

## Investigating Organizational Health and Its Dimensions at an Organizational Level: A Research Study on Views of Directors

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### Abstract

The organizational health approach comprises systematic processes developed for clearly specified goals, responsibilities, and evaluation stages in an organization's operation, considering administrative functions at the organizational level. These processes act as feedback mechanisms to improve attitudes and opinions toward the culture and practices in an organization through organizational health dimensions, thus paving the way for a healthy organizational structure, which is crucial for organizations to survive and have a good position in their sector. This study investigates organizational health and its dimensions at the organizational level through an interview survey. Interview forms were given numbers, and interviews were conducted with 43 directors. The questions were qualitatively inclined; they were open-ended and were aimed at understanding the original variables. The views of directors were determined through 329 expressions including their comments. These expressions were grouped and analyzed extensively. The organizational health approach and its dimensions enable a healthy structure at the organizational level. Consequently, organizational health was determined to be a factor impacting the performance and activities of both employees and the organization.

**Keywords:** Organizational Health, Dimensions of Organizational Health, Organizational Health System, Organizational Level, Organization Structure

**JEL Codes:**M10, M19, L20, L29

### 1. Introduction

Change, development, and competition get increasingly more intense in the context of organizational health at present, and employee behaviors and the healthy administration of organizations become critical for the survival of organizations. Organizations need a healthy organization and management structure to display the characteristics of a flexible organization structure by adapting to the change that emerges in this context of competition. Studies on organizational health have recently started to attract more attention in terms of the potential effect of work practices and conditions on employees. This led to numerous studies that covered the relationships between the characteristics of labor and employees and organizational health (Cass et al.,2003).

In this context, the concept of organizational health has appeared in the literature on organizational behavior, especially in recent years, and researchers from this field proposed that the organizational health approach can be used to determine the indicators of organizational success (Köseğlu & Karayormuk,2009). Therefore, the concept of organizational health, which constitutes the foundation of the present study, has become an essential concept that started to be used in the fields of organizational behavior and occupational psychology (Polatçı et al.,2008). Today, organizational health has become a concept that deserves excessive emphasis to create a healthy organizational structure, particularly at the organizational level. In this regard, researchers dealing with organizational behavior stated that harmony, coordination, and collaboration between employees and employers, as well as the behaviors of both parties toward each other, are critical factors for organizational health (Aytaç,2003). The concept of organizational health is one of the organizational theories that received attention from theorists and practitioners from all over the world, particularly from the USA, in the past 20 years (Gül,2007).

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The concept of organizational health was covered in various fields of study in different disciplines. In this context, while educators used the concept of organizational health to explain the organizational and administrative structure of schools, industrial psychologists approached it as a positive concept that is constituted by psychological and physiological conditions and that ensures productivity, job satisfaction, efficiency, and organizational commitment and belonging (Tutar,2010). Based on the form of organizational health used in the field of education, we can assume that as discussed in the relevant literature, the quality of the organizational setting is a vital factor in the development of employee commitment and that such a contextual factor on employees generally depends on the manner in which they perceive this setting. Next, we can argue that perceptions can influence attitudes, commitment, and behaviors among these employees. Therefore, how employees perceive the organizational setting or organizational health is an essential source of data that reflects the quality of their work life. In fact, the organizational health of any organization is a measure of employee perception concerning various aspects of the organizational setting (Tsui & Cheng,1999). Conversely, the concept of organizational health was defined in medicine as the physical and mental health of employees in an organization, and therefore, the focus was on the physical, medical, and security conditions of workplaces (Ardıç & Polatçı,2007). The researchers studying organizational behavior maintain that the possible harmony and collaboration between employees and employers and the behaviors of these parties toward each other define the healthy structure, or organizational health within the organization (Aytaç,2003).

The primary purpose of efforts to determine organizational health is to detect current structures as well as prepare and implement preventive or reformatory plans based on the results obtained (Polatçı et al.,2008). Therefore, the development of the attitude required for change in organizations can be measured only by the self-renewal process of organizational health, fundamental to the analysis of which is how the effect is received by the organization. To make such a judgment in this field, it should always be determined as to whether the effect process exists. Therefore, the process should be dealt with through comparison in a clear and plain manner (Cicchelli,1975). Besides, measuring organizational health is not easier than measuring how healthy a family relationship is. When an organization is healthy, problems serve only as sources of motivation; however, when an organization is unhealthy, problems with a significant effect on the organization emerge. Therefore, understanding organizational health conditions is essential not only in terms of working conditions and dynamics but also as the determiner of developing the organizational efficiency and performance of employees, organizational commitment, humanistic tendencies of employees, and their mutual trust. In this respect, the presence of the dimensions and indicators of organizational health improves the organizational setting. The resulting qualitative and quantitative development might lead to extensive growth and improvement (Bahramian & Saeidian,2013). In this study, organizational health was first investigated at the conceptual level, and the working scope of the organizational health system was explained in detail. Next, the dimensions of organizational health were presented with their main characteristics. Last, in the research section of the study, the views of directors were taken to determine the dimensions depending on which organizational health has effects at the organizational level. In this context, the findings obtained by analyzing the views of directors were presented. In the conclusion section, the results obtained from the findings of the study were evaluated, and various suggestions to build healthy structures by enhancing organizational health at the organizational level were made.

## **2. The Concept of Organizational Health and the Operation of the Organizational Health System**

The concept of organizational health first appeared in the USA in the 1960s, and it dates to the investigations of researchers in the field of behavioral sciences on how employees behave in the work environment within the organization. In this context, earlier studies associated the content of work with individual well-being in the context of efficient organization. Argyris (1958, 1964) questioned an organization's ability to meet needs of employees while also being competitive. McGregor's (1960) definitions of Theory X (authoritarian management) and Theory Y (democratic management) put forward that the role of organizational setting was critical in determining efficiency, as well as affecting employee potential. Herzberg et al. (1959), Maslow (1965), Porter and Lawler (1968), and Vroom (1964) investigated the interactions between individual motivation and performance. These theories underlay the numerous intervention studies that aimed to develop various aspects of organizational health in general (Shoaf et al.,2004). The concept of organizational health was used first by Miles in 1969 as a metaphor to investigate school climate (Tsui & Cheng,1999).

In this context, organizational health was considered to be a highly durable, second-degree cluster of system characteristics tending to exceed short-term efficiency. In this regard, a healthy organization does not only survive within its environment but improves, aims to survive, and continuously develops capabilities to deal with problems in the long term. Within a healthy organizational structure, short-term operations might take place efficiently or inefficiently in any period, but survival, dealing with problems at a sufficient level, and growth continue.

A continuously inefficient organization is probably not healthy, and it can be said that a balanced organization is healthy, efficient, and able to deal with problems in the short term (Miles,1965). Although it is defined loosely, the concept of organizational health is used widely. In this framework, the concept of organizational health is a measurement instrument that can reveal the positive images of the organization independently of the indexes that can be used to measure organizational health. In the context of organizational health, an organization can be evaluated as being financially, strategically, structurally, culturally, or behaviorally healthy. Therefore, a healthy organization is considered to be an organization that contributes to organizational performance at a prominent level in terms of its structure, culture, and management processes (McHugh et al.,2003).Directors have many job-related tasks, and they should check whether their organizations have a healthy structure, by looking at the big picture. Organizational health, which is a novel concept in the literature on organizations, involves not only an organization's ability to work efficiently but also its ability to grow and develop. For years, directors discussed over organizational culture, organizational stress, organizational commitment, ethics, and employee morale. Now, the concept of organizational health, with its unique approach, entails all these ideas and enables a better overview of organizational health, i.e., the big picture (Lyden &Klinge,2000).

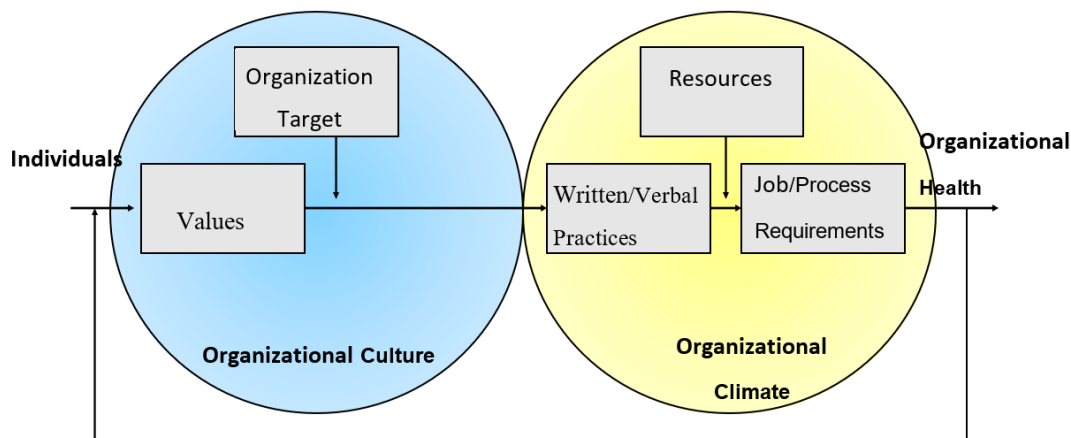
Therefore, it is possible to say that the concept of organizational health investigates issues such as organizational stress, organizational commitment, organizational culture, and ethics under one roof and that in this context it looks at organizational health from a general perspective. At the conceptual level, organizational health has become an issue that is considered to be worthy of investigation in the literature on various fields. In this regard, teachers use the concept of organizational health as a significant source of data reflecting working life in order to understand the relationships in the school setting that affect attitudes, commitment levels, and behaviors (Tsui & Cheng,1999). On the other hand, healthcare professionals use the concept of organizational health to evaluate the physical and mental health of individuals in the organization, the suitability of the health and security of the organization, and the physical conditions for employees. Those interested in organizational behavior investigate organizational health to understand the harmony between employees and employers and the effect of the behaviors of these parties toward each other on the organization (Aytaç,2003; Gül,2007).The concept of organizational health considers the variables of employee well-being and organizational efficiency together by developing an organizational strategy to be financially successful, which is because financial success at the organizational level and a healthy organizational setting are considered to be related concepts. In this regard, at the administrative level, job, and health are considered to be a choice between efficient work practices and safe and healthy practices (Shoafet al., 2004:81).

All the concepts of “healthy organization,”“healthy working organizations,” and “organizational health” express the idea that employee well-being and organizational efficiency can be supported by a cluster of shared job and organizational design characteristics. Therefore, this concept represents the significant divergences from the conventional models that aim to enhance employee health or organizational efficiency (Murphy & Cooper,2000). In this regard, organizational health must possess skills that can ensure all administrative functions in an organization and display characteristics that are open to development. Although the current literature is weak in making a brief but concise definition of organizational health, a healthy organization is generally considered to be an organizational structure that contributes to the organizational performance at a high level in terms of its structure, culture, and administrative processes (McHugh et al.,2003). Broadly considering the definitions of organizational health at the conceptual level, a focus from the general to the specific is observed. With regard to this, it can be said that the concept of organizational health has developed together with the approaches that are based on business performance and both organizational and employee health (Köseğlu &Karayormuk, 2009). The current literature includes different concepts cultivated as resulting from the use of various metaphors in earlier studies on organizational health. Within this scope, some researchers used organizational health to express organizational climate in terms of the working environment. Thus, the concept of organizational health was used in schools as a metaphor to measure and evaluate organizational climate (Gül,2007; Polatçı et al., 2008). The concept of organizational climate appeared in the late 1950s and was first used as a general concept to express the permanent quality of organizational life. Later, the concept of organizational health was described as a metaphor to conceptualize the climate of a school. Therefore, the organizational health of a school was perceived to be a useful structure that defines the interpersonal relationships of students, teachers, and directors at the school (Tsui & Cheng, 1999).

According to Childers (1985), organizations may be healthy or ill just as the people that constitute them. Thus, unhealthy organizations are labeled non-functional, whereas healthy organizations are labeled functional. Therefore, the answer to the question of whether an organization is regarded as healthy depends on its ability to achieve its objectives and targets.

In this regard, it can be argued that the answer to the question of whether the objectives that reveal the reason for which the organization survives are realized depends on the organization's being healthy (Uras,2000; Buluç,2008). A healthy organization is an organization that does not only survive within its environment but also continues to grow and develop in the long term. Any organization can be efficient or inefficient at certain periods, but healthy organizations avoid permanent inefficiency. In this context, healthy organizations generally reflect the task needs of a social system, define the essential needs of the organization, and possess the necessary setting and conditions needed for growth and development in line with the characteristics of the organization (Hoy et al.,1991). Therefore, a healthy organization optimizes both the health and safety of employees and organizational efficiency by constructing an organizational setting that involves organizational culture and climate practices (Gül,2007). In addition, a healthy organization fulfills an important mission and at the same time enables employees to learn, progress, and develop at the organizational level (Dive,2004). In general, healthy organizations can be regarded as organizations that are free from the factors that may lead to employee alienation, where directors are satisfied with their approach to management, and where employees are satisfied with the work they do (Tutar,2010). There are several reasons for which an organization is unhealthy. Accordingly, the main characteristics of unhealthy organizations can be listed as mistaken strategies, weak organizational design, unclear and unconnected strategies, the lack of an organizational culture, and insufficient employee quality (Dive,2004).

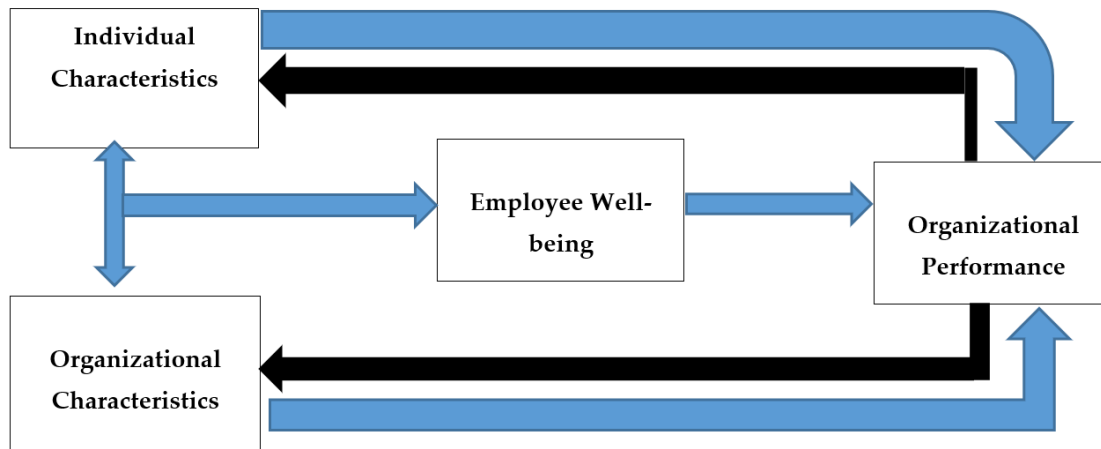
In this context, we can say that whether an organization realizes its objectives and targets that determine its *raison d'être*, employee satisfaction, the harmony between the objectives of the organization and employees, and increased performance, are the primary characteristics that turn the organization into a healthy organizational structure. In conjunction with all of these, Rosen et al. (1991) stated that a healthy organization, in general terms, shows integrity comprising main values and characteristics such as self-realization, discovery, and development, being respectful to individual differences, developing a spirit of partnership, prioritizing health and well-being, and embracing the value of flexibility and resistance (Kurgun & Bağran,2013). Organizational health is a complex system that shows integrity at the conceptual level and manages the work order through variables. This system expresses a structural order that enables the proper functioning of organizational health. The model below aims to present the operation system of organizational health. In this context, Figure 1 presents the model for the operation system of organizational health.



**Figure 1:**A Model for the Operation System of Organizational Health (Shoaf et al.,2004, p. 88).

Determining healthy working in a way that is similar to biological health depends on a system of interrelated components that work together and seek balance. Quantifying the resulting business system balance is necessary to evaluate organizational health. Figure 2 presents the operation model of organizational health that explains the relationships among the elements of the organizational setting. The values and targets of the organization enable the construction of business practices and policies. Moreover, the processes determine the content of the work, in other words, the mental, physical, and environmental demands of employees. The resources act to both encourage the well-being of employees and balance the negative effects of demands on employees. Thus, they encourage the successful realization of organizational targets. As a result of all of these, they determine the organizational health status based on the relationships between the components of the business system (Shoaf et al., 2004).

In this context, the operation system of organizational health can enable us to make an evaluation on the organizational structure in general terms and on the basis of the objectives and targets the organization determined. At the same time, Figure 2 presents the flow diagram that shows the work order of the organizational health system.



**Figure 2:**Organizational Health Flow Diagram (Murphy & Cooper, 2000).

Considering the flow diagram for organizational health in Figure 2, one of the most efficient ways of improving organizational health is including employees in any organization in a comprehensive and systematic evaluation of current business practices and connecting this evaluation to continuous enhancement programs that focus on the well-being and performance of employees. This is only possible when the qualities of an employee are well known. Besides, for the system to be effective, employees should be integrated into the operational procedures of the organization and be connected to the reviewing and decision-making processes of the organization at all levels. When this happens, employee well-being and organizational efficiency can be utilized as powerful instruments in learning about and analyzing organizational health (Murphy & Cooper, 2000). As a result of all of these, organizational health can be defined as the development of techniques required for organizations to adapt to their environments, know themselves, and continue their existence within their environment (Garda, 2011). At the same time, organizational health also bears the characteristics of a system used to realize the goals determined historically to optimize performance and overall well-being. In this context, organizational health defines the components of a system in detail and explains the relationships between them (Shoaf et al.,2004). That is to say, it is possible to view organizational health generally as a performance and management process that is capable of directing development and change in an organization (Köseğlu & Karayormuk, 2009).

There are views in the literature on organizations that healthy organizations are structures that are more flexible and change and adapt to environmental changes more easily. It is argued that a change plan designed in this regard depends more on organizational health than the sufficiency of the plan in terms of organizational efficiency (Uras, 2000). Looking at a healthy organizational structure from a general perspective, this shows that organizational health and the organization's objectives and goals are interconnected. Therefore, organizations aim to realize their main objectives and goals in the face of the continually advancing technology and changing customer needs in today's competitive environment. In this context, it can be said that the extent to which an organization is successful in realizing its objectives and goals is directly related to organizational health (Ardıç and Polatçı, 2007). Thus, a healthy organization structure provides employees with the necessary resources both to achieve its goals and adapt itself to such cases in the face of challenging and complex situations (Bahramian & Saeidian, 2013).

### 3. Dimensions of Organizational Health

Among the studies conducted until now within organizational health research, two approaches that are generally used to measure organizational health stand out. The first is the dimension of organizational health developed by Miles (1969), and the other is the dimension of organizational health developed by Hoy et al. (1987). The model proposed by Miles was later criticized by Hoy et al.(1991), and a new theoretical framework model was proposed to analyze organizational health (Tutar, 2010). Besides, combining the characteristics of healthy organizations presented by Miles and the problems and techniques presented by Etzioni should solve all problems, in other words, making the works of Miles (1969), Parsons et al. (1953), and Etzioni (1975) more functional. Hoy et al. (1987) argued that these considerations should have control over the organization.

As a result, Hoy and Feldman implemented these ideas in schools, and Hoy et al. came up with the component of organizational health after conducting research (Henderson, 2007).

### 3.1. Miles' Organizational Health Dimension

The concept of organizational health, a model first developed by Miles in 1969, was first used to measure the organizational health of educational institutions, and it was later implemented with success in other organizations (Polatçı et al., 2008). Although the model developed by Miles was used to measure the organizational health of schools, its adaptability allows it to be used in all organizational structures thanks to its structural content (Tutar, 2010). In this context, Miles (1969) was the first person to carry the concept of organizational health into schools. He theoretically and conceptually explained that healthy organizations not only survive in their environment but also develop and grow for a long time. Miles assumed that an organization would meet the needs in three main dimensions: task needs, maintenance needs, and growth and development needs. Miles also argued that healthy organizations have 10 common characteristics. With regard to this, he made a classification explaining which characteristics can meet which needs (Henderson, 2007).

#### 3.1.1. Dimension of Task Needs

Organizations and as a matter of fact all social systems have specific problems and obligations. Healthy organizations, just as healthy people, encounter specific problems in the face of certain situations. Their problem-solving adequacy explains how organizations deal with difficulties. Argyris (1964) stated that efficient systems solve problems with minimum difficulty. In this process, problem-solving mechanisms do not get weak, but become stronger. Thus, Miles (1965) argued that healthy organizations are characterized by goal focus, communication adequacy, optimal power equalization, resource utilization, cohesiveness, morale, innovativeness, autonomy, adaptation, and problem-solving adequacy. These 10 characteristics of a healthy organization are summarized under three dimensions in the tables (Table 1, Table 2, and Table 3) below.

**Table 1:** Miles' Dimensions of Organizational Health—the Dimension of Task Needs (Hoy et al., 1991, p. 18).

<b>Dimension of Task Needs</b>
<b>Goal Focus:</b> Goals are reasonable to, clear for, and accepted by the members of the organization. At the same time, goals should be realistic and consistent with the demands of the environment.
<b>Communication Adequacy:</b> Communication involves relatively no breakdown; enables a good and quick perception of intra-organizational communication. Members of the organization possess the knowledge they need to work efficiently.
<b>Optimal Power Equalization:</b> The distribution of influence inside the organization is relatively equal. Subordinates can affect the upper ranks and perceive that the superiors can have the same influence.

#### 3.1.2. Dimension of Maintenance Needs

The maintenance needs that are related to the operation of the organization constitute the second dimension of organizational health. Proposed by Miles (1969), this dimension includes three characteristics. The first is resource utilization, which is related to efficiency in that the employees do not feel that their efforts are wasted. Therefore, at this stage, employees need to be somewhat satisfied with the work that they do and develop themselves in their fields. The second dimension relates to the presence of cohesiveness, which refers to the sense of belonging to the organization. The members should know what the organization represents and what role they have within the organization because the extent of organizational cohesiveness is revealed on the basis of this information. Last, the dimension of morale is a characteristic that revolves around individuals' feelings of well-being and satisfaction with the organization (Henderson, 2007).

**Table 2:** Miles' Dimensions of Organizational Health—the Dimension of Maintenance Needs (Hoy et al., 1991, p. 18)

<b>Dimension of Maintenance Needs</b>
<b>Resource Utilization:</b> The distribution of tasks among the employees in the organization is based on needs, and there is a balance between tasks and responsibilities. Accordingly, these needs and demands are consistent.
<b>Cohesiveness:</b> The members are influenced by the organization and want to stay in. They exert their influence within the organization collaboratively. Thus, members have a sense of belonging and show their commitment to the organization.
<b>Morale:</b> The organization displays a feeling of well-being and group satisfaction in general terms.

### 3.1.3. Dimension of Growth and Development Needs

Growth and development needs constitute the third and last need of a healthy organization. These needs are related to change in the organization. This dimension includes four characteristics. The first characteristic, innovativeness, is based on the description of the individual as innovative and the organization's developing new goals and procedures to achieve innovation. The next characteristic, autonomy, refers to an organization that is not passive, and on certain occasions, it is independent from, and not subject to, its environment. The organization has control over its condition and can command its control when necessary. The third characteristic of the dimension of growth and development needs is adaptation. In other words, the organization is capable of evolving based on the demands of the environment. Last, the fourth characteristic of a healthy organization is problem-solving adequacy. This characteristic refers to the ability of the organization to solve its problems effectively and to do no or little harm in the process (Henderson, 2007).

**Table 3:** Miles' Dimensions of Organizational Health—the Dimension of Growth and Development Needs (Hoy et al., 1991, p. 18)

<b>Dimension of Growth and Development Needs</b>
<b>Innovativeness:</b> A healthy organization invents new procedures, progresses toward new goals, becomes increasingly more different in time, and develops.
<b>Autonomy:</b> The organization is not passive to its environment. It displays some independence from the external environment on certain occasions.
<b>Adaptation:</b> The organization is capable of making several remedial changes in itself to grow and develop.
<b>Problem-Solving Adequacy:</b> The problems are solved with minimum energy, and the problem-solving mechanisms do not get weak but are protected and strengthened.

Miles stated that when any of these 10 dimensions of organizational health is not fully implemented, the problem related to that area will affect other dimensions, and as a result, a problem that affects the entire system would emerge (Ardıç & Polatçı, 2007). Besides, Engquist et al. (1998) proposed various environmental factors that can affect an organization's programs to develop its health and influence the participation of employees. These were listed as organizational management style, the type of industry, organization ranking, the size of the operation site, organizational structure, the extent of support from the upper management, incentives to participate in programs for developing healthy behaviors, improving health, or modeling healthy behaviors by the CEO, policies that strengthen healthy behaviors, employee autonomy, control over work activities, and the subcultures within the organization (Engquist et al., 1998). Parsons et al. (1953) stated that organizations should solve the four main problems of adaptation, goal attainment, integration, and latency to survive, grow, and develop. Etzioni (1975), later narrowed these four problems into two at a broader level as instrumental activities and expressive activities. Instrumental activities involve allocation and input, namely, adaptation and goal attainment. These activities are instruments that organizations utilize to adapt to the changes in the external environment and make fulfilling objectives easier. These instruments involve developing, communicating, achieving, and measuring the objectives. The examples of instrumental activities in an organization are generally the sources of success, efficiency, and performance. Expressive activities encourage the meaning of the establishment of the organization and involve integration and latency. Thus, they provide the organization with confidence and perfection by understanding the culture, values, and traditions of the organization. In an organization, such activities will transfer feelings of academic emphasis, collegiality, organizational commitment, and belonging to employees. At the same time, expressive activities create solidarity in an organization and promote a unique culture (Henderson, 2007).

### 3.2. Hoy's Organizational Health Dimension

Hoy et al. (1987) developed the organizational health inventory to measure organizational health. In this regard, organizational health refers to adaptable organizations with their technical, managerial, and institutional levels. In the framework of organizational health at the technical level, the focus was generally on issues such as morale, cohesiveness, trust, enthusiasm, support, academic press, order, and achievement. On the other hand, the managerial level was defined in terms of director behaviors, and at this level, the focus was on task- and achievement-oriented behavior, collegial and supportive behavior, the ability to influence superiors, and the ability to provide adequate resources. Last, at the institutional level, the focus was on the organization's ability to deal successfully with the forces outside of the organization (Hoy et al., 1987).

Hoy et al. (1987) initially reduced the 10 characteristics developed by Miles (1969) to measure organizational health at educational institutions to seven (Henderson, 2007). The dimensions of organizational health that were restructured by Hoy et al. (1987) were later supported by the works of Hoy et al. (1991). The stages of the organizational level that are critical at various levels are evaluated as the characteristics of the organization that meet the instrumental and meaningful needs of its social system (Hoy et al.,1991). In this context, the dimensions of organizational health are investigated through the seven dimensions below (Hoy et al., 1987;1991).

### 3.2.1. Institutional Integrity

Institutional integrity refers to the ability of the organization to deal with the environment in harmony and in a way that protects the managerial and organizational activities of the organization.

### 3.2.2. Principal Influence

The primary influence of the director of the organization is the ability to influence the actions of superiors. This way, the directors of the organization can influence the decisions of the top directors that they work under. It is possible to list the essential characteristics of organizational management as convincing the superiors, attracting more attention, and not being influenced by hierarchy.

### 3.2.3. Consideration

Consideration is a friendly, supportive, open, collegial, and basic behavior that the directors of the organization should be careful about with employees. The directors of the organization should pay special attention to these behaviors that underlie respect for the well-being and performance of employees.

### 3.2.4. Initiating Structure

Initiating structure involves the basic task- and achievement-oriented behaviors of the directors of the organization. Besides, work expectations, performance standards, and procedures are clearly expressed by the director of the organization.

### 3.2.5. Resource Support

Resource support means that an organization owns enough machines and equipment and can provide additional materials easily if required.

### 3.2.6. Morale

Morale refers to the shared sense of friendliness, openness, enthusiasm, and trust among the members of the organization. Also, the members of the organization like each other, their job, and the organization. They display tolerance and respect for each other and act in collaboration.

### 3.2.7. Academic Emphasis

Academic emphasis is related to the organization's search for perfection in the work to be done and the extent to which it is influenced by this. There are high but achievable organizational goals for employees. The organizational setting is orderly and serious, and the directors of the organization believe in the success of employees. In this regard, operations at the organizational level are maintained in an orderly and systematic way. Therefore, institutional integrity serves as an indicator of health at the organizational level. Principal influence, consideration, initiating structure, and resource support provide measures for the health of the management system. Last, morale and academic emphasis are health indices at the technical level. Each of these dimensions of organizational health is measured by a subtest of the organizational health inventory (OHI). Sample items for each subtest are presented in Table 4 (Hoy et al., 1987).

**Table 4:** Sample Elements for the Organizational Health Inventory (OHI)

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#### **INSTITUTIONAL INTEGRITY**

The directors of the organization are protected from societal and environmental demands that are not reasonable.  
The organization is defenseless against pressure from the external environment.  
Several changing environmental conditions might change the organizational policy.

#### **PRINCIPAL INFLUENCE**

The director can get what they want from their superiors and influence the decisions of superiors.  
The director works in harmony with superintendents.  
The director is impeded by the superiors.

#### **CONSIDERATION**

The director is friendly and approachable.

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The director behaves equally with all members of the organization.

The director pays attention to the recommendations made by the members of the organization and implements them.

### **INITIATING STRUCTURE**

The director makes their attitude clear to the organization.

The director makes the members of the organization know what is expected of them.

The director maintains performance standards at a certain level.

### **RESOURCE SUPPORT**

Additional materials, if required, can be supplied in the organization.

The employees can access the materials that they need.

There are supplementary materials for use in the organization.

### **MORALE**

The employees in the organization like each other.

The employees work with enthusiasm.

The employees in the organization are cool and aloof from each other.

### **ACADEMIC EMPHASIS**

The organization determines high standards for organizational performance.

The employees respect others who display satisfactory performance.

The working environment in the organization is orderly and serious.

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**Reference:** Hoy and Feldman, 1987, p. 33.

Organizations have three controls over the seven characteristics of healthy organizations as presented by Hoy et al. (1985). These are the characteristics of healthy organizations, and the control level of the organization on each dimension is shown below in Table 5 (Henderson, 2007).

**Table 5:** Hierarchical Control Level of the Dimensions of Organizational Health

<b>Control Level</b>	<b>Dimension of Health</b>
<b>Technical</b>	- Academic Emphasis
Process: teaching and learning	- Morale
Actors: employers and employees	- Cohesiveness
<b>Managerial</b>	- Principal Influence
Process: organizational management	- Principal Consideration
Actors: directors	- Initiating Structure
	- Resource Support
<b>Institutional</b>	
Process: the connection between the organization and the external environment	- Institutional Integrity
Actors: organization, environment, community	

**Reference:** Henderson, 2007, p. 21.

Table 5 shows the hierarchical control levels of the dimensions of organizational health. Accordingly, Hoy et al. (1987) developed a powerful understanding of the manner in which a healthy organization appears in a framework based on theories of organization and sociology. According to Hoy et al. (1987), technical, managerial, and institutional control levels are critical levels that come together to create a healthy climate. At this point, employers and employees are satisfied with their presence in the organization, and therefore, they have a strong cohesiveness within the organization. At the same time, there are high but achievable goals for all members. The director is friendly, supportive, and skilful. A healthy organization is powerful enough to resist unreasonable demands from the external environment. On the contrary, in an unhealthy organization, one or many of these levels do not function properly. Therefore, such an organization is not considered to be a satisfactory place suitable for a director to attend, a customer to demand, or an employee to work. Only the combination of these organizational levels can lead to the emergence of a healthy organization (Henderson, 2007). Besides, a healthy organization is considered to be one where technical, managerial, and institutional levels work in harmony. Thus, the organization has a structure that deals with adapting to the conditions in the external environment and meets its instrumental and expressive needs as it directs its energy toward its mission (Hoy et al., 1987).

## 4. Method

The research problem in the study was based on investigating organizational health and its dimensions at an organizational level. In this context, the study aimed to determine the structure of a healthy organization at an organizational level through the dimensions of organizational health based on the views of directors regarding organizational health.

Adopting a heuristic approach, the data in this study comprised interviews with directors in organizations working in the private sector. The data were analyzed through qualitative content analysis to reach in-depth information on MAXQDA, a qualitative data analysis software package that enables the ordering, evaluating, and interpreting of data in text and multimedia formats in a systematic way. Content analysis, which was selected as the research method in this study, was considered to be a useful measurement technique in many studies. In this regard, content analysis, which was accepted as one of the most important research techniques in the social sciences, is a research technique through which valid and practical implications can be made on the basis of the data obtained and according to the text selected (Krippendorff, 1989).

Therefore, content analysis is a research technique used widely in studies on organizations, based on the coding of a text written in various categories depending on selected criteria (Milne et al., 1999). In this scope, the content analysis method, which is accepted as a valid, reliable, and useful measurement technique, involves the analysis and evaluation of various selected subjects in line with the purpose of the research. At this point, qualitative content analysis is a scientific research method that offers opportunities for interactive conceptual development and a holistic interpretation of a text (Jormanainen & Koveshnikov, 2012). With a theoretical background that is based on an extensive review of literature, this study used the records of interview forms that included information on analysis, organizational activity, and the sector by covering the views of directors.

### 4.1. Data Collection Method

This study performed content analysis to reach in-depth information. In this context, in the data collection process, an interview form where all questions were predefined was prepared, and the interview forms were evaluated by being designed separately for each question sheet. As the study utilized the qualitative research method, the questions on the interview forms were designed to be open-ended. The data collected was transferred into MAXQDA and analyzed. Considering the questions on the interview forms, in the interview with the directors of companies in the private sector, the focus was on the characteristics of a healthy organizational structure after investigating organizational health and its dimensions at an organizational level. In this period, the components were developed, and these components were arranged using the codes. These components were grouped under three main components, namely, Institutional Integrity, Principal Influence, and Consideration.

### 4.2. Sample of the Study

The sample of the study comprised directors working at companies in the private sector in the city of Gaziantep, Turkey. The sample included 43 directors. Besides, in qualitative studies, the sample size should be at least 15 (Berg, 2001). Based on this information, a sample size that included interviews with 43 participants and 329 comment expressions was considered acceptable for content analysis. Conducting interviews with interviewees during work hours and in their workplaces enabled our observation of relationships in their natural setting. At the same time, conducting interviews at places that the participants owned enabled them to express themselves in their natural setting in a more comfortable way. Also, there was no time limit for the duration of the interviews. At the first stage of interviews, the participants were briefed about the research study. Similarly, the interview form presented systematic information concerning the process. The interviewees were told that their data would remain confidential, and their consent was obtained in this regard. Therefore, it was thought that the main source of data selected in the study was sufficient. Considering all of this, and based on qualitative data collection methods, coding started after a consideration of the characteristics of the organizations in the private sector within the framework of the activities conducted, and later, the results of the coding conducted again were used in the study.

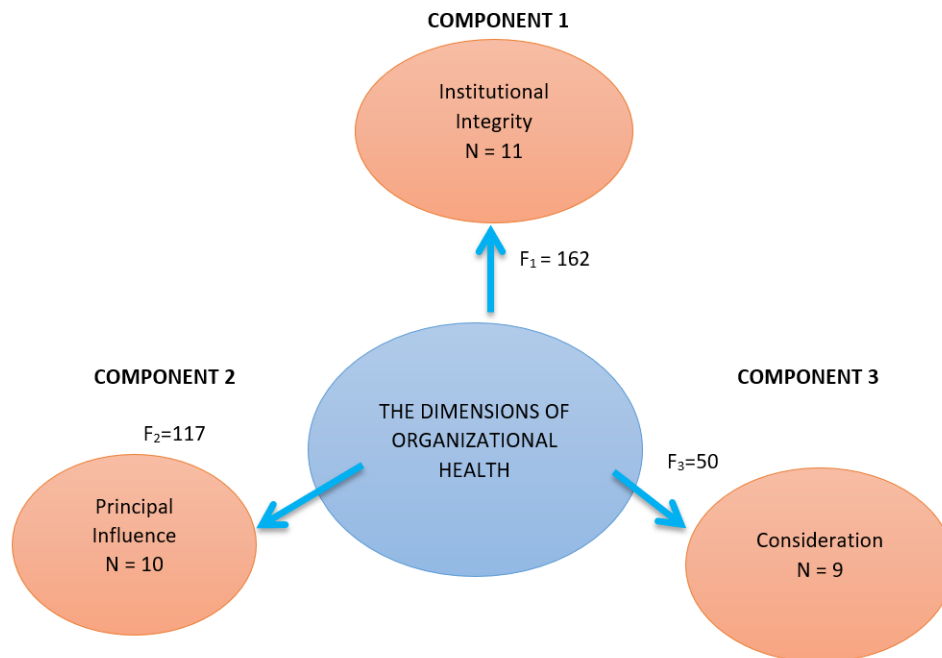
### 4.3. Validity and Reliability of the Study

In studies where qualitative research methods are implemented, validity is related to the researcher's observing the topic under focus as objectively as possible (Creswell, 2013). In this study, objectivity was at the fore, and codes were checked to see whether they included sufficient or appropriate expressions.

In this context, expert opinions were taken to ensure the validity of the study. Reliability is approached differently in qualitative research. Silverman (2005) argued concerning reliability that inter-rater agreement was necessary (Creswell, 2013). In this context, to ensure the reliability of the study, the researchers and an expert experienced in qualitative research coded the data separately, and the agreement rate was calculated by comparing their codes. Using Cohen's Kappa analysis, the agreement rate was found as 89.8%. Therefore, it is possible to say that a perfect agreement existed.

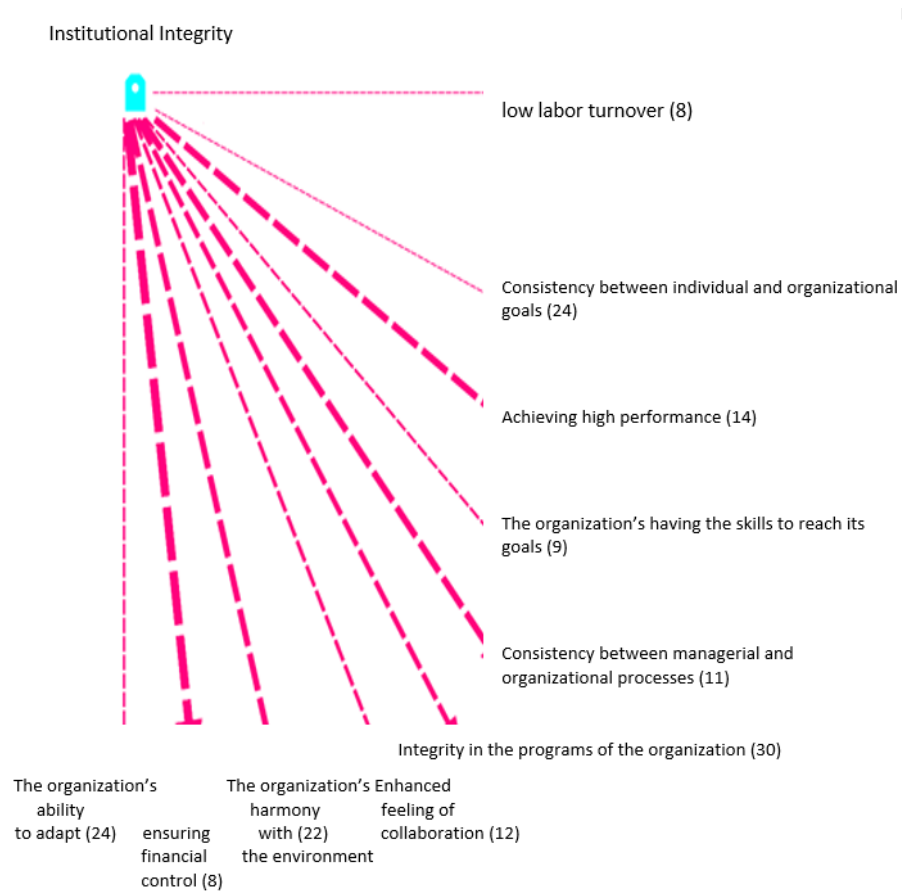
## 5. Results

This section of the study presents the results regarding the expressions used by the directors as revealed by the analysis of the data collected from the directors on MAXQDA. In this scheme of things, the expressions of the directors are presented in four categories, namely, coding the data, arranging the codes, identifying the findings, and interpreting. The expressions used were grouped under three components, and the analysis was made over 30 expressions in total. Figure 3 presents the components and frequency values based on the expressions.



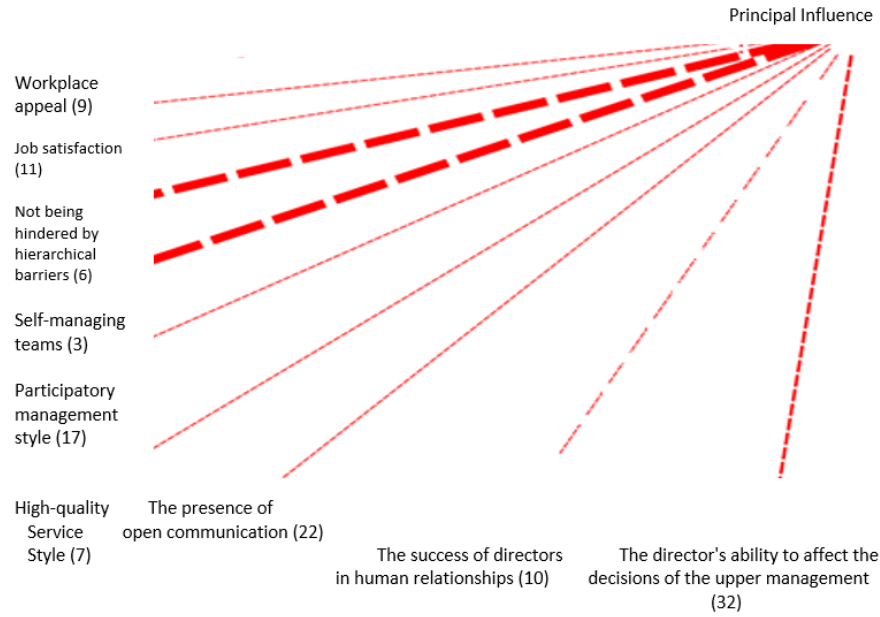
**Figure 3:**The Components and Frequency Values Based on the Dimensions of Organizational Health

Figure 3 shows that the expressions that were related to the use and effects of the dimensions of organizational health that existed in an organization that was healthy at the organizational level were collected under three components and that there was an emphasis on 329 expressions. In this regard, the most repeated component was “Institutional Integrity” ( $F_1 = 162$ ). It was seen that the repetition frequencies of the expressions used within this component were high. Considering the repetition frequencies of the components, the most repeated component was Institutional Integrity ( $F_1 = 162$ ); the second was Principal Influence ( $F_2 = 117$ ); and the least repeated component was Consideration ( $F_3 = 50$ ). In this regard, Figure 4 presents the frequency values for the component of Institutional Integrity, which covered the expressions of the directors regarding the determination of a healthy organizational structure at the organizational level through organizational health and its dimensions.



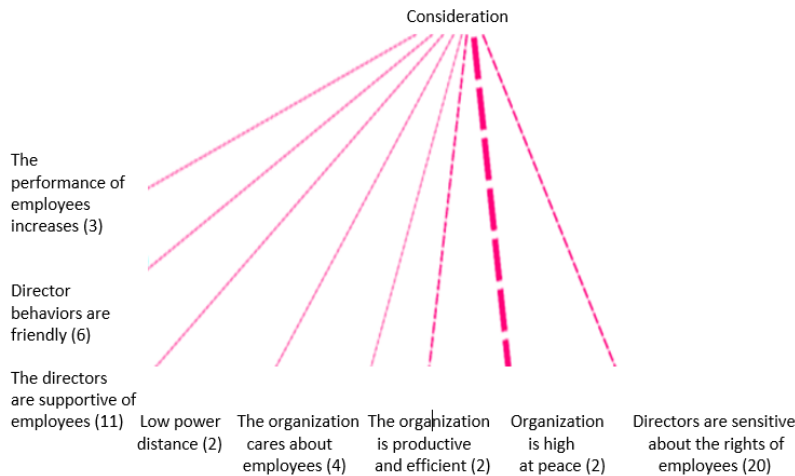
**Figure 4:** MAXQDA Findings on the Participants’ Expressions Regarding the Component of Institutional Integrity

Considering the findings presented in Figure 4, it can be seen that an overwhelming majority of the participants (30) expressed that creating a healthy organizational structure depended on ensuring integrity in the programs of the organization. It is noteworthy that these expressions were intensive. Therefore, we can say that a healthy organizational structure needs the operations at the organizational level to show integrity and that these activities should be oriented toward the organizational goals and institutional vision. The organization’s ability to adapt the organization’s ability to adapt was another noteworthy expression that attracted attention. This result refers to the need that the organization’s adaptation ability to internal and external variables be high. Moreover, another expression that was used by the majority was that the organization needed to be adaptable to the environment and respond to innovations quickly. Last, it was found that the participants’ expressions on organizational health under the component of Institutional Integrity, which is one of the dimensions of organizational health, touched upon consistency between individual and organizational goals, the organization’s having the skills to reach its goals, consistency between managerial and organizational processes, the development of collaboration, and low labor turnover. Also, Figure 5 below presents the frequency values for the component of Principal Influence, which covered the expressions of the directors regarding determining a healthy organizational structure at the organizational level through organizational health and its dimensions.



**Figure 5:** MAXQDA Findings on the Participants' Statements Regarding the Component of Principal Influence

The findings presented in Figure 5 showed that a majority of the participants (32) stated that the director's ability to influence the decisions of upper management was an essential indicator of organizational health that revealed the influence of the director. The high number of repetitions in these expressions might be interpreted as that the construction of a healthy organizational structure contributes to employees' feeling safe in the organization and the development of a participatory style. Another noteworthy expression stated by the majority was the presence of open communication. This expression showed that the presence of an open and direct understanding of communication at the organizational level contributes to a robust and timely flow of information within the organization and the development of a trust-oriented, encouraging, and healthy organizational understanding. Therefore, this result is critical within the domain of Principal Influence in the field of organizational health. Besides, the expressions touching upon participatory management, job satisfaction, workplace appeal, and the success of directors in human relations were significant results indicating a healthy organizational structure where organizational commitment was developed, employees were cared for, and a team spirit was present. Besides, as the third component, Figure 6 below presents the frequency values for the component of Consideration, which covered the expressions of the directors regarding determining a healthy organizational structure at the organizational level through organizational health and its dimensions.



**Figure 6:** MAXQDA Findings on the Participants' Statements Regarding the Component of Consideration

Considering the results presented in Figure 6, most participants (20) stated that director sensitivity to the rights of the employees was an essential indicator of organizational health. Besides, 11 of the participants stated that directors have supportive attitudes toward employees. Most of the participants repeated these two expressions at the same frequency rate, which was found to be highly noteworthy. Considering these expressions, it is possible to say that within a healthy organization, the directors display behaviors to protect the rights, freedom, and interests of employees at the organizational level. Besides, considering the responses analyzed in the scope of the statistics of the study, it was found that the participants stated 2–3 expressions at the same time. These expressions argued that the power distance was low, peace at the workplace was high, and the organization was efficient. Considering the common point of these expressions, it can be thought that paying particular attention to employees, job satisfaction, and peace at the workplace provides the organization with a productive and efficient structure, which is critical to achieving organizational health. Therefore, it was thought that this finding is significantly relevant in the scope of the research topic and the components constructed. The expressions touching upon the directors' sensitive and supportive attitudes toward employees in the framework of organizational health and its dimensions, which cover a wide range of expressions, suggest that they are the basic practices in this system. In this context, it is possible to say that organizational health and its dimensions are critical instruments in constructing a healthy organizational system.

## 6. Conclusion

In the present context of industrial and knowledge-based intensive competition, developing managerial and strategic practices had become overly critical for organizations to continue their existence. This made the design of a healthy organizational structure necessary to construct an organizational structure and maintain the management practices successfully at the organizational level. Meeting expectations, particularly at the organizational level, is possible by meeting the conditions required to have a healthy organizational structure. From this perspective, the dimensions of organizational health should be utilized to benefit from their instrumental effects in constructing a healthy organizational structure. The dimensions of organizational health reflect the interaction patterns in the organization that are needed to construct a healthy organizational structure. These interaction patterns help the organization with both analyzing itself and constructing the foundations of organizational development. The dimensions of organizational health are positive at the instrumental level and offer important variables regarding director and employee performance as well as directing organizations to have a healthy organizational structure at the organizational level. The dimensions of organizational health are instruments that reveal the distinctive characteristics of healthy organizations. By doing so, organizations turn into institutional structures where employees respect and support each other. In this framework, it is possible to say that organizational health and the dimensions in it make positive contributions to organizations in achieving organizational development and improvement. The reason for which there is willingness to determine whether organizations have a healthy organizational structure is the common purpose to make it easier for these organizations to adapt to the innovations and changes at the environmental level and prepare them accordingly. Hence, measuring organizational health helps determine the strengths and weaknesses of the organization at the organizational level and identifies the strategies that should be developed in the face of the sectoral opportunities or threats that they might encounter. Therefore, determining organizational health is a variable that reflects the manner in which the organization will react to the developments in the market with its healthy and unhealthy aspects, in other words, its power. In this context, paying attention to organizational health will be a supplementary parameter in achieving a prominent level of performance that can carry the current organizational characteristics and qualities into the future.

This study sought to answer how directors perceived the determination of a healthy organizational structure at the organizational level through the dimensions of organizational health and an organizational health approach based on their views of organizational health. The results regarding the approaches to the concept of organizational health indicated consistency among integrity, communication, and goals in the framework of the employee, director, and organizational goals. Moreover, the results demonstrated a tendency toward the adaptation ability of the relationships between the organization and employees at the organizational level. In this regard, considering the perceptions of the participants regarding organizational health and its dimensions, the expressions of “integrity in the programs of the organization,” “the organization's ability to adapt,” and “the consistency between individual and organizational goals” had high levels of perception. On the basis of this, we can say that organizational health should be directed toward the practices regarding operations at the organizational level showing integrity and visionary institutional principles in the scope of organizational goals. It can be stated that in a healthy organizational structure, the organization should be flexible and highly adaptable to internal and external environmental variables.

Moreover, the participants' expression of ensuring consistency between individual and organizational goals for the health of the organization showed that employees tend to perceive an understanding that focuses on individual and organizational performance, and that can increase motivation and performance levels.

Considering the perceptions of the participants regarding organizational health and its dimensions related to a healthy organizational structure, it was found that the expressions of "the director's ability to influence the decisions of the upper management" and "the presence of open communication" had a high level of perception. The fact that these expressions had a high level of perception among participants can be thought to make a contribution to the development of a participatory management style at the organizational level and employees' feeling safe in the organization at the stage of constructing a healthy organizational structure that is based on organizational health and its dimensions. Furthermore, the presence of open communication at the organizational level contributes to precise, solid, and timely flow of organizational information and the development of a basic understanding of a healthy organizational structure that encourages employees and that is trust-oriented among units. Last, considering the perceptions of the participants regarding organizational health and its dimensions, there was a prominent level of perception regarding "the director's sensitive and supportive attitude toward the rights of employees." This approach can promote belonging, cohesiveness, and job satisfaction among employees as a result of the directors' paying particular attention to employees and being sensitive and supportive about their rights in achieving organizational health. Therefore, both the performances and productivity of employees at the organizational level can increase consequent to the organization's transformation into a healthy organizational structure. Furthermore, as directors protect the rights of employees and support them, employees feel safe at the organization they work in and work with prominent levels of motivation. Therefore, an organizational culture that is open to communication, psychologically trust-oriented, and encouraging for employees emerges within a healthy organizational structure that was constructed through organizational health and its dimensions.

As a result of embracing the organizational health style, it is necessary to follow policies and strategies appropriate for a healthy organizational structure. In this scheme of things, cohesiveness and motivation levels among employees can be increased. This resulting situation might lead the organization to transform into a healthy organization and enhance organizational efficiency. Considering the findings of the study and the implications obtained from reviews of literature, it is possible to say that organizational health and its dimensions contribute to the development of organizations in terms of their basic skills and resources and make organizations advantageous with respect to the competition within the industries they operate in.

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