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Analysis of Biological Factors Affecting the Improvement of Health Accounting from the Perspective of Monetary Disorders

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Abstract: The present study investigates the relationship between intrinsic factors and monetary disorders for the first time in Iran. The statistical population is the banks that are members of the Tehran Stock Exchange. The sample size is based on new methods of experiments and using Sample Power software and according to the type of research relationship hypothesis which is a combination of two scale variables but abnormal, Spearman test has been used. The first hypothesis of the study based on the relationship between two variables of financial risk tolerance and monetary disorders, showed that there is a significant relationship between the variables of financial risk tolerance and monetary disorders and there is a positive and moderate relationship between variables and the first hypothesis was accepted. Moreover, based on the results, the second hypothesis has a significant relationship between the variables of financial anxiety and monetary disorders, which shows a positive and moderate relationship between the variables. The second hypothesis was accepted and finally the third test showed that there is no significant relationship between monetary outcomes variables and monetary disorders and the third hypothesis of the research was not accepted. Therefore, based on the inherent origin of the variables of financial risk tolerance and financial anxiety, it has a positive and significant relationship with monetary disorders.

Keywords: Health Accounting, Monetary Disorders, Bank, Intrinsic Factors.

INTRODUCTION

Financial therapy is a new term that deals with the psychological problems caused by financial problems. Financial therapy is defined by the Financial Therapy Association (FTA) as a combination of the cognitive, emotional, behavioral, intellectual, and financial aspects of individuals. The goal of financial therapy is to improve the well-being and overall life quality of life of clients and applicants (Archuleta Kristy et al., 2012).

Financial therapy provides an entry point for financial instruments into the field of solving psychological problems of society. The research shows that there is a deep connection between many psychological issues of people and their financial issues. Research in the field of psychological disorders, including family disputes, stressors in youth, types of stress, marital instability, emotional distress, emotional disorders, depression, the rate of fights and conflicts in society and the family, upbringing disorders, the impact of the monetary outcomes in childhood and etc. emphasizes the prominent role of financial issues in the occurrence of psychological disorders. So far, many monetary disorders in the world have been introduced and studied by financial therapists. Monetary disorders are monetary damages that cause people to suffer financially such as hoarding disorder, money vigilance, workaholism, gambling disorder, financial denial, financial dependence, financial infidelity and compulsive buying disorder. In fact, monetary disorders are destructive, persistent, predictable, and often difficult patterns of financial behavior that cause stress, anxiety, emotional distress, and disruption in important areas of people's lives. According to the American Psychological Association (APA), the main factor of stress in people's lives is money, which is higher than other factors such as work, health and children. Research has shown that money beliefs are a common factor in tensions and divorce (Oggins, 2013).

People with monetary disorders often have misconceptions about money and cannot change their behavior. For example, in hoarding disorder, compulsive hoarders have a sense of emotional attachment to their money and assets, which make it difficult for them to spend or give up the assets they have accumulated. Traditionally, hoarding has been seen as a sign of obsessive compulsive disorders (OCD) or obsessive compulsive personality

disorder (OCPD). However, regardless of whether a person has the signs of OCD or OCPD, hoarding behavior can be a very serious problem in itself. In the fifth edition of the Diagnostic and Statistical Manual of Mental Disorders, the OCPD criteria include "a painful spending style for both (self and others); money is seen as something to be saved for the hard days American Psychological Association.

On the other hand, although this statement links the hoarding disorder and financial behavior, and despite the fact that people with monetary disorders have a serious public health problem and cause social costs for the public and pressure on families (Tolin et al., 2008), so far no experimental and research work has been done to monetary pathology and identify the factors affecting monetary disorders. Therefore, in this study, we will try to identify the factors affecting monetary disorders so that through this monetary pathology, we can take effective steps in strengthening health accounting and playing the social responsibility role of accounting to individuals and society.

LITERATURE REVIEW AND RESEARCH BACKGROUND

Personology is a type of personality classification that studies individual differences. Personality types refer to a class or a group that is identified by showing certain features. John L. Holland prepared a job preference questionnaire to classify people based on interests or personality types and he believed that profession is affected by various factors such as motivation, knowledge, personality and ability. According to this theory, Holland divides people into six personality types based on their similarities which are realistic, artistic, social, daring, inquisitive, and conventional. The more similar a person is to a personality type, the more likely he is to present the specific behaviors and characteristics of that type (Mostafaei, 2012).

According to Jung, the whole personality or psyche is made up of separate systems or structures that can influence each other. These major systems include self, the personal unconscious, and the collective unconscious. The self is the core of consciousness that is part of the mind that deals with understanding, thinking, feeling, and remembering. The self acts selectively and is consisted of a set of attitudes and actions. Much of conscious perception and reaction to the environment are determined by contrasting extroversion and introversion attitudes. According to Jung, everyone has a talent for both attitudes, but only one of them dominates the character. The dominant attitude then guides the individual's behavior and consciousness, yet the non-dominant attitude remains influential and becomes part of the personal unconscious, where it can influence behavior (Myers et al., 1998). Sense and intuition are classified as irrational functions. These processes accept experiences but do not evaluate them. In contrast, the other pair of opposing functions, thinking and feeling, are logical functions that evaluate the experiences gained by sense and intuition. Just as the psyche contains some of both extroverted and introverted attitudes, the capability of all four functions prevails, and other functions remain hidden in the personal unconscious. Thus in a personality type only one pair of functions predominates. A person cannot be dominated by thought and feeling or intuition at the same time because they are opposite functions (Mohammadi, 2019).

In general, financial anxiety can be defined as a disorder of normal financial performance. In other words, financial anxiety is known as a condition that has been created as a result of uncertainty and change in expectations regarding the loss of individuals and affects economic variables (Ebrahimi Shaghaghi, 2019). Financial anxiety is a situation in which financial markets and economics are most likely to experience financial distress. Financial anxiety is referred to as a disorder of normal financial functioning. Financial anxiety caused by shocks and financial structure is more vulnerable. Therefore, the greater the financial fragility (weakness in financial conditions), not only by itself, but also by increasing the impact of shocks entering the market and multiplying and strengthening it by increasing financial losses, risk (increasing the probability of expected losses) and uncertainty increase stress (Valian & Matoufi, 2018). The following is a selection of previous studies to determine the research gap in the study of the relationship between intrinsic factors and accounting improvement.

(Fattahi, 2019) examined the issue of monetary and financial disorders, attitudes and financial anxiety. In this article, he states how thinking of each person impacts on what he buys, how much money he spends, how he saves and invests, how he treats people who are financially stronger and weaker, and how he feels about himself and he becomes the main center of control. The results of this study show that people with monetary disorders often lose their relationships in their personal lives and with others, and may give money to others even if others are unable to repay it, and this makes them more dependent on others. By recognizing the wrong financial patterns and behaviors, we can prevent or interact with many small behaviors that have a big impact on our lives and financial well-being.

(Amani Dadgar et al., 2019) examined the model of piety in health accounting with emphasis on the mediating role of moral development. In this study, by examining the effect of individual, organizational, credible leadership and psychological characteristics, a model for piety in health accounting was presented with emphasis on the mediating role of moral development. Findings of this study show that individual characteristics with significance level of (0.039), credible leadership characteristics including self-awareness, communication transparency, internalized moral perspective and balanced information processing (0.015) and

psychological characteristics including reward mechanisms and moral intelligence (0.013) through the mediating variable of moral development lead to piety in health accounting (positive and significant). Organizational characteristics (job satisfaction, employment relationship, organizational responsibility and type of service) and psychological characteristics (four dark personality traits, five personality traits and religious orientation) do not lead to piety in health accounting through the mediating variable of moral development. Also, according to the fit indices, the developed model has a good fit.

(Pourali, 2012) in an article entitled "Presenting a Model for Measuring and Evaluating Financial Health in Iran's Environmental Conditions" states that the purpose of this study is to identifyand determine the components and financial indicators affecting financial health and to present a model by multinomial logistic regression method for measuring and evaluating financial health in Iran. Findings show that in terms of leveraging ratios, activity and market value, there are no statistically significant differences between these companies at different levels of financial health, but the difference between liquidity and value creation of these three levels is significant and the components affecting financial health are quick, current and debt ratios. The net working capital to all assets of EVA, MVA according to the Dunnett and Tukey pair test is the cause of the difference between helpless companies, i.e. statistically helpless companies are on one side and middle and healthy companies are on the other side, so two models were presented: one for the helpless and one for middle and healthy levels.

(Cordell, 2001) stated that financial risk tolerance is the maximum amount of uncertainty that one is willing to accept when making financial decisions are likely to be unprofitable. This statement is consistent with the definition of the International Organization for (Ebrahimi Shaghaghi, 2019) that financial risk tolerance is the extent to which a person wishing to achieve a result with more desirable characteristics experiences a more desirable result.

(Gilliam John et al., 2010) conducted a study entitled "Measuring Perception of Financial Risk Tolerance: Based on Two Measurement Criteria". This study compares two criteria for empirically measuring risk tolerance and separately examines the relationship between risk tolerance and asset allocation. The sample consisted of 328 respondents, mainly faculty and staff of southwestern colleges and universities that 38 individuals answered the questionnaire in full. The questionnaires were web-based and were completed and collected via the Internet. The results show that while both scales are associated with the priority of allocating risky or non-risky assets among respondents, the 13-item Grable scale has more and more explanatory power.

(Shapiro Gilla & Burchell Brendan, 2012) examined the measurement of monetary anxiety. They showed that financial anxiety is a separate structure from depression and general anxiety. These findings indicate that people who report financial anxiety also have a delay in responding to processing financial information. Accordingly, financial behaviors can be assessed more comprehensively, and policy can be better defined by incorporating financial anxiety into economic models of financial illiteracy, mismanagement, and debt.

(Matoufi & Valian, 2018) conducted research on "Hoarding Disorder" which is more than just an obsession. Implications for therapists and financial planners were made. They showed that compulsive hoarders have an emotional attachment to their money and assets, which makes it difficult for them to spend or relinquish the accumulated assets. Traditionally, hoarding has been seen as a sign of obsessive compulsive disorder (OCD) or obsessive compulsive personality disorder (OCDP).

(Furnham et al., 2014) conducted a study on 512 people through a questionnaire. In an article entitled "Money Messages": Recovering Childhood Memories of Money and Money Damage in Adulthood", the questionnaire was for studying parents' monetary beliefs and behaviors that had previously been passed on to children that actually showed the same monetary outcomes. The second questionnaire was on monetary damage using the results of (Fattahi, 2019) study. The results of factor analysis showed the factor of "monetary secrecy", which was associated with higher levels of damage to spending money in adulthood. Also, higher family monetary secrecy in women was significantly associated with monetary compensation and hoarding damages. Findings show that the more concerned, obsessive, and irrational people are about money, the less likely they are to make money, and family monetary secrecy in childhood is associated with monetary damage in adulthood.

(Hill et al., 2017) conducted a study on how money, marital issues and stress effect on marital instability. This study showed how money and marital issues simultaneously predict marital instability and how financial therapy can effectively help clients' problems in these areas. In particular, this article simultaneously examines the relationship between marital instability and financial and family stressors (financial stressors, family work conflict, and academic stressors). Financial and sexual resources (couple's income) and financial and sexual perceptions of both couples (financial dissatisfaction and sexual dissatisfaction) also were examined. In addition, in this study, financial relationship and couple relationship as intervening variables for financial therapists were examined. Process analysis showed that family financial stress was associated with greater financial and sexual dissatisfaction. Financial dissatisfaction and sexual dissatisfaction both led to more marital instability. This suggests that if financial therapists can help clients with financial issues, problems such as financial stress, work-family conflict, and insufficient income may lead to less divorce.

Research Model

The researcher with regard to ten factors related to monetary pathology (including financial messages, financial knowledge, attitudes toward financial planning, financial risk tolerance, financial anxiety, gender, age, attitudes toward money, political ideology, worldview (religiosity)) and Factors of monetary disorders (wealth acquisition, cost attitude, cost behaviors associated with anxiety, and gambling disorder) have categorized the factors according to their origin. Some factors are acquired after birth through effort and knowledge, some factors are biological and some factors are rooted in the pedigree and past of individuals. After reviewing previous research and initial interviews with financial and psychological experts, factors related to monetary disorders were classified into three dimensions: biological, intrinsic, and acquired, based on their origin. In the present study, the researcher will focus only on the intrinsic aspect of this type of disorder. Therefore, the conceptual model of monetary pathology and the study of the relationship between monetary disorders and the factors affecting it, based on the hypotheses and based on the origin of the creation and based on the approach, will be based on the following model (Figure 1).

Conceptual Model of Monetary Pathology

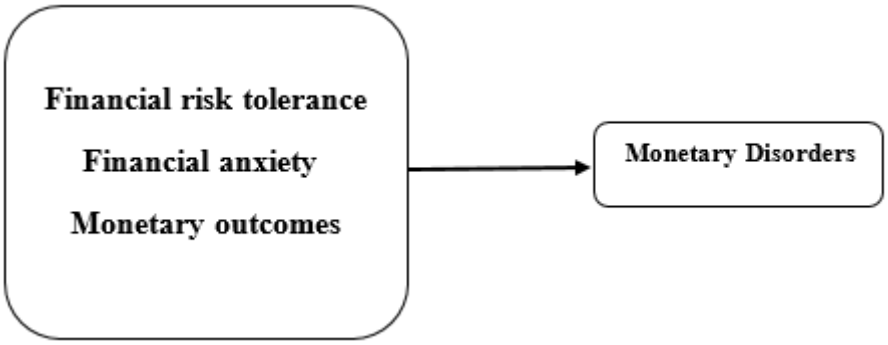

Fig.1: Conceptual Model of Monetary Pathology based on Intrinsic Origin

By examining ten factors related to monetary pathology and influential factors on monetary disorders, the factors can be classified based on their intrinsic origin. Therefore, the three factors of financial risk tolerance, financial anxiety, monetary outcomes, are intrinsic factors that will be discussed in the present study. The researcher extracted questions related to monetary disorders from the (Fattahi, 2019) standard questionnaire, which includes four items: hoarding, cost attitude, cost behaviors associated with anxiety, and gambling disorders. In the five-option Likert scale, very low, low, medium, high and very high options has been used by respondents to give answers. The researcher also used the numbers 1 to 5 to quantify the answers, so that the numbers 1 and 2 indicate no disorder and the numbers 4 and 5 indicate the presence of a disorder in the respondent
(Table 1).

Table 1. Questions of Monetary Disorder Questionnaire

Hoarding
1. Are you upset about buying the product you want?
2. Do you use money to control and manage others?
3. Can you easily walk to save on bus fare?
4. Do you prefer money to keep you, or do you keep the money?
Cost attitude
1. Do you buy things when you feel anxious, bored, upset, depressed or angry?
2. Do you buy things you really do not need?
3. Do you spend a lot of your free time shopping?
Cost behaviors associated with anxiety
1. Do not you want to learn about practical issues of money?
2. Do you avoid taking money seriously?
3. Do you constantly exceed the cost of your credit card?
4. Are you constantly wondering where your money is going or why there is no money left at the end of each month?
5. Are you increasingly worried about being able to pay your bill every month?
6. Do you always think about your finances?
7. Do you feel guilty or anxious when you ask for money?

Gambling disorder
1. Does gambling make you excited?
2. Do you bet often and spend a lot of money on your betting?
3. You spend money on others but have trouble spending it on yourself?

Therefore, the research hypotheses based on the research conceptual model are as follows:
Hypothesis 1: The degree of financial risk tolerance is related to monetary disorders
Hypothesis 2: Financial anxiety is related to monetary disorders.
Hypothesis 3: Money messages (Monetary outcomes) are related to monetary disorders.

MATERIALS AND METHODS

Research Method

Quantitative approach is used in the present study so that in this linear approach the researcher only tests what has been explored before and the researcher is completely separate from reality or problem. Therefore, the strategy of the present study is descriptive, survey and relational. Furthermore, in terms of tactics in quantitative work, it can be said that the researcher will collect the research data using the data collection tool, which is a questionnaire, so the data format is also a number. SPSS software is also used to analyze data and test hypotheses.

Data Collection Tools

Information and observations of the present study were collected by a standard questionnaire and field method by the researcher. The final version of the questionnaire, after validation and correction by experts, was made online and available to sample members.

Analysis of Information

In the present study, after collecting the questionnaire and the desired answers, the researcher has used descriptive and inferential statistical methods. Therefore, in order to qualitatively analyze the general information obtained from the questionnaire, the classification and organization of information, the percentage of each option and the cumulative percentage and descriptive statistics for the questions are used. The descriptive part of this research consists of a part describing the characteristics of the statistical sample. Another part of the analysis of research data is devoted to inferential analysis that based on the results of findings of the sample group are generalized to the statistical community. The inferential statistics section consists of two sub-sections: tests related to research hypotheses and other findings. Therefore, to test the research hypotheses, the researcher has used Spearman test.

Statistical Population and Research Sample

To test the research relational hypotheses, the researcher has selected managers and experts of active banks that are members of Tehran Stock Exchange. According to the nature of the research model, data collection is done through a questionnaire. Sampling method is through test-based methods. In 1998, Myers et al., stated that if the study sample is representative of the target community, inferential statistics can play its generalizable performance based on exploratory patterns of the sample. In fact, the statistical population of this study is public and private banks in Iran. The researcher, considering the size of the statistical population based on the common characteristics of the population, targeted the banks listed on the Tehran Stock Exchange. Also, to implement the research survey, the researcher selected managers and senior experts from twenty-two banks listed on the Tehran Stock Exchange based on available sampling. Specifically, based on the research problem, individuals are the unit of analysis and the sample size is calculated by methods based on inferential statistics tests. Therefore, the researcher will obtain the minimum sample size to participate in this test using Sample Power software. After rule of thumb (finger computing) methods lost their validity in the scientific community, it was found that factors such as the type of test for the hypothesis, scale degrees, standard deviation, type I and II errors of the confidence interval, power and effect size affect the sample size. Since the hypotheses are written in SPSS software without direction and in fact the significant tests in them are two tails, the researcher avoids calculating the scenarios with 1 tailed test and then calculates the accuracy of the calculations at the level of 99% probability of occurrence. The alpha or the error of type 1 error is 1% and beta is 15% in order to achieve a test power of at least 85 percent. According to (Myers et al., 1998), the power of 85% is a suitable power for research with relational and causal hypotheses. Furthermore, the effect size of the present study, which is the same as the coefficient of determination in regression-oriented research, is considered 10% with regard to the scientific convention. This convention is based on experimental research and calculation of quality and fit indicators in the software. Finally, in 99% probability scenario of a sample with 280 observations, with reach to the power of 85%, and in the confidence level of 99% with a sample of about 280 observations, we reach to the power of 85%, which can be seen in the power diagram based on the sample size. After evaluating its power, the

researcher selects 280 observations, and if we want to express it more accurately, the researcher must survey the sample size equal to 280 observations so that the probability of occurrence of the phenomenon in the community is 99% and the generalizability of the results will be done with 85% power (Figure 2).

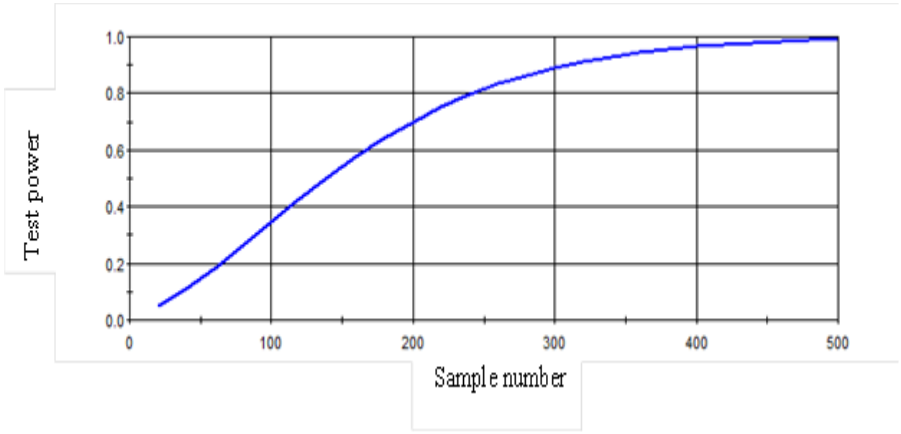

Fig.2: Determining the Sample Size

With regard to the sample size, the researcher according to (Table 2) distributed his questionnaire in 22 member banks of the Tehran Stock Exchange, of which 405 questionnaires have been sent in total, and finally the researcher was able to receive 318 questionnaires in several different stages. The return rate of the questionnaire is 78.5%.

Table 2. Number of Transmitted Questionnaires

Number of returned questionnaires	Number of given questionnaires	Bank
13	15	Eghtesad Novin Bank
19	23	Ansar Bank
14	18	Iran Zamin Bank
14	16	Ayandeh Bank
10	24	Parsian Bank
15	19	Pasargad Bank
12	16	Ayandeh Bank
10	13	Tejarat Bank
11	12	Bank Hekmat Iranian
14	15	Middle East Bank
15	17	Day Bank
15	20	Saman Bank
21	24	Sarmayeh Bank
10	13	Sina Bank
11	19	Shahr Bank
18	26	Saderat Iran Bank
12	14	Gharzolhasaneh Resalat Bank
18	22	Ghavamin Bank
22	25	Karafarin Bank
13	19	Tourism Bank
15	18	Mellat Bank
16	17	Mehr Eqtesad Bank
318	505	Total number

After collecting 318 questionnaires, the researcher screens the data based on data preprocessing indicators to prevent any skew and data bias, and finally 280 screened questionnaires in the demographic section, indicators (questions) and the research variables are classified and interpreted in the form of standard descriptive statistics, and then the research hypotheses are tested in the form of inferential statistics.

DISCUSSION

Demographic Statistics of the Research

The demographic mixture of the study shows that in the sample members, 83.2% of the respondents are men and 16.8% are women. Also, 6.8% of the respondents had an associate degree, 54.65 had a bachelor degree, 33.9% had a master degree and 4.6% had a doctorate. On the other hand, 22.1% of the participants in the present study were between 30 and 35 years old, 39.6% were 35 to 40 years old, 26.1% were 40 to 45 years old and 12.1% were over 45 years old.

Inferential Statistics

Before testing the hypotheses, Kolmogorov-Smirnov test was used to determine the normality of the data. The results of this test are shown in (Table 3).

Table 3. Results of Data Normality Tests

Monetary disorders	Financial anxiety	Financial risk tolerance	Monetary outcomes		
280	280	280	280	Number of observations	
3.7774	3.5095	3.6994	4.1621	Mean	Normal parameters
0.78876	0.70025	0.61494	0.67361	Standard deviation	
0.218	0.114	0.129	0.141	Full	The most difference
0.155	0.061	0.095	0. 107	Positive	
-0.218	-0.114	-0.129	-0.141	Negative	
0.218	0.114	0.129	0.141	Statistical test	
0.000c	0.000c	0.000c	0.000c	Measurement error	

Source: Research findings

According to the data in the (Table 3), it is observed that the measurement error (Sig) of the data normality test in the research variables is less than p-0.05. Therefore, with 0.95 of confidence it can be said that the mentioned variables do not have the assumption of normality, so non-parametric tests should be used to test the research questions. Spearman test is used to examine the hypotheses and analyze the data and test the hypotheses based on the abnormality of the data.

Testing Hypotheses

Hypotheses 1: The degree of financial risk is related to monetary disorders.

Table 4. Spearman Correlation Test: Financial Risk Tolerance and Monetary Disorders

Row			Monetary disorders	Financial risk tolerance
Spearman	Monetary disorders	Correlation coefficient	1.000	0.365**
		Measurement error	0	0.000
		Observations	280	280
	Financial risk tolerance	Correlation coefficient	0.365**	1.000
		Measurement error	0.000	0
		Observations	280	280

Source: Research findings

As shown in the (Table 4), the measurement error is less than 0.05, indicating that there is a significant relationship between the variables of financial risk tolerance and monetary disorders. Also, Spearman correlation coefficient is positive and is between 0.3 and 0.6, which indicates a positive and moderate relationship between variables, and the first hypothesis of the research is accepted.

Hypothesis 2: Financial anxiety is related to monetary disorders.

Table 5. Spearman Correlation Test for Financial Anxiety and Monetary Disorders

Row			Monetary disorders	Financial anxiety
Spearman	Monetary disorders	Correlation coefficient	1.000	0.354**

		Measurement error	0	0.000
		Observations	280	280
	Financial anxiety	Correlation coefficient	0.354**	1.000
		Measurement error	0.000	0
		Observations	280	280

Source: Research findings

As shown in the (Table 5), the measurement error is less than 0.05, indicating that there is a significant relationship between the variables of financial anxiety and monetary disorders. Also, Spearman correlation coefficient is positive and is between 0.3 and 0.6, which indicates a positive and medium relationship between variables, and the second hypothesis is accepted.

Hypothesis 3: Monetary outcomes are related to monetary disorders.

Table 6. Spearman Correlation Test of Monetary outcomes and Monetary Disorders

Row			Monetary outcomes	Monetary disorders
Spearman	Monetary disorders	Correlation coefficient	1.000	0.114
		Measurement error	0	0.056
		Observations	280	280
	Monetary outcomes	Correlation coefficient	0.114	1.000
		Measurement error	0.056	0
		Observations	280	280

Source: Research findings

As shown in the (Table 6), the measurement error is greater than 0.05, which indicates that there is no significant relationship between the variables of monetary messages and monetary disorders and the third hypothesis of the research is not accepted.

CONCLUSION

In the present study, the researcher aimed to investigate the relationship between intrinsic factors and improving health accounting with an emphasis on monetary disorders for the first time in Iran. For this purpose, the researcher determined his statistical population as the banks listed in the Tehran Stock Exchange and the analysis unit was the managers and senior experts of the banks. The researcher determined the size of his statistical sample based on new test methods using sample power software and then according to the type of research hypotheses which is relational and due to the non-normality of variables, selected the Spearman test and answered the research hypotheses as following. The first hypothesis of the study that is based on the relationship between the two variables of financial risk tolerance and monetary disorders, was obtained less than 0.05 according to the measurement error, so there is a significant relationship between the variables of financial risk tolerance and monetary disorders and a positive and average relationship between the variables and the first hypothesis of the research is accepted. Also, based on the results of the second hypothesis, there is a significant relationship between financial anxiety variables and monetary disorders. In addition, Spearman correlation coefficient is positive and between 0.3 and 0.6, which indicates a positive and moderate relationship between variables. The second hypothesis is accepted and finally the third test showed that the measurement error is more than 0.05 and there is no significant relationship between monetary outcomes and monetary disorders variables and the third hypothesis of the research is not accepted. Therefore, based on the inherent origin of the variables of financial risk tolerance and financial anxiety, they have a positive and significant relationship with monetary disorders.

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