Staff Nurses' Resilience: Its Relation to Moral Intelligence and Professional Compatibility

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Abstract

Background: Staff nurses face various stressful situations that may affect their mental health and ability to provide care, so resilience and moral intelligence, are of great importance to improve nurses' problem-solving abilities, coping strategies and avoid extreme emotional responses and professional compatibility to achieve effective organizational outcomes. Aim: Assess staff nurses' resilience and its relation to moral intelligence and professional compatibility. Design: A descriptive correlation research design. Setting: At critical care units and departments in Shebin El Kom Teaching Hospitals and outpatient clinics departments. Study subjects: A convenient sampling technique include (226) staff nurses were participated in the study. Tools: Three tools were used named Connor–Davidson Resilience Scale, Moral Intelligence Questionnaire and Professional Compatibility Scale. Results: The study findings indicated that there were a high percentage of participant staff nurses at high level of resilience (69 %), moral intelligence (63.50%) and professional compatibility (61.50%). Conclusion: the study concluded that, there was a high positive statistical significance correlation between participant staff nurses' resilience, moral intelligence, and professional compatibility. Recommendations: Nursing educational institutions ought to equip graduates with rational thinking, perception of personal competence and acceptance of change to improve level of resilience, which in turn enhance moral intelligence and professional compatibility.

Keywords: Moral Intelligence, Professional Compatibility, Resilience, Staff Nurses

Introduction

The working conditions in hospitals are frequently the most stressful of all workplaces. Healthcare professionals must handle illnesses and injuries that could be fatal. Patient mortality, complex systems of power and abilities, intricate or malfunctioning equipment, understaffing, overwork, dependent and demanding patients all complicate their work (Cooper et al, 2020). Staff nurses become frustrated and disappointed when they are forced to compromise their morals and ideals. High-stakes decision-making challenges that staff nurses faced had an impact on their professional and personal growth (Montemurro, 2020).

The ability to maintain emotional distance from patients and concentrate on the positive rather than the negative parts of patient care is a skill that staff nurses can acquire by developing emotional resilience (Kim & Chang, 2022). Resilience is commonly understood to refer to the quality of being elastic, flexible, malleable, pliable, and supple. It denotes bouncing back or regaining momentum. According to the American Psychological Association (2023), resilience is the process and result of effectively adjusting to demanding or tough life circumstances, particularly by exhibiting mental, emotional, and behavioral flexibility and adjusting to both internal and external demands.

The process of defending oneself against the negative effects of hardship, both mentally and physically, is called resilience. Adapting efficient stress-reduction strategies on one's own is a sign of resilience (Salem et al., 2022). The ability to continue operating both physically and psychologically in the face of stress, hardship, trauma, or tragedy is known as resilience in the nursing field. (Alharbi et al., 2020).
Resilience is primarily fostered by social competence, familial cohesiveness, personal structure, social support, and personal competency. The advantages of resilience that are most frequently mentioned are averting negative psychological consequences, demonstrating good coping and adaptation techniques, enhancing self- and other-awareness, and delivering superior nursing care (Bakker & de Vries, 2021).

One important component of resilience is intelligence. Moral, spiritual, emotional, and rational intelligence are all components of the capacity to learn and use information in order to make decisions and opinions grounded on reason (Xing et al., 2023). Borba (2001) introduced the concept of moral intelligence to the psychology community by defining it as the aptitude and ability to recognize right from evil, have strong moral convictions, put those convictions into practice, and act morally.

Moral intelligence is not innate; rather, it is a talent that must be studied and developed. What is meant to be regarded moral intelligence is the ability to manage the process of problem-solving and conflict resolution with dedication and purposeful participation in both intrapersonal and interpersonal communication (Shirazi, & Sabetsarvestani, 2021). According to Mahmoudirad et al. (2020), moral intelligence is characterized by the following qualities: compassion for others, forgiveness of others, and acceptance of responsibility and the consequences of one's actions.

According to many research and theories, an individual who possesses social and psychological compatibility can attain both environmental compatibility harmony and balance in relationships inside the organization (Tiberius & Hall, 2020). Maslow's theory indicated that an individual may go to the profession that meets one’s own desires, needs, and satisfying them increases his degree of adaptation, and achieves professional compatibility (Maslow, 1970). Moral intelligence in nursing lessens harm associated to the profession and enhances the mental health of nurses. (Wolofira, 2023).

Professional compatibility is an area of social harmony. It is a continuous, dynamic process undertaken by the individual to achieve adaptation and harmony between one's own self and the professional environment (Lin, & Chan, 2020). If there is professional incompatibility, which may arise from factors related to workers in the field. (Their diligence, willingness to train, incompatibility of their abilities with their type of work, defects in the physical “economic” and social environment), the individual may not be compatible with the profession, which leads to not benefiting from his abilities in his field of work (Telmisani, 2021).

The staff compatibility with professional environment requires many elements, the most important of which are inclinations; the staff joins his profession that inclines to his abilities, Intelligence; a staff joining a profession that exceeds his intelligence and helping in reasonable adapting (Ebraheem & Ahmed, 2021). Personality traits are the behavioral and cognitive styles that distinguish an individual from others and make him have different characteristics, especially in social situations, which are among the most important features of the staff compatibility (Muhammad, 2023).

Significance of the study:

Nursing profession includes long work hours and many potentially uncomfortable and stressful situations. Staff nurses need many skills to deal with these stressful situations while conserving quality and safe care. Moral intelligence is a helpful tool for picking wise choices and learning intelligent staff. It provides access to the best information and lowers risks. This characteristic can help staff nurses and patients communicate effectively (Malik & Marwaha, 2024).

Many researches proved that resilient individuals with good social skills and able to make sound moral decisions than others. Besides that, those who identify a profession that best suits their skills and aptitudes will be professionally compatible if they able to adapt successfully to stressful situations. (Gholami Motlagh et al., 2020). In both research and practice, nursing resilience is receiving more and more attention. But there were few researches presented the relation between it and their moral intelligence and professional compatibility. The current study held to assess staff nurses' resilience and its relation to moral intelligence and professional compatibility.
Aim of the study

This study aims to assess staff nurses' resilience and its relation to moral intelligence and professional compatibility.

Research Questions:

1. What are levels of staff nurses' resilience?
2. What are levels of staff nurses' moral intelligence?
3. What are levels of staff nurses' professional compatibility?
4. Is there a relation among resilience, moral intelligence and professional compatibility as reported by staff nurses?

Methods

Research design:

A descriptive correlational research design was conducted to achieve the purpose of the study.

Setting:

The study was conducted at critical care units and departments in Shebin El Kom Teaching Hospitals. There were 700 beds at these hospitals. It is affiliated to General Agency for Educational Hospitals and Institutes. This hospital includes four buildings; general building, hotel building, dialysis building, emergency building. General departments (Medical, Surgical, Obstetric, ENT, Urology, and Orthopedic) and critical units, and Outpatient Clinics departments were included in this study.

Sampling:

A convenient sampling technique was used in the current study. The sample size was expanded to 226 staff nurses in order to mitigate the adverse effects of attrition.

Tools of data collection

The data was collected by using three different tools adapted by the researchers after reviewing the related literature; included the following:

Tool I: Connor–Davidson Resilience Scale: it was adapted from Connor and Davidson (2003) to assess level of staff nurse resilience. It consist of two parts as follow:

Part I: Personal data:

It was included personal and occupational data about staff nurses (i.e. age, academic qualification, sex, and years of experience…etc.).

Part II: Connor–Davidson Resilience Scale:

It included 28 items divided into 5 dimensions: Perception of personal competence (8 items), social competence (4 items), family cohesion (3 items), rational thinking (9 items), and acceptance of change (4 items).

Scoring system:

On a five-point Likert scale, the questionnaire was rated, ranging from 1 to 5 as follows: 1 (strongly disagree) to 5 (strongly agree). The total scores of resilience converted to percentage score ranges as the following: low level of resilience ranged (10-84) scores, moderate level that ranged (85-104) scores, and high level that ranged (105-140) scores.

Tool II: Moral intelligence questionnaire:

It was adapted from Lennick and Kiel, (2005) to assess moral intelligence level of staff nurses. It included 40 items divided into 4 dimensions: Honestly (13 items), forgiveness (13 items), responsibility (7 items), and compassion (7 items).

Scoring system:

On a five-point Likert scale, the questionnaire was rated, ranging from 1 to 5 as follows: 1 (Never), 2 (infrequently), 3 (sometimes), 4 (mostly), and 5 (always). The total scores of moral intelligences converted to percentage score ranges as the following: low level that ranged (1-119) scores, moderate level that ranged (120-158) scores, and high level that ranged (159-200) scores.

Tool III: Professional compatibility scale:

It was adapted from Obaid, (2014) to determine staff nurses’ levels regrading professional compatibility. It consisted of 26
items, divided into five dimensions: Nature and conditions of work (5 items), relationship with officials and hospital management (5 items), relationship with colleagues at work (5 items), professional growth (6 items), and salary and incentives (5 items).

**Scoring system:**

On a three-point Likert scale, the questionnaire was rated, ranging from 1 to 3 as follows: 1 (Never), 2 (Sometimes), 3 (Always). The total scores of moral intelligence converted to percentage score ranges as the following: low level that ranged (1-44) scores, moderate level that ranged (45-61) scores, and high level that ranged (62-84) scores.

**Validity of the study instruments:**

A panel of five nursing experts in nursing administration from Menoufia and Benha University evaluated the tools' content and face validity in order to ensure that the items were clear, comprehensive, and covered all relevant ground. There are no tool modifications.

**Reliability of the study instruments:**

The Cronbach's Alpha Coefficient Test was used to measure the internal consistency of the data collection instruments in order to assess their reliability. The Connor-Davidson Resilience Scale modified first instrument had an alpha of 0.94, the moral competency inventory (MCI) second instrument had an alpha of 0.88, and the professional compatibility questionnaire third instrument had an alpha of 0.88.

**Pilot study:**

It was carried out to evaluate the questionnaires' applicability and feasibility as well as to estimate the approximate 25–30 minute data collection duration. Out of the total subjects (226), 10% (23 staff nurses) participated in the study. Those participants were not included in the final analysis. The findings indicated that no tool adjustments are necessary.

**Data collection procedure:**

The researchers revised the most recent national and international literature on the study topic (books, articles, periodicals, and journals), as well as theoretical understanding of the various facets of the topic to modify the study tools of data collection.

Before starting, the director of Shebin El Kom Teaching Hospitals granted official permission for this study to be conducted. Each staff nurse was informed of the study's goal and asked for permission to participate. Data was collected at Shebin El Kom Teaching Hospitals over the course of two months, starting in early December 2023 and ending in early January 2024. Five days a week, the researcher conducted interviews with study participants.

**Ethical considerations:**

The research proposal with number (153) was first authorized by the Faculty of Nursing Sohag University Ethics Committee on 5/12/2023. In order to gain better cooperation from the nurses throughout the implementation phase of the study, the researchers thoroughly discussed the purpose of the study to each participant. Written consent was obtained from each participant, and they were all made aware of their right to participate, decline, or withdraw at any moment. Any information collected was kept totally confidential.

**Statistical design:**

By using SPSS (Statistical Package for Social Science) version 22 was used to enter and analyze data. Graphics were created with the Excel software. The range, mean, and standard deviation were computed for the quantitative data. Frequency analysis was done for qualitative data. Spearman's correlation coefficient (r) was used to assess the correlation between variables in cases when the data were not regularly distributed. The significance level used to interpret the findings of the significance tests (*) was set at P<0.05. Additionally, a highly significant threshold of P<0.01 was used to the interpretation of the significance test results (**).

**Results:**

Table (1): Illustrates distribution of personal and job data of studied staff nurses. The mean age of them was (29.26) and the mean experience years was (7.59). Furthermore, there were (45.1%) of participants had Bachelor degree in nursing. There were (81.9%) female participants and (61.5%) of them working at critical care units.

Table (2): Clarifies distribution of
studied staff nurses based on their responses regarding resilience dimensions. The highest mean of resilience dimensions was related to Rational Thinking (33.53 ± 5.37), while the lowest mean was related to Family Cohesion (11.29 ± 2.18).

Table (3) Shows mean scores and standard deviation of moral intelligence dimensions among studied staff nurses. The highest mean of moral intelligence dimensions was related to honestly (46.78 ± 13.45), while, the lowest mean of moral intelligence dimensions was related to responsibility (25.48 ± 7.58).

Table (4): Shows mean scores and standard deviation of professional compatibility dimensions among studied staff nurses. The highest mean of professional compatibility dimensions was related to professional growth (13.73 ± 2.82), while the lowest mean was related to Salary and incentives (11.69 ± 1.89).

Figure (1): Clarifies that there were a high percentage of studied staff nurses at high level of resilience (69 %), moral intelligence (63.50%) and professional compatibility (61.50%).

Table (5): Shows correlation between studied staff nurses' total of resilience, moral intelligence, and professional compatibility. There was a high statistical significance correlation between participant staff nurses' resilience, moral intelligence, and professional compatibility.

Table (1): Frequency distribution of studied staff nurses according to their personal and occupational data (n=226).

<table>
<thead>
<tr>
<th>Personal data</th>
<th>No.</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td></td>
<td></td>
</tr>
<tr>
<td>20 &lt; 25</td>
<td>55</td>
<td>24.3</td>
</tr>
<tr>
<td>25 &lt; 30</td>
<td>81</td>
<td>35.8</td>
</tr>
<tr>
<td>≥ 30</td>
<td>90</td>
<td>39.8</td>
</tr>
<tr>
<td>(Mean± SD)</td>
<td></td>
<td>29.26±0.79</td>
</tr>
<tr>
<td>Years of Experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1 &lt; 5</td>
<td>46</td>
<td>20.4</td>
</tr>
<tr>
<td>5 &lt; 10</td>
<td>96</td>
<td>42.5</td>
</tr>
<tr>
<td>≥ 10</td>
<td>84</td>
<td>37.2</td>
</tr>
<tr>
<td>(Mean± SD)</td>
<td></td>
<td>7.59±0.74</td>
</tr>
<tr>
<td>Academic qualification:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Diploma in nursing</td>
<td>42</td>
<td>18.6</td>
</tr>
<tr>
<td>Associate degree in nursing</td>
<td>83</td>
<td>36.7</td>
</tr>
<tr>
<td>Bachelor degree in nursing</td>
<td>101</td>
<td>44.7</td>
</tr>
<tr>
<td>Male</td>
<td>41</td>
<td>18.1</td>
</tr>
<tr>
<td>Female</td>
<td>185</td>
<td>81.9</td>
</tr>
<tr>
<td>Department</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Critical care units</td>
<td>138</td>
<td>61.1</td>
</tr>
<tr>
<td>In-patient Departments</td>
<td>88</td>
<td>38.9</td>
</tr>
</tbody>
</table>

Table (2): Mean scores and standard deviation of resilience dimensions among studied staff nurses (n=226).

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Range</th>
<th>Mini-Maximum Score</th>
<th>Mean ± SD</th>
<th>Mean%</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Perception of personal competence</td>
<td>16.00-40.00</td>
<td>8-40</td>
<td>30.37± 4.99</td>
<td>13.44</td>
<td>2</td>
</tr>
<tr>
<td>2. Social Competence</td>
<td>8.00-20.00</td>
<td>4-20</td>
<td>14.72± 2.72</td>
<td>6.51</td>
<td>4</td>
</tr>
<tr>
<td>3. Family Cohesion</td>
<td>6.00-15.00</td>
<td>3-15</td>
<td>11.29± 2.18</td>
<td>4.99</td>
<td>5</td>
</tr>
<tr>
<td>4. Rational Thinking</td>
<td>18.00-44.00</td>
<td>9-45</td>
<td>33.53± 5.37</td>
<td>14.84</td>
<td>1</td>
</tr>
<tr>
<td>5. Acceptance of change</td>
<td>8.00-20.00</td>
<td>4-20</td>
<td>15.14± 2.61</td>
<td>6.69</td>
<td>3</td>
</tr>
</tbody>
</table>
Table (3): Mean scores and standard deviation of moral intelligence dimensions among studied staff nurses (n=226).

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Range</th>
<th>Mini-Maximum Score</th>
<th>Mean ± SD</th>
<th>Mean %</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Honestly</td>
<td>16.00-64.00</td>
<td>13-65</td>
<td>46.78 ± 13.45</td>
<td>20.69</td>
<td>1</td>
</tr>
<tr>
<td>2. Responsibility</td>
<td>8.00-34.00</td>
<td>13-65</td>
<td>25.48 ± 7.58</td>
<td>11.27</td>
<td>4</td>
</tr>
<tr>
<td>3. Forgiveness</td>
<td>13.00-64.00</td>
<td>4-35</td>
<td>44.3 ± 15.49</td>
<td>19.60</td>
<td>2</td>
</tr>
<tr>
<td>4. Compassion</td>
<td>10.00-34.00</td>
<td>4-35</td>
<td>25.77 ± 7.00</td>
<td>11.40</td>
<td>3</td>
</tr>
</tbody>
</table>

Table (4): Mean scores and standard deviation of professional compatibility dimensions among studied staff nurses (n=226).

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Range</th>
<th>Mini-Maximum Score</th>
<th>Mean ± SD</th>
<th>Mean %</th>
<th>Ranking</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Nature and conditions of work</td>
<td>6.00-15.00</td>
<td>5-15</td>
<td>12.65 ± 2.16</td>
<td>5.59</td>
<td>2</td>
</tr>
<tr>
<td>2. Relationship with officials and hospital management</td>
<td>6.00-15.00</td>
<td>5-15</td>
<td>12.38 ± 2.34</td>
<td>5.48</td>
<td>4</td>
</tr>
<tr>
<td>3. Relationship with colleagues at work</td>
<td>5.00-15.00</td>
<td>5-15</td>
<td>12.51 ± 2.24</td>
<td>5.53</td>
<td>3</td>
</tr>
<tr>
<td>4. Professional growth</td>
<td>7.00-18.00</td>
<td>6-18</td>
<td>13.73 ± 2.82</td>
<td>6.08</td>
<td>1</td>
</tr>
<tr>
<td>5. Salary and incentives</td>
<td>6.00-15.00</td>
<td>5-15</td>
<td>11.69 ± 1.89</td>
<td>5.17</td>
<td>5</td>
</tr>
</tbody>
</table>

Figure (1): Percentage distribution of total levels regarding Resilience, Moral Intelligence and Professional Compatibility among staff nurses.

Table (5) Correlation between studied staff nurses’ resilience, moral intelligence, and professional compatibility (n=226).

<table>
<thead>
<tr>
<th>Variables</th>
<th>Spearman’s correlation coefficient r</th>
<th>p</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resilience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Moral intelligence</td>
<td>.655**</td>
<td>0.00</td>
</tr>
<tr>
<td>Professional compatibility</td>
<td>.590**</td>
<td>0.00</td>
</tr>
</tbody>
</table>

(***) highly statistically significant at p<0.01
Discussion:

One of the most important, honorable, and dignified profession, nursing requires for nurses to be vital in many of the challenging situations that face contemporary, developed nations. (Taie, et al., 2022). Healthcare professionals continue to provide care in unpredictable and unstable environments while dealing with emotionally and physically taxing situations. Among these difficulties, nurses must possess resilience in order to overcome setbacks or difficulties, cope with pressure, and have a positive impact on both their personal and professional outputs. Resilience also helps nurses become more professionally combatable and their professional intelligence skills improve job and life satisfaction. Therefore, it is stated that having a high degree of resilience and professional intelligence is essential for nurses to excel in their careers. (Han, et al., 2023).

More than three-quarters of the staff nurses in the current study had a high degree of resilience. Rational thinking received the greatest mean score among resilience components, while family cohesion received the lowest mean score. This could be because of a supportive and cooperative work environment where nurses have access to resources, mentorship, and positive relationships with coworkers. Continuous learning and skill development can also help nurses become more competent and confident, and finding meaning and purpose in their work can help them become more resilient. Staff nurses are better able to adapt to changing circumstances and maintain their physical, mental, and emotional well-being at work, which is why nearly two third of nurses who work in critical care foster critical thinking skills.

This result was in line with the findings of Erdogan et al. (2018), who concluded that among the nurses employed in a Turkish public hospital, there was a higher level of resilience. The highest mean of resilience dimensions was associated with the perception of social competence and logical thinking, while the family cohesion dimensions showed a low mean. In the same vein, Nagdy et al. (2022) found that a high level of resilience was present among study participants who were special education teachers in the Sohag Governorate. However, they disagreed that the dimension of religious and spiritual values was associated with the highest levels of resilience, and that personal competence was at a low level.

In the same context, ELsaeed et al. (2023) found that while a minority of the nurses they researched had low resilience skills, over half of the nurses studied had strong resilience skills. The study was done on nurses at Tanta University Emergency Hospital. Additionally, Elghabbour et al.’s (2023) research of nurses employed in Port Said and El-Zohour general hospitals found that most of them have a high degree of job resilience. Additionally, this result is consistent with that of (Mallon, et al., 2023), who studied nurses in the United States and found a significant improvement in resilience with medium-to-large effect sizes. Also, (Prodromou, et al., 2023), found that nurses have high resilience level in their study on nurses in Cyprus.

Furthermore, Sendad et al.'s (2023) study on emergency nurses in the Paediatric Emergency Centre COVID-19 facility in Qatar demonstrated that the nurses' resilience level was high for "normal resilient coping.” And, Asadi et al. (2023) revealed that a good degree of resilience was exhibited by nurses working at the Shahid Ganji Hospital in Borazjan, Bushehr, Iran. Additionally, Abdulmohdi (2024) found that British nurses had low to moderate levels of resilience.

On the other hand, Shouroki, et al., (2022), concluded that the mean score of resilience was low among nurses in Iran. Also, the highest mean of resilience dimensions was related to personal competence, high stander and tendency while the lowest mean was related to acceptance of change. Besides that, the study by Areshtanab et al. (2022) involved nursing students from Tabriz University of Medical Science in Tabriz, Iran where the highest mean regarding perception level of resilience was related to positive acceptance of change dimension.

Congruently, Galanis et al. (2023), studied Greek nurses who reported having moderate levels of resilience, discovered a positive correlation between age and resilience, with nurses holding an MSc or PhD reporting higher levels of resilience. Moreover, Aqtam et al., (2023), who focused on nurses employed in Palestine's West Bank
hospitals' critical care units, revealed low resilience mean scores.

According to the study's findings, more than half of studied staff nurses had a high degree of moral intelligence. Honestly dimension had the highest mean compared to responsibility dimension which had the lowest mean score. This can be due to honesty is one of ethical principles which nurses should have at daily interactions with patients and families, constant awareness of ethical obligations and sensitivity to individual needs, developing moral intuition. Staff nurses constantly encounter ethical dilemmas, requiring them to analyze complex situations, consider diverse perspectives, and make morally sound decisions.

This result is congruent with Majidi, et al., (2018), who studied nurses employed in hospitals in Guilan Province, Iran, and found that the majority of respondents had a moderate level of moral intelligence, and the least percentage of studied staff had a low level of moral intelligence. Furthermore, Khosravani, et al. (2020), who studied nurses employed in Arak, Iran, found that their moral intelligence ranged from good to high.

Furthermore, Heidari et al.'s (2022) study on nurses employed in educational hospitals in Sari, Iran, affiliated with Mazandaran University of Medical Sciences, revealed that the integrity and honesty dimension had the highest mean among studied staff when it came to moral intelligence perception. While disagree that the compassion dimension had the lowest mean.

According to Panahi et al. (2022), who studied nurses employed in the emergency and special wards of three educational and medical facilities in Ilam, Iran, the dimensions of action based on principles, values, and beliefs were associated with the highest scores on moral intelligence. Conversely, the lowest scores were related to the dimensions of forgiveness of others.

Furthermore, Ebraheem and Ahmed (2021) found that the dimensions respect, values and beliefs, and lowest scores and related to the dimensions of tolerance at their study on health service workers of Naser Hospital, Gaza, Palestine and showed that the highest scores on ethical intelligence were related to. On the other hand, this result in disagreement with Karabey, (2022), who studied nurses in a Turkish hospital and came to the conclusion that ethical intelligence were related to self-control and responsibility dimension with the highest scores and the dimensions of conscience had lowest scores.

The results of this study showed that a high degree of professional compatibility was had by almost two thirds of the staff nurses. Professional growth was associated with the highest mean of the study sample's perception level of professional compatibility, whereas the dimension of salary and incentives had the lowest mean.

From researchers’ opinion, the moral intelligence, good qualities, and resilience that staff nurses possess help and make them prepared to fit into the workplace. The respect, empathy and justice in these qualities and working with team spirit, professional growth and development by continuous education, training in workplace setting help nurses for professional adjustment. In the health care field, they work for long periods in departments with each other. Therefore, whenever there is a relationship based on respect, it strengthens their relationship and makes it built on a strong foundation, which is respect.

This finding is consistent with the research done by Ali (2023) on Iraqi workers, which demonstrated a high degree of professional compatibility. Also, Aboanza, and Elmazeny, (2021), who conducted their study on health service workers in Gaza and concluded that they had high level of professional compatibility and the lowest scores and related to the dimensions of salary and incentive. While disagree that the highest scores of professional compatibility among health service workers were related to relationship with co-workers dimensions.

This is in contrast to the findings of Nagdy et al. (2022), who concluded that the nature and working environment component had low mean scores, while the relationship with superiors was associated to the highest mean scores on professional compatibility. Also, Awla (2023), who conducted their study on the directors of youth centers in the Erbil governorate, Iraq and found that the professional compatibility among the participants in the sample was the highest
practice with regard to relationships between colleagues.

According to the study's findings, staff nurses' overall levels of resilience, moral intelligence, and professional compatibility showed a highly statistically significant positive correlation. It can be due to that the resilience can foster effective communication and conflict resolution within teams that improving professional compatibility. Moral intelligence is the capacity to distinguish between good and wrong and to make moral decisions. This is vital for nurses who make critical decisions impacting patients' well-being. Strong moral character fosters trust between nurses, patients, and colleagues, contributing to a positive work environment, moral intelligence and resilience can foster mutual respect among team members, appreciating individual strengths and differences, leading to better compatibility.

This finding is consistent with that of Areshtanab et al. (2022), who discovered a substantial correlation between moral intelligence and resilience, and that both characteristics predicted variation in resilience among nursing students. Considering how critical resilience is in the demanding nursing profession and how moral intelligence might influence resilience. Additionally, Omran, (2023), who studied male and female university students in the Baghdad Governorate from a variety of humanities disciplines, discovered a positive relationship between psychological resilience and personal intelligence in students.

In the same line, Aboanza and Elmazen (2021) shown in their research that the level of moral intelligence and professional compatibility are positively correlated, with statistical significance. Nagdy et al. (2022) discovered in their research that there exists a statistically significant positive link between the study sample members' scores on the psychological resilience scale and their professional adjustments score. Furthermore, Areshtanab, et al. (2022), who conducted their study which involved nursing students at Tabriz University of Medical Science in Tabriz, Iran, showed that these students had high levels of moral intelligence and resilience, and that there was a strong correlation between the two.

Conclusion:

The study's findings indicated that there were a high percentage of participant staff nurses at high level of resilience, moral intelligence and professional compatibility. Rational thinking was associated with the resilience dimensions with the greatest mean. Honesty had the highest mean among the moral intelligence dimensions. Professional growth was associated with the greatest mean of the parameters of professional compatibility. The resilience, moral intelligence, and professional compatibility of the participating staff nurses showed a statistically significant positive correlation.

Recommendation:

- Nursing educational institutions ought to equip graduates with rational thinking, perception of personal competence and acceptance of change to improve level of resilience which in turn enhance moral intelligence and professional compatibility.

- Nursing mangers should offer chances to staff members’ professional growth, consider reasonable nature and condition of work and improve colleagues’ relationship which enhance developing professional compatibility

- Nursing educators ought to offer learning activities that support the development honestly and forgiveness as the main domains affect developing moral intelligence instantly, in order to grow and prosper healthily.

- Further study is needed to determine the factors that improve nurses' professional compatibility, moral intelligence, and resilience as well as how to apply them.

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