farzad V, Naziri GH, Zamanian S. (2013). The effectiveness of cognitive behavioral stress management intervention on quality of life and Coping strategies in women with breast cancer. *Methods and psychological models*; 3(12):29-46.
- Bigdeli IA, Karim zadeh S. (2006). Effects of stressors on mental health nurses in Semnan. *Semnan Univ Med Sci J*; 8(2): 21-26.
- Costa Jr PT, McCrae RR. (1990). Personality: Another'Hidden Factor'is Stress Research. *Psychol Inq* ;1(1):22-4.
- Dall TM, Chen YJ, Seifert RF, Maddox PJ, Hogan PF. (2009). The economic value of professional nursing. *Med Care*; 47(1):97-104.
- Douglas MK, Meleis AI, Eribes C, Kim S. (1996). The work of auxiliary nurses in Mexico: stressors, satisfiers and coping strategies. *Int J Nurs Stud*; 33(5):495-505.
- Elkins M, Cavendish R. (2004). Developing a plan for pediatric spiritual care. *Holist Nurs pract* ;18(4):179-86.
- George M. (2006). How intelligent are you...really? From IQ to EQ to SQ, with a little intuition along the way *Training Manage Dev Methods*; 20(4):425-36.
- Ghobari bonab B, Salimi M, Salyani L, Noori moghadam N. (2007). Spiritual intelligence. *Andishe- novin- e- dini*; 3(10):125-47.
- Gholamnejad H, Nikpeima N. (2009). The causes of stress among nurses. *Iran Occupational Health* ;6(1):22-27.
- Jafari A, Amiri majd M, Esfandiary Z. (2013). Relationship between personality characteristics and coping strategies with job stress in nurses. *J Nurs Manag* ;1(4):36-44.
- Karimimoonneghi H, Gazarani A, Vaghei S, Gholami H, Salehmoghadam A R, Ashoori A .(2011). Relationship between spiritual intelligence and nurse competence. *Journal of Sabzevar University of Medical Sciences*; 18(2):132-39.
- Kaur D, Sambasivan M, Kumar N. (2015). Impact of emotional intelligence and spiritual intelligence on the caring behavior of nurses: a dimension-level exploratory study among public hospitals in Malaysia. *J Appl Nurs Res* ;28(4):293-98.

- Khaier M, Seif D. (2004). Study of the relationship between coping with stress skills and academic achievement of undergraduate students in relation to some demographic factors. *Clinical Psychology and Personality* ;1(4): 25-34.
- Khodabakhshi Koulai A, Heydari S, Khosh Konesh A, Heydari M. (2013). Relationship between Spiritual Intelligence and Resilience to Stress in Preference of Delivery Method in Pregnant Women. *Iran J Obstet Gynecol Inertl* ;16(58):8-15.
- King DB. (2008). Rethinking claims of spiritual intelligence: A Definition, Model, and Measure.[thesis]. Ontario: Trent University.
- Lazarus R S, Folkman S. (1984). Stress and coping process. New York: Springer.
- Lazaurus R S, Folkman S. (1990). Stress Appraisal and coping. New York: Springer pub Company.
- Lin YM, Chen FS. (2010). A stress coping style inventory of students at universities and colleges of technology. *WTETE*; 8(1): 67-72.
- Mahmoudirad Gh, Bagherian F.(2015). Effects of spiritual intelligence training on nurses' job stress. *J Nurs Manage*; 4(1):69-79.
- Moein M, Adib hajbaghery M. (2015). Comparison of Occupational Stress among Female Nurses and Female Members of the Medical Group in Chosen Training Hospitals in Isfahan. *Psychiatr Nurs* ;3(2):1-10.
- Mohammadi S, Roshanzadeh M. (2014). The relationship between psychological empowerment and psychological strain among clinical nurses in educational hospitals. *Nurs Manag*; 3(3):51-60.
- Omidi hosein abadi H, Abbasi esfajir A A. (2015). Relationship between night shift and nurses' depression and anxiety. *J Nurs Manag*; 4(2):29-38.
- Raghib M S, Siyadat S A, Hakimi naif B,Ahmadi J. (2010). Validation King (SISRI-24) in Isfahan University students. *Psychol achievements*; 4(1):141-64.
- Rastgar AA, A Zarei, SMM Davoudi, K Fartash (2012). The link between workplace spirituality, organizational citizenship behavior and job performance in Iran. *Arth Prabhand: A Journal of Economics and Management* 1 (6), 51-67
- Rastgar AA, SMM Davoudi, S Oraji, M Abbasian (2012). A study of the relationship between employees' spiritual intelligence and job satisfaction: A survey in Iran's banking industry *Spectrum: A Journal of Multidisciplinary Research*. 1 (2), 57-74
- Rastgar AA, SMM Davoudi, S Oraji, N Seraj (2012). A Study of the Role of Employees' Spiritual Intelligence in Perception of Organizational Justice: A Survey in Iran's Banking Industry, *Asian Journal of Research in Social Sciences and Humanities* 2 (5), 179-196.
- Safari S, Mohammadi-Bolban abad H, Kazemi M. (2013). Evaluation mental work load in nursing Critical Care Unit with National Aeronautics and Space Administration Task Load Index (NASA-TLX). *Health Syst Res*; 9(6):613-19.
- Sarafino Ed, Mirzai A. (2012). Health Psychology. Tehran: Roshd.
- Sedighi arfai F, Hosien zade A, Nadi ravandi M. (2015). Relationship between religious orientation and spiritual intelligence level of resiliency. *Psychol Relig*; 8(4):127-44.
- Shaban IA1, Khater WA, Akhu-Zaheya LM. (2012). Undergraduate N; Eetedal Monfared SH . Survey stress level; sources and nursing students, stress sources and coping behaviours during their initial period of clinical training. *Nurse Educ Pract* ;12(4):204-9.
- Shirazi M,Ahmad Khan M, Ali Khan R. (2011). Coping strategies: a cross-cultural study. *Romanian Journal of Psychology, Psychotherapy and Neuroscience* ;1(2):284-302.

- Smith S. (2004). Exploring the interaction of emotional Intelligence and spirituality. *Traumatology* ;10(4): 231-43.
- Sung HE, Chu DC. (2013). The varieties of religious experience and the retention of clients in Taiwanese faith-based residential drug user treatment. *Subst Use Misuse* ;48(12):1219-32.
- Twamley EW, Hami S, Stein MB. (2004). Neuropsychological function in college students with and without posttraumatic stress disorder. *Psychiatry Res* ;126(3):265-74.
- Zarei S, Asadi Z. (2012). Comparison of personality characteristics and coping styles in adolescents addicted and normal. *Res Addict*; 5(20):87-104.
- Zeighami Mohammadi SH, Asgharzade Haghighi S. (2011). The relationship between job stress and burnout in nurses. *Sci J Hamadan Nurs Midwifery*; 19(2):42-49.
- Zenozian S, Gharai B, Yazdandoost R. (2010). Effects of teaching problem solving in change student coping strategies. *Tabriz J Psychol*; 5(20).
- Zohar D, Marshall I. (2000). *Spiritual intelligence: the ultimate intelligence*. New York, NY. USA: Bloomsbury.