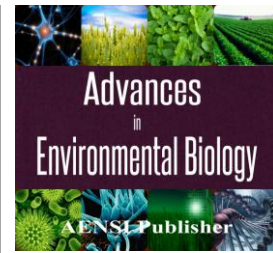




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Relation between Organizational Health and Organizational Commitment of Teachers of Primary Schools, District 2, Isfahan in the Academic Year 2012-2013

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ABSTRACT

The current study aims to determine the relation between organizational health and organizational commitment of the teachers of primary school, district 2, Isfahan in the academic year 2012-2013 using descriptive method of correlation type. The statistical society of this study is all the teachers of district 2, Isfahan in the academic year 2012-2013 that are 676 people. Out of this number, a group of 245 teachers were selected to participate in the current study using randomly classified sampling method proportionate to the volume and Cochran's sample volume formula. The used tools were two questionnaires including a standard questionnaire of organizational health by Hoy *et al.*, 1998 and another standard questionnaire of organizational commitment by Allen and Myer, 1990. The external validity of the two questionnaires was approved by some teachers of primary schools through an introductory application. The reliability of the questionnaires was also estimated using Cronbach's Alpha Coefficient that was 0.78 for the questionnaire of organizational health and 0.81 for the questionnaire of the organizational commitment. The data analysis was made at two descriptive and inferential statistical levels (Pearson correlation coefficient, stepwise regression and multivariate analysis of variance test). The results of the study showed that there is a positive and significant relation between organizational health and organizational commitment of teachers. Among the variables under study in regression, the best predictor of organizational commitment through organizational health was 'morale'. The result of analyzing the main hypothesis of the research was that the organizational health is not capable to predict the organizational commitment of the teachers. Regarding the demographical variables among the respondents' scores, there is not a significant difference between organizational health and organizational commitment. There was a meaningful difference among the respondents' scores of organizational health only in one case on the basis of the academic degree.

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INTRODUCTION

Parsonouz defines a healthy organization as follows: "All the social systems should adapt themselves with the surrounding environment for survival and development, and mobilize the relevant sources to achieve their objectives. They should coordinate and harmonize their activities and create incentive in their staff. This will guarantee their health [9]. The schools can fulfill the critical duty on their burden in the best possible, if the organizations are healthy and dynamic. A healthy organization are where the individuals go to work enthusiastically and are proud of working in that organization as far as the society is concerned. In fact the organizational health has a remarkable impact on effectiveness of every system as far as physical, psychological, security, attachment, qualification, knowledge appreciation, expertise and personality of beneficiaries, development of abilities and fulfillment of duties by their trans-systems are concerned (Jahed, 2007). Organizations are actually the main basis of the current society and management is the most important factor in the living, growth, promotion and or death of organizations. It is undoubtedly the principals' responsibility to guide the movement from the existing situation to the desirable situation as far as the organizational objectives are concerned. On the other hand, the vast changes throughout the world have made the organizations face several problems and changes to reach their objectives on daily basis. These changes caused new daily developments regarding the management theories so that it could be acknowledged that during the 20th century

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hundreds of theories were presented in the area of management. The remarkable point in all these theories is the emphasis on the important role of management and the efficient man power of the organization to reach the organizational objectives, and emergence of this point of view regarding the role of management in organization has led to several studies and researches in the area of factors relevant to organization's management and leadership because the staff feel that they are more accepted by the organization and are involved in organizational activities when a desirable management is in place and in this way they feel respected and as a result job satisfaction and staff cooperation with the management improve [8]. A healthy organization provides its staff with the required facilities to adjust themselves with complicated and difficult situations. Assessment of an organization's health is not easier than assessment of a family's health. When an organization is healthy, the problems are transient, but when an organization is unhealthy, the problems prevail and affect the organization intensively [10]. The principals' role is the main factor to create and promote the level of health at schools. The principals at schools have duties that they have to understand the organizational roles, interpersonal relations and school objectives clearly in order to fulfill them and try to meet the requirements of school members and customers and to enable the school organization to control the destructive forces toward the main objectives of the organization by a successful treatment, and to guarantee the usefulness and survival of the school by materializing the school objectives [3]. There are a lot of reasons why the organizations should increase the organizational commitment of their individuals: Firstly organizational commitment is a relatively new concept and is generally different from job attachment or satisfaction. Secondly, the researches have shown that organizational commitment is in connection with consequences such as job satisfaction, presence, performance and inclination to leave service [4]. Knowing the organizational health situation not only is important as far as understanding of the work conditions and its dynamism is concerned, but also predicts the effectiveness of organization, the professional development of the staff, organizational commitment, humane inclination of the staff and the staff's trust in each other. The dimensions and indexes of organizational health in organizations promote the organizational environments and this qualitative and quantitative development and progress could lead to the overall growth and reproduction of society. Study and research in the area of organizational health could help select, attract, use and employ qualified principals. Knowing organizational health situation clarifies the shortages, strong and weak management points, necessary intellectual and physical abilities of principals, etc. and when possible helps the affairs of organizations be sorted scientifically and expertly and prevents taking inefficient actions. To optimize and improve the situation of organizations, the dimensions of organizational health have to be known and promoted [6]. Since schools are the most important social organizations and their significant responsibility is to educate and the basis to start educating the students in the first stage is educating them in the primary schools and as the teachers play the most important and fundamental source of Department of Education from the viewpoint of the role that they have in materializing the objectives of the school and educational system, there is no doubt that low level of organizational health of the schools will have deep impact on materialization of the objectives of the educational organizations and weaken the teachers' diligent morale and waste financial resources and educational facilities and exhaust the human workforce and reduce the teachers' organizational commitment. The mentioned cases will pave the ground for negative consequences in the educational system among which exclusion of efficient teachers, reduction of the morale and productivity and increase of undesirable job changes, resignations and loss of work force could be named. Thus considering what was said, this study aims at investigating the organizational health of schools in the areas of structure, caution, support for resources, morale, scientific emphasis and institutional uniqueness and organizational obligation of the teachers with the dimensions of emotional commitment, ongoing commitment and normal commitment so that by determining the relations among these variables and the reported cases, it could help identify the weak points of principals' performance who are the main decision-makers at schools and provide suitable applied suggestions to improve the organizational health of schools, to remove the existing shortcomings, to create suitable organizational environment, to promote efficiency of the human workforce and to increase the organizational productivity of teachers. Also the school principals could adopt these results on their agenda and try to establish indexes of organizational health in their schools, increase the organizational commitment of the teachers of their schools and to improve their performance within the framework of the duties that they hold. In this way, the teachers' understanding of their performance will also improve and the costs spent on education will not be wasted. Considering the above-mentioned, the researcher decided to conduct a study to investigate the organizational health and organizational commitment of teachers of primary schools of district 2, Isfahan to inform the authorities of the Department of Education of the impact of organizational health on organizational commitment of the teachers.

Zahed Babolan, 2007 conducted a study under the title of 'Study of relation between organizational health and organizational commitment of teachers of high schools for boys of Ardebil'. This study was conducted to investigate the relation between the understood organizational health by the teachers and their organizational commitment in high schools of Ardebil province. Organizational health in this study consists of seven dimensions of institutional uniqueness, influence of principal, caution, structure, support for resources, morale

and operational scientific emphasis. To assess the organizational commitment of principals, the three dimensional model of Allen and Meyer, 1990 was used. The results showed that there is positive correlation between the organizational health, its seven-fold dimensions and organizational commitment and its three-fold types. The high schools that have high organizational health, have more committed teachers. Among the dimensions of the organizational health, morale, scientific emphasis, principals' influence, support for resources, structure, they have the ability to predict organizational commitment and 40% of the variance of organizational commitment is described by changes of these five dimensions. Among the three-fold levels of organizational health, the technical and administrative level can predict organizational commitment. Among the predictor variables, the influential share of principal, morale and support for resources is more than others in dimensions of organizational health and technical level of the levels of organizational health to predict organizational commitment.

Jafari, Mohammadian and Hosseinpoor, 2011 found out in a study under the title of 'relation between organizational health and organizational commitment in the staff of educational hospitals selected by University of Medical Sciences of Jondishapour of Ahwas' that there is a significant and positive relation between the organizational health, some of its dimensions (principals' influence, support for resources, scientific emphasis and morale) and organizational commitment, but there is not a significant relation between other dimensions of organizational health (institutional uniqueness, caution and structure) and organizational commitment. In addition, the scientific emphasis dimension in organizational commitment has the highest correlation coefficient and the caution dimension in organizational commitment has the lowest correlation coefficient. They found out that there is a significant relation between organizational health and organizational commitment in the staff of hospital and this makes them feel more loyal to their organization to take step toward materializing the organizational objectives.

Patel, 1999 conducted a study to investigate the relation between organizational health and organizational commitment among the research staff. The results of his research showed that there is a positive and significant relation between organizational health and organizational commitment [1].

Tsui *et al*, 2001 showed in his study under the title of 'relation between understood organizational commitment and organizational health and personal characteristics of the teachers of primary school' that there is a significant relation between morale and organizational commitment.

Nir, 2002 found out in a study under the title of 'organizational health of schools and its relation with teacher's commitment' that in contrary to variables of job control and individual characteristics, school health, the main predictor variable predicts the teachers' commitment and that teachers in healthy schools understand commitment to school and high commitment to students in comparison with unhealthy schools. In addition, among the dimensions related to organizational health, structuring refers to the principals' behavior to specify relations, work links with teachers and job expectations from them, and the most important predictor variable is the predictor of all types of commitment.

Saurabh and Mishara, 2011 studied the role of tension and organizational health to predict organizational commitment in the staff of Rail Road Company. They found out that work tension has a reverse dependence on organizational commitment. In addition there is a positive dependence between organizational health and organizational commitment.

Research Hypotheses:

1. There is a significant relation between institutional uniqueness and organizational commitment of teachers.
2. There is a significant relation between structure and organizational commitment of teachers.
3. There is a significant relation between caution and organizational commitment of teachers.
4. There is a significant relation between support for resources and organizational commitment of teachers.
5. There is a significant relation between morale and organizational commitment of teachers.
6. There is a significant relation between scientific emphasis and organizational commitment of teachers.
7. There is a significant relation between organizational health and organizational commitment of teachers of schools.
8. Organizational health could predict organizational commitment.
9. There is a significant difference between respondents' views in organizational health according to demographical variables of gender, age, history of service and academic degree.
10. There is a significant difference between respondents' views in organizational commitment according to demographical variables of gender, age, history of service and academic degree.

Research Method:

The descriptive research method is of quantitative type. The statistical society of the research is all the teachers of schools of district 2, Isfahan in the academic year 2012-2013 of about 676 people. The volume of the sample was determined to be 245 people using Cochran sample volume formula. The used sampling method in the current study was randomly classified sampling proportionate to the volume. The used tools were two

standard questionnaires of organizational health used by Hoy *et al*, 1998 in a five-graded spectrum (very little, little, never, much, very much) and the second standard questionnaire of organizational commitment used by Allen and Meyer, 1990 in a five-graded spectrum (very little, little, never, much, very much). The external validity of both questionnaires was approved by some teachers of primary schools through an introductory application. The reliability of the questionnaires was also estimated using Cronbach's Alpha Coefficient that was 0.78 for the questionnaire of organizational health and 0.81 for the questionnaire of the organizational commitment. The data analysis was made at two descriptive and inferential statistical levels (Pearson correlation coefficient, stepwise regression and multivariate analysis of variance test).

Research Findings:

First hypothesis: There is a significant relation between institutional uniqueness and organizational commitment of teachers.

The findings of table 1 show that there is not a significant correlation coefficient between institutional uniqueness and organizational commitment of teachers, i.e., there is not a significant relation between institutional uniqueness and organizational commitment ($r = -0.045$).

Second hypothesis: There is a significant relation between structure and organizational commitment of teachers.

The findings of table 1 show that there is a significant correlation coefficient between structure and organizational commitment of teachers, i.e., there is a significant relation between structure and organizational commitment ($r = 0.360$).

Third hypothesis: There is a significant relation between caution and organizational commitment of teachers.

The findings of table 1 show that there is a significant correlation coefficient between caution and organizational commitment of teachers, i.e., there is a significant relation between caution and organizational commitment ($r = 0.318$).

Fourth hypothesis: There is a significant relation between support for resources and organizational commitment of teachers.

The findings of table 1 show that there is a significant correlation coefficient between support for resources and organizational commitment of teachers, i.e., there is a significant relation between support for resources and organizational commitment of teachers ($r = 0.322$).

Fifth hypothesis: There is a significant relation between morale and organizational commitment of teachers.

The findings of table 1 show that there is a significant correlation coefficient between morale and organizational commitment of teachers, i.e., there is a significant relation between morale and organizational commitment of teachers ($r = 0.379$).

Sixth hypothesis: There is a significant relation between scientific emphasis and organizational commitment of teachers.

The findings of table 1 show that there is a significant correlation coefficient between institutional uniqueness and organizational commitment of teachers, i.e., there is a significant relation between institutional uniqueness and organizational commitment of teachers ($r = 0.317$).

Seventh hypothesis: There is a significant relation between organizational health and organizational commitment of teachers of schools.

The findings of table 1 show that there is a significant correlation coefficient between organizational health and its parameters (caution, structure, support for resources, morale, scientific emphasis and penetrability) and organizational commitment of teachers, i.e., there is a significant relation between organizational health and organizational commitment of teachers ($r = 0.371$).

Table 1: Correlation coefficient between organizational health and its parameters and organizational commitment of teachers .

Teachers' organizational commitment		Criterion variable	
Level of significance	Square of correlation coefficient	Correlation coefficient	Statistical index of predictor variable
0/001	0/138	0/371**	ORGANIZATIONAL HEALTH
0/492	0/002	-0/045	INSTITUTIONAL UNIQUENESS
0/001	0/101	0/318**	CAUTION
0/001	0/130	0/360**	STRUCTURE
0/001	0/104	0/322**	SUPPORT FOR RESOURCES
0/001	0/144	0/379**	MORALE
0/001	0/100	0/317**	SCIENTIFIC EMPHASIS
0/001	0/110	0/331**	PENETRABILITY

$p < 0.05$

Eighth hypothesis: Organizational health could predict organizational commitment.

According to results of the stepwise regression analysis, there is a significant relation between morale and penetrability and organizational commitment. On this basis, in the first step, the morale index explains 14.4% of organizational commitment variance and in the second step, the morale and penetrability explains 16.9% of organizational commitment variance.

Table 2: Multivariate correlation coefficient table of organizational health and organizational commitment .

Level of significance	F coefficient	Square of adjusted multivariate correlation coefficient	Square of Multivariate correlation coefficient	Multivariate correlation coefficient	Predictor variable	Statistical index of criterion variable	
0/001	40/035	0/140	0/144	0/379	MORALE	First step	Organizational commitment
0/001	24/111	0/162	0/169	0/411	PENETRABILITY MORALE	Second step	

p<0.01

Table 3: Table of B indexes to predict the dimensions of organizational health and organizational commitment

Level of significance	t coefficient	Standard B index	Non-standard B index - Criterion error B		Predictor variable	Statistical index of criterion variable	
0/001	6/327	0/378	0/097	0/611	MORALE	First step	Organizational commitment
0/001 0/008	4/123 2/675	0/285 0/185	0/111 0/175	0/458 0/468	PENETRABILITY MORALE	Second step	

p<0.01

Table 4: Table of external variables in regression for prediction of organizational commitment and dimensions of organizational health.

Level of significance	T amount	B	Scale	SECOND STEP
0/291	1/059	0/066	INSTITUTIONAL UNIQUENESS	
0/677	0/417	0/036	CAUTION	
0/233	1/195	0/113	STRUCTURE	
0/618	0/500	0/046	SUPPORT FOR RESOURCES	
0/415	-0/816	-0/088	SCIENTIFIC EMPHASIS	

p<0.05

Ninth hypothesis: There is difference between the respondents' views in organizational commitment considering the demographical variables (gender, age, service history, academic degree). The findings show that there is not a significant difference between organizational commitment according to gender, age, history of service and educational degree. According to the researcher, this indicates that the organizational commitment of individuals mostly refers to the individual's personality variables and aspects in comparison with demographical variables, although increase of experience, information and views of individuals could affect the organizational commitment.

Table 5: Multivariate analysis of variance of scores of organizational commitment considering the demographical variables (gender, age, history of service, academic degree).

Level of significance	F	Average squares	Degree of freedom	Total squares	Resource
0/372	0/801	48/713	1	48/713	Gender
0/419	0/947	57/638	3	172/913	Age
0/661	0/415	25/235	2	50/470	Work History
0/577	0/660	40/178	3	120/534	Academic degree

Tenth hypothesis: There is difference between the respondents' views in organizational health considering the demographical variables (gender, age, service history, academic degree). The findings show that there is not a significant difference between organizational health according to gender, age, history of service and educational degree, but the scores of organizational health are significant according to academic degree. The

presented follow up test shows the difference among the groups. Also the results indicated in this table show that there is a significant difference among scores of organizational health of people holding Bachelor's degree, secondary education certificate and Master's degree. There is also a significant difference between scores of organizational health of people holding Associate's degree and Master's degree.

Table 6: Multivariate analysis of variance of scores of organizational health according to demographical variables (gender, age, service history, academic degree).

Level of significance	F	Average squares	Degree of freedom	Total squares	Resource
0/058	3/631	733/939	1	733/939	Gender
0/191	1/599	323/190	3	969/571	Age
0/168	1/801	364/077	2	728/155	Work History
0/007	4/197	848/285	3	2544/856	Academic degree

Discussion and Conclusion:

Findings showed that there is a significant and positive relation between organizational health and organizational commitment of teachers. The results of analysis of the main hypothesis of the study showed that organizational health could predict the organizational commitment of teachers. Regarding the demographical variables, there is not a significant difference between the respondents' scores in organizational commitment and organizational health. There was a meaningful difference among the respondents' scores of organizational health only in one case on the basis of the academic degree. There is a positive correlation between the results of the study and the study of Zahed Babolan, 2007 based on organizational health and its seven-fold dimensions and organizational commitment and its three-fold types. Researches by Jafari, Mohammadian and Hosseinpour, 2011 indicated that there is a significant and positive relation between organizational health and some of its dimensions (influence of principals, support for resources, scientific emphasis and morale) and organizational commitment, but there is not a significant relation between other dimensions of organizational health (institutional uniqueness, caution and structure) and organizational commitment. In addition, scientific emphasis has the highest correlation coefficient with organizational commitment, and caution has the lowest correlation coefficient with organizational commitment. Research by Patel, 1999 indicated the relation between organizational health and organizational commitment [1]. Researches by Tsui *et al*, 2001 indicate that there is a significant relation between morale and organizational commitment. The study by Nir, 2002 indicates that school health is the main predictor factor of school health and is the main predictor variable to predict the teachers' commitment. Teachers in healthy schools are found to have commitment to schools and high commitment to students in comparison with unhealthy schools. Studies conducted by Saurabh and Mishra are in the same direction and indicate that organizational health has a positive dependence on organizational commitment. The officials of Department of Education are suggested to bear in mind that the school principal has to remind the members of the board of directors of scientific committee of the school regularly of planning for change in order to improve the school health and try to cooperate with them in this direction. It goes with out saying that this issue increases the organizational commitment of teachers in comparison with the school's objectives and policies.

Considering the lack of significant difference in organizational commitment of teachers regarding the demographical variables and the necessity and need of organizational commitment to fulfill duties and the sensitivity of this issue in educational centers where the least negligence might have irretrievable damages and on the other hand, the trust of most people on educational system, it is suggested to pay attention to individuals' personality aspects, particularly work and organizational commitment to attract and select individuals by holding personality tests or personality interviews using experienced and qualified people.

On the other hand, considering the vague nature of teachers' professional status in non-governmental schools where their salary and benefits are different from their salary and benefits in governmental schools, it is a must to consider this point when comparing organizational commitment and organizational health in governmental and non-governmental centers.

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