



Investigating Organizational Health at Behbahan Branch of Islamic Azad University with Regard to Demographic Variables in the View of Faculty Members

Nasrallah Ghashgaeizadeh* and Parisa Masudian

Department of Humanities science, Behbahan Branch, Islamic Azad University, Behbahan, Iran

*Corresponding author's e-mail: ghashghaeizadeh@yahoo.com

ABSTRACT

The purpose of this study is to investigate the degree of organizational healthy in Behbahan Azad University from its faculty members' point of view and the relationship between their conception of organizational health and individual factors such as age, gender, education, record of service, employment situation, and field of study. The population of the study included all faculty members of Behbahan branch of Azad University who had instructional activity in the first semester of the academic year 2010-2011, a sample of 178 faculty members was selected through applying cluster sampling. In order to gather data, the fifty-item Organizational Health Questionnaire developed was administered. This questionnaire is based on the Organizational Health Scale developed The MTh Organizational Health Scale developed. This questionnaire has a reliability coefficient of 0.95. Man.-Whitney u- test and Kruskal-Wallis test were used to analyse the data. The findings showed that Behbahan Azad University had an average level of organizational health. Faculty members considered morale as more desirable than other dimensions at that university. Finally, there was no meaningful association between professors' gender, age, marital status, place of residence, record of service, field of study, and experience and their conception of organizational health. There was a meaningful relationship ($p < 0.05$) between their employment status and their conception of organizational health.

Key words: Organizational Health, Behbahan Islamic Azad University, Demographic Characteristics, Faculty Members.

INTRODUCTION

Having dynamic, well-developed, and highly qualified universities calls for the existence of dynamic programming [1]. Educational organizations have gained a special position with regard to the type of activity, enforcement methods, aims, and educational management. Successful management necessitates fully investigating all influential factors.

There are various methods of investigating organizations, which are contingent upon the nature of the organizations [2]. In the last decade, one of the most important challenges of universities, as the most silent organizations producing knowledge, is to create and maintain a healthy working environment for faculty members, staff, and students [3]. Organizational climate and organizational health are among the rare factors that can be manipulated in organizations and are positively correlated with many variables such as organizational climate, decision-making problems, organizational culture, and efficacy scales [4].

Miles defined organizational health for the first time. Suggesting a model to assess organizational health, Miles asserted that organizations are not always healthy. According to him, organizational health refers to an organization's durability in its environment and its compatibility with the environment and boosting its ability to have more compatibility [5].

If we become aware of organizational health, we can get to know shortcomings, management weaknesses, and necessary thinking skills. We can make important steps to enhance organizational health by employing

efficient individuals, making connections and benefiting from information, supporting innovations and creativity, establishing training courses, and encouraging organizational culture and participation [6].

Lack of organizational health in educational centers impedes achieving instructional objectives. One of the negative consequences of this lack is the decline in students' educational achievement [7]. Lynden et al. [8] have pointed to some of the symptoms of weak organizational health. They include decrease in the organization's profits, increase in employees' absences, lack of open communication channels, making all decisions at higher levels of the organization, lack of commitment to the organization on the part of staff, employees' low level of morale and motivation, ignoring the reputation of the organization by employees, the absence of moral behavior and well-organized objectives in the organization, lack of experienced and reliable friends for the staff in the organization, lack of training and development plans in the organization, and lack of confidence among the staff.

At a healthy university, we can observe order, constructive mobility, and innovation. Traditional methods are challenged and things are done quickly because the university does not suffer from bureaucracy. In order to achieve this end, talented and efficient individuals should be hired [9].

Consequently, we can say that the organizational health of an institute directs our attention to factors facilitating its growth or hindering its full dynamicity. Investigating the organizational health of a university can help us choose suitable management methods. The importance of organizational health of a university lies in understanding its dynamicity and working conditions. Furthermore, it can predict the efficacy of the university, students' academic achievement, employees' organizational commitment, and faculty members' confidence on and tendency toward one another. Humanitarian concerns necessitate evaluating and improving organizational health in order to provide individuals with healthy, accepting, logical, and comfortable mental conditions.

Experts have suggested several indicators for organizational health. According to Miles, organizational health refers to an organization's durability in its environment and its compatibility with the environment and boosting its ability to have more compatibility. He has proposed ten features for organizational health, namely focusing on goals, quality of communication, optimal distribution of power, use of resources, solidarity, morale, being innovative, self-independence, compatibility to the environment, and problem solving [5].

Hoy et al. [10] studied organizational health at schools. They proposed morale and scientific emphasis for technical level, managers' influence, consideration, constructing and supporting resources for the administration level, and institutional unity for the institutional level. Haghghatjoo et al. [11] classified the indicators of organizational health in three groups:

A. Factors related to internal approach: (A) the ability to employ expert and qualified staff, (B) the ability to attract financial resources, (C) supporters' satisfaction, and (D) efficient information network

B. Factors related to process approach: (A) long-term attitude in the organization, (B) solidarity, (C) optimal allocation of resources, (D) learning capacity, (E) innovation, (F) technology, and (G) organizational culture.

C. Factors related to external approach: (A) value added, (B) customers' satisfaction and fidelity, (C) frequent management changes, (D) developed human resources with alternative power, (E) the quality of products, and (F) community satisfaction

Polany [12] proposed ten features for health work environment: (A) clarity of roles and capability of achieving that, (B) reasonable work requirements, (C) job control and authority of decision making, (D) social support of work environment, (E) just reward and fair behavior, (F) sufficient income, (G) desirable work hours, (H) job security, (I) confidence-provoking organizational climate, (J) fair employment procedures.

Poulin et al. [13] have asserted that organizational health is contingent on the quality of management and harmonizing its aspects. They have suggested four sources of organizational health, namely organizational sources, human sources, financial sources, and physical sources.

Farahbakhsh et al. [7] used the patterns proposed by Miles and Hoy, Tarter, and Kottkamp to investigate organizational health at University of Lorestan, Iran. They explored goal orientation, solidarity, adaptation, innovation, sufficient communication, construction, consideration, using resources, employees' morale, and problem solving.

Taking a systematic approach to what has been mentioned above, it can be understood that the organizational health of a university is both directly and indirectly influenced by factors such as leadership style, managers' attitude and philosophical thinking, learning, financial resources, job satisfaction, and organizational culture. It also affects many variables such as efficacy, long-term durability of the university, organizational commitment, confidence among staff and faculty members, compatibility to the environment, and students' academic achievement.

Considering the overlap between the variables mentioned by Miles, Parsons, and Hoy and colleagues and the characteristics of universities, the theoretical framework used in this study is the patterns introduced by Farahbakhsh et al. [7] which are summarized as follows:

Goal orientation: The University is concentrated on its goals. Faculty members understand and accept these goals.

Adaptation: Faculty members are enthralled by the organization. They take pride in their membership. They are interested in continuing their membership and have active participation in administrative meetings of the university.

Resource productivity: The University makes optimal use of its resources, particularly human resources. This university makes best use of available resources (human, financial, etc.), particularly faculty members' strengths.

Innovation: The University resorts to new methods and approaches when facing new problems. The university has a constant plan to facilitate changes and worries about the consequences of changes do not prevent the president of the university to make new changes.

Adaptability: When environmental forces do not conform to the goals of the university, problem-solving and reconstruction strategies are employed in order to face probable consequences. The university's adaptability to its environment should maintain the unity of its instructional plans.

Sufficient communication: Communication plays a crucial role in reforming and improving a system and is an important factor in healthy organizations. The Board of Directors of the university have devised a process through which faculty members can easily communicate with them, so that they can express their needs, expectations, and ideas. Top-down and bottom-up communication is facilitated.

Construction: Work expectations, performance standards, and work process are clearly specified. The Board of Directors of the university has defined excellent performance and has conveyed this definition to the faculty members and they are informed about professional information on time.

Consideration: Management behavior is friendly, supportive, open, and cooperative. This behavior shows respect, mutual trust, collaboration, and support. Honest attention is paid to faculty members as professional collaborators. Consideration does not mean artificial kindness and sociability, but it means honest attention to faculty members on the part of the Board of Directors of the university.

Morale: It refers to a collective sense of friendship, openness, and enthusiasm among faculty members. Instruction and research are carried out with enthusiasm, faculty members like one another and love their job, help one another, and take pride in their university.

Problem solving: The problems of the organization are investigated and suitable solutions are worked out to solve them. In order to recognize and solve instructional, research, and administrative problems of the university scientific and logical approaches have been devised.

Literature Review

Tschannen et al. [14] have concluded that confidence on the part of faculty members is an important aspect of healthy organizational climate. Hoy et al. [15] has demonstrated that there is a significant relationship between healthy organizational climate and instructional members' confidence.

Ahanchian et al. [16] examined the relationship between managers' communication skills and organizational health in the faculties of Ferdwosi University of Mashhad, Iran. They found that there is a significant positive association between communication skills and organizational health. Farahbakhsh et al. [7] explored the relationship between organizational health and individual and occupational variables from the viewpoint of faculty members and staff at University of Lorestan, Iran. In general, they showed that organizational health is not desirable at University of Lorestan. Aspects of organizational health with regard to desirability are relation orientation, staff's morale, adaptability, duty orientation, sufficient communication, goal orientation, adaptation, and problem solving, innovation, and resource productivity respectively. Relation orientation was the factor to which the most attention has been paid and resource productivity was the factor to which the least attention was directed. There was no significant association between faculty members' age and organizational health; however, those faculty members who were above 35 years old had a better perception of some aspects of organizational health. Faculty members' level of education, gender, and employment status were not significantly related to organizational health.

Haghighatjoo et al. [17] investigated the interplay among managers' creativity, staff productivity, and organizational health at Medical Sciences universities in Iran. They found a significant association between staff productivity and organizational health. Korkmaz [18] showed that there exists a meaningful relationship between transformational leadership style and organizational health. Daneshfard [19] demonstrated that organizational health is at an average level at a combination of State, Medical Sciences, Azad, and Payam Noor universities. In addition, it was found that universities are significantly different with regard to organizational health. Medical Sciences universities have a higher level of organizational health and a less bureaucratized organizational structure.

Tubbs et al. [20] concluded that providing a supportive and positive atmosphere for instructional members and staff will improve the performance of students and instructional members. Cohen et al. [21] concluded that healthy organizational climate is a predictor of students' academic achievement. The striking point revealed by their research is that there exists a huge gap between the findings of this study and policies and teachers' performance. In other words, educational policies and plans are not in line with the research findings, which is a violation of students' rights. Nazem [22] revealed that high educational climate at Islamic Azad University incorporate aspects of structure, friendship, reward, and regulations, which have a positive influence on research managers' productivity.

Haghighatjoo et al. [11] examined the relationship between managers' thinking and entrepreneurship style and organizational health at Medical Sciences universities in Iran. They demonstrated that organizational health is associated with entrepreneurship. In addition, they found a significantly positive relationship between organizational health and managers' executive thinking style. Moayed [23] examined the association between the power sources used by educational managers and organizational health at state universities in Isfahan, Iran. They showed that reference power source only affect morale, coercion power source affect resources support, expertise power source influence resources support, scientific emphasis, and morale, and legal power source and reward bear influence on resources support, consideration, and scientific emphasis.

Seyed javadinet al. [6] found that internal and process indicators of organizational health at Isfahan Medical Sciences University are significantly below average, while external indicators of organizational health are significantly above average. Mazlomi et al. [24] concluded that transformational leadership style is positively related to organizational health.

Exploring the relationship between intelligence and organizational health at universities in Isfahan, Iran, Zahraei et al. [25] concluded that these two variables are moderately related. Rahimiet al. [26] conducted a pathological analysis of the organization of Isfahan Medical Sciences University based on the six-box model of Vizbord in addition to its relationship with organizational health. They found that there is a significantly negative association between each of the factors of pathology and organizational health. There were no significant differences in average organizational health with regard to faculty members' gender, field of study, and employment status. Nevertheless, these differences were significant with regard to academic rank and experience.

Assuming the link between research findings and decision making, we try to improve Behbahan Islamic Azad University by examining organizational health and the association between faculty members' perception of this variable and individual factors at this university. Hence, the present research purports to investigate the degree of organizational healthy in Behbahan Azad University from its faculty members' point of view and the relationship between their conception of organizational health and individual factors such as age, gender, education, record of service, employment status, and field of study. Consequently, this study tries to answer the following questions:

1. What is the level of organizational health at Behbahan Islamic Azad University?
2. Is there a significant difference in faculty members' perception of organizational health with regard to their gender?
3. Is there a significant difference in faculty members' perception of organizational health with regard to their place of residence?
4. Is there a significant difference in faculty members' perception of organizational health in terms of their marital status?
5. Is there a significant difference in faculty members' perception of organizational health as regards to their age?
6. Is there a significant difference in faculty members' perception of organizational health with regard to their employment status?
7. is there a significant difference in faculty members' perception of organizational health as regards to work experience?
8. Is there a significant difference in faculty members' perception of organizational health in terms of their field of study?

MATERIALS AND METHODS

This study is a descriptive survey. The population of the study (N=343) included all faculty members of Behbahan branch of Islamic Azad University except Board of Directors who had instructional activity in the first semester of the academic year 2010-2011, Due to the heterogeneity of the population, the researcher picked a sample of 178 faculty members through applying cluster sampling. In order to gather data, the fifty-item Organizational Health Questionnaire developed by Farahbakhsh and Sattari. This questionnaire is based on the organizational Health Scale developed by Miles and The Organizational Health Scale developed by Hoy, Tarter, and Kottkamp. This questionnaire has a reliability coefficient of 0.95. The faculty members determined their perception of organizational health in a five-point Likert scale (5 = very much, 4 = much, 3 = average, 2 = little, and 1 = very little – and the reverse order for reverse items). In this questionnaire, goal orientation has three items, adaptation four items, resources six items, innovation seven items, adaptability four items, construction seven item, consideration three items, morale six items, and problem solving four items.

A section related to demographic information was put in the beginning of the questionnaire to gather bits of information such as, age, gender, marital status, employment status, experience, place of residence, and field of study. The researchers collected the data in participates' workplace.

Descriptive data analysis was carried out by means of calculating mean, standard deviation, and variance. Although the data were quantitative, the assumptions of t-test and ANOVA were not met. Used Mann-Whitney U

and Kruskal Wallis one-way analysis of variance in order to assess the differences in the perception of organizational health among the groups under study.

RESULTS

The sample of this study consists of 178 faculty members. There are 128 males and 50 females. One hundred thirty four participants are married and 44 participants are single. There are 126 instructors who are native to Behbahan, and the rest (52) are non-natives. One hundred and seventeen instructors are above 35 years old, 52 instructors are between 35 and 45, six instructors are above 45, and three instructors are above 55 years old. Ninety eight instructors have less than five years' experience, 50 instructors have between 5 and 10 years of experience, and seven instructors have more than 15 years of teaching experience at that university. The field of study of 38 participants is basic sciences, 59 instructors have studied humanities, and 81 participants have majored engineering.

Table 1. Descriptive statistics: Aspects of organizational health at Behbahan Islamic Azad University

Aspect	No.	Mean	Variance	Standard deviation
Goal orientation	178	3.0918	624	0.78973
Adaptation	178	3.1601	704	0.83889
Resource productivity	178	2.9991	624	0.79002
Innovation	178	2.9687	391	0.62505
Adaptability	178	3.0042	478	0.69170
Communication	178	2.9494	310	0.55654
Construction	178	2.8748	688	0.82934
Consideration	178	3.2247	601	0.77512
Morale	178	3.3801	468	0.68409
Problem solving	178	2.29508	492	0.70112
Organizational health	178	4.0604	369	0.60783

As Table 1 shows, the mean score of faculty members' perception of organizational health in the order of desirability is as follows: morale 3.38, consideration 3.22, adaptation 3.16, goal orientation 3.09, adaptability 3.004, resource productivity 3, innovation 2.97, problem solving 2.95, sufficient communication 2.95, and construction 2.87.

The organizational health of Behbahan Islamic Azad University is at an average level (mean score = 3.0604). In other words, the faculty members' perception of organizational health is at an average level. There was a small difference in the perception of aspects of organizational health. Among these aspects, the highest mean score was for morale (3.3801) and the lowest mean score was for construction (2).

Question 2: Is there a significant difference in faculty members' perception of organizational health with regard to their gender? Mann-Whitney U test was used to calculate this difference. Since the observed value is more than the critical value (z), the null hypothesis is confirmed. To put it differently, there is no significant difference in male and female instructors with regard to their perception of organizational health ($p < 0.05$) (refer to Table 2).

Question 3: Is there a significant difference in faculty members' perception of organizational health with regard to their marital status? In order to measure the difference in the perception of the organizational health of the university in married and single instructors Mann-Whitney U test was utilized. The observed value exceeds the critical value (z); hence the null hypothesis is confirmed. In other words, there is no significant difference in married and single instructors as regard to their perception of organizational health ($p < 0.05$) (refer to Table 2).

Question 4: Is there a significant difference in faculty members' perception of organizational health as regard to their place of residence? In order to answer this question, Mann-Whitney U test was run. The observed value was greater than the critical value (z), consequently the null hypothesis is confirmed and native and non-native instructors are not significantly different in terms of their perception of organizational health ($p < 0.05$).

Table 2. Mann-Whitney U test: The difference in the perception of organizational health as regards to gender, marital status, and place of residence

Variable	Number	Mann-Whitney U	Z	Sig. (two-tailed)
Gender	178	116.3	-0.496	0.620
Marital status	178	2.948	0.000	1.000
Place of residence	178	3.192	-0.490	0.624

As Table 2 demonstrates, the observed values related to gender, marital status, and place of residence in Mann-Whitney U test exceed the critical value. It means that there is no significant relationship between these three variables and the perception of organizational health .

Question 5: Is there a significant difference in faculty members' perception of organizational health as regards to their age? Kruskal Wallis test was used to measure the difference in the perception of organizational health among faculty members who are less than 35 years old, between 36 to 45 years old, between 46 to 55 years old, and above 55 years old. The difference among these age groups is not statistically significant and the hypothesis is rejected ($p < 0.05$) (refer to Table 3).

Question 6: Is there a significant difference in faculty members' perception of organizational health as regards to their employment status. According to employment rules in Iran, the sample was categorized in four groups. Kruskal Wallis test was run to measure the difference among these four groups. There was a significant difference in the perception of organizational health among these four groups of faculty members of Behbahan Islamic Azad University ($p < 0.05$) (refer to Table 3).

Question 7: Is there a significant difference in faculty members' perception of organizational health as regards to their work experience? Kruskal Wallis test was used to measure the difference in the perception of organizational health among faculty members whose work experience is less than 5 years, between 6 and 10 years, between 11 and 15 years, and more than 15 years. The difference among these four groups is not statistically significant and the hypothesis is rejected ($p < 0.05$) (refer to Table 3).

Question 8: Is there a significant difference in faculty members' organizational health in terms of their field of study? The faculty members were put in three groups as regards to their field of study namely, humanities, basic sciences, and engineering. The difference among these three groups was calculated by Kruskal Wallis test. The difference among these three groups is not statistically significant and the hypothesis is rejected ($p < 0.05$) (refer to Table 3).

Table 3. Kruskal Wallis test: The difference in the perception of organizational health as regards to work experience, employment status, age, and field of study

Variable	Number	Df	Kruskall wallis (H)	Sig.
Age	178	3	5.276	0.153
Employment Status	178	3	10.615	0.014*
Work Experience	178	3	4.001	0.261
Field Of Study	178	2	2.333	0.311

Table 3 illustrates that instructors' employment status and their perception of organizational health are related. In addition, their age, work experience, and field of study do not produce any significant difference in their perception of organizational health.

DISCUSSION

The results of this study showed that Behbahan Islamic Azad University is at an average level with regard to organizational health. This is in line with the findings of Farahbakhsh et al. [7] and Daneshfard [19] who found average levels of organizational health at the universities they studied.

There was a small difference in the perception of the aspects of organizational health. According to the faculty members of this university, morale was more desirable among the aspects of organizational health at Behbahan Islamic Azad University. In addition, they described instruction as the least desirable aspect of organizational health at this university, but the difference in the perception of these aspects was small. Faculty members' perception of organizational health in an order of desirability is as follows: morale 3.38, consideration 3.22, adaptation 3.16, goal orientation 3.09, adaptability 3.004, resource productivity 3, innovation 2.97, problem solving 2.95, sufficient communication 2.95, and construction 2.87. This finding partly supports that of Farahbakhsh et al. [7]. In their research, the order of desirability is as follows: consideration, morale, adaptability, construction, sufficient communication, goal orientation, adaptation, and problem solving, innovation, and resource productivity. If we arrange the aspects of organization health in the order of desirability, in both studies morale, consideration and adaptability are among more desirable aspects and problem solving, innovation, and resource productivity are among less desirable aspects.

In order to account for this finding, we should point to the fact that Behbahan Islamic Azad University is one of the big branches of Islamic Azad University and has less freedom in decision making in comparison with comprehensive universities. It seems clear that more centralized organizations enjoy less innovation and need the agreement of higher regional ranks in order to solve some of their problems. This may exert a negative influence on problem solving and resource productivity of this university. The study Daeshfard [19] concluding that the university with a less bureaucratized structure has a healthier organization also supports this interpretation.

The most important resource is human resource. Since more than two thirds of the instructors of Behbahan Islamic Azad University are not officially employed (the income they receive is based on the number of hours they teach), they are at the University for a short time, and their collaboration may be temporary, the university cannot be successful in utilizing this human resource. Instructors sometimes prefer to work for organizations offering them a higher salary, which can negatively affect resource productivity. Another factor that can impact resource

productivity is the fact that Behbahan, at Khuzestan province, Iran, suffers from deprivation and adverse climate conditions, bearing a negative effect on attracting human resources. In terms of financial resource productivity, we should bear in mind that Behbahan Islamic Azad University relies on tuition fees that are less than the budget allocated to state universities. Moreover, construction projects carried out at this university take up a large proportion of the budget, posing limitations on resource productivity .

The faculty members of this university had a better perception of morale, consideration, and adaptability. In order to interpret this finding, we should pay attention to the issue that the faculty members are highly educated. Consideration points to friendly, supportive, open, cooperative, and logical relationship and mutual respect. Faculty members with higher levels of education enjoy more communication skills in comparison with individuals with lower levels of education. This point is supported by Ahanchian et al. [16] who concluded that there is a significant positive relationship between communication skills and organizational health. In addition to faculty members' level of education, their interaction with young students, their social status, and the nature of educational work affect their morale. In order to account for the fact that adaptability was found to be one of the most desirable aspects of organizational health at this university, it should be mentioned that faculty members have a better perception of their environment because they are highly educated, causing them to be adaptable to their environment .

The analysis of data has demonstrated that faculty members' gender does not make a significant difference in their perception of organizational health. Single and married instructors are not significantly different with regard to organizational health. Perception of organizational health is not significantly different in native and non-native instructors. This is in line with Farahbakhsh et al. [7] concluding that instructors' gender, marital status, and organizational health are not significantly associated. Rahimi et al. [26] also asserted that organizational health is not differentiated by gender.

It was also found that faculty members' perception is not significantly different with regard to their age. Instructors with different ages are not significantly different as regards to their perception of organizational health. This does not support Farahbakhsh et al. [7] showing that instructors who are above 46 have a better perception of organizational health than those who are younger than 35 .

A meaningful difference in the perception of organizational health with regard to faculty members' employment status was observed. The related null hypothesis was rejected. Instructors' employment status affects their perception of organizational health. Those who are temporarily hired by Behbahan Islamic Azad University may have a less desirable perception of organizational health in comparison to those who are permanent faculty members who have a stronger sense of belonging to the university. Moreover, permanent faculty members are better in terms of job security and social status, having a positive impact on their perception of organizational health .

Faculty members' perception of organizational health was not significantly different as regards to their field of study. This is supported by Farahbakhsh et al. [7] and Rahimi et al. [26].

There was no significant difference in faculty members' perception of organizational health in terms of their work experience. This is in line with the findings of Farahbakhsh et al.[7] but in contrast with those of Rahimi, Syadat et al. [26]. Nevertheless, it was assumed that instructors with more work experience have a better perception of communication, adaptability, and goal orientation .

Like organizational climate, organizational health is a perceptual concept and different individuals have different perceptions of the organizational health of one single organization. In this research, faculty members' employment status was the only variable affecting their perception of organizational health.

REFERENCES

1. YamaniDouzi, M. & Torkzadeh, J. 2009. "Assessing the state of development planning in Iran", *Journal of Higher Education*, 4: 1-17.
2. Hoy, W.K. & Sabo, D.J. 1998. "Quality middle school: Open and Healthy", New Jersey: Thousand Oaks.
3. Lowe, G. 2005. "University as healthy work environments", 2International Conference for Health Promoting universities at the University of Alberta. (CAUT Bulletin, v 52, n9).
4. Kalkhali, A. 2001. "Theory Formwork to school climate", *Education Quarterly*, 62: 63-80.
5. Allagheband, A. 2000. "School Organizational Healthy", *Education Quarterly*, 21: 14- 33.
6. Seyed jvadin, R., Alavi, A., Ansari, Sh. 2010. "Organizational Health Index in Isfahan University of Medical Sciences (IUMS)", *Journal of Health Administration*, 13 (41):63-72.
7. Farahbakhsh, S. & Sattar, A. 2006. "The survey of organizational health in relation to occupational and personal variables as perceived by the faculty and staff members of university", University of Lorestan, Research project.
8. Lynden, J.A. & Klingel, W. 2000. "Supervising Organizational Health". *Supervision Journal*, Pp. 3-5. <http://www.eric.ed.gov>
9. Saatchi, M. 1999. "Psychology at work: Organization and Management", Tehran, State Management Training Center.

10. Hoy, W.K., Tarter, C.J. & Kottkamp, R.B. 2000. "Open schools / healthy schools: Measurement organizational climate" E-book has been republished by Arlington writers, LTD. <http://www.coe.ohio-state.edu/whoy/online>
11. Haghghatjoo, Z. et al. 2009. "The Relationship between emotional intelligence and organizational healthy", *Medical Sciences Universities of Iran*, 7(1):15-20.
12. Polanyi, M.2004. "Healthy Organizational Practices: A Synthesis of Emerging Work-Health Research", Saskatchewan Population Health Evaluation and Research Unit University of Regina.
13. Poulin, L. & Leclerc, S. 2004."Organizational Health: Evaluation and implementation process", presented to the Canada Council for the Arts.
14. Tschannen, M. & Hoy, W.K. 1998. "Trust in School: A Conceptual and Empirical Analysis", *Journal of Educational Administration*, 36(40):334-52.
15. Hoy, W.K., Smith, P.A. & Sweetland, S.R. 2003. "The development of the organizational climate index for high school", *High School Journal*, 86(2):38-49.
16. Ahanchian, M.R. & Monidary, R. 2004. "The Relationship between communication skills of managers with organizational healthy", *Quarterly Journal of the Faculty of Humanities and Social Sciences*, 14(12): 41-57.
17. Haghghatjoo, Z. & Naazem, F. 2007. "Relationship between Managers` Creativity and Organizational Health with Employees Efficiency in Medical Sciences Universities of Iran" *Health Information Sciences*, 4(1): 143-151.
18. Korkmaz, M. 2007. "The Effects of Leadership Styles on Organizational Health". *Educational Research Quarterly*.v30 n2 p23-55. <http://www.eric.ed.gov>.
19. Daneshfard, K. 2008. "Relationship between bureaucracy model with Organizational Health in universities", *Journal of Modern Thoughts in Education*, 2(4):41-45.
20. Tubbs, J.E. & Garner, M. 2008. "The Impact of school climate on school outcomes", *Journal of college Teaching & learning*, 5(9): 17-26 , <http://www.eric.ed.gov>
21. Cohen, J.n., McCabe, L. & Nicholas, M.T. 2009. "School Climate: Research, Policy,Practice, and Teacher Education", *Teacher College Record*, 111(1): 180-213. <http://www.eric.ed.gov>
22. Naazem, F. 2009. "Research leaders and create noble organizational climate for increasing research activities and scientific production", *Quarterly Journal of Educational Leadership & Administration*, 2(4):167-182.
23. Moayed, N. 2009. A study of the relationship between educational Administration source of power and organizational health at Isfahan state universities in 2007-2009 academic year .university of Isfahan faculty of education & psychology Department of Educational science .ms thesis.
24. Mazloomi, p. & Shatalebi, B. 2010. "Relation between Transformational Leadership Method of Administrator with Organizational Health Schools"; *Research and Knowledge Quarterly*, 25:136-137.
25. Zahraei, M. & Rajaeipor, S. 2011. "The Study of the Relationship between Organizational Intelligence and organizational health in Isfahan universities", *Quarterly Journal of New Approaches in Educational Administration*, 2: 155-174.
26. Rrahimi, H., Syadt, A. & Hovyda, R. 2011. "The Organizational Pathology of Isfahan University of Medical Sciences based on the six-box model Vyzbord and its relationship with organizational health", *Journal of Medical Education Development*, 4 (6):10-19.