

ANALYSIS OF THE PRIMARY SCHOOL TEACHERS' PERCEPTION OF ORGANIZATIONAL HEALTH IN TERMS OF DIFFERENT VARIABLES*

İLKÖĞRETİM OKULU ÖĞRETMENLERİNİN ÖRGÜT SAĞLIĞINA İLİŞKİN ALGILARININ FARKLI DEĞİŞKENLER AÇISINDAN İNCELENMESİ

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ABSTRACT: The aim of this study is to analyse the primary school teachers' perception of organizational health in terms of different variables. The sampling of the study is comprised of 385 primary school teachers who attended a course in Aksaray and Esenköy in-service training centers. The Organizational Health Inventory (OHI-S), which was developed by Hoy and Miskel, was used in the research. The Organizational Health Inventory (OHI-S) scale was adapted to Turkish by the author and validity and reliability studies were conducted. Frequency, arithmetic mean, t-test and variance analysis were calculated in the study. The research results were tested at $p < .05$ level. The research revealed that primary school teachers state that Initiating Structure (IS) dimension is much frequently realized, while Academic Emphasis (AE) subdimension is less realized. When the relationship between the subdimensions of the organizational health are analysed, a relationship from the middle level to the upper is observed. The strongest relationship is observed between the subdimensions of initiating structure (IS) and consideration (C). There was a significant relationship between gender and Institutional Integrity (II), marital status and morale, age and Initiating Structure (IS) and Academic Emphasis (AE), branch and Resource Support (RS) and Academic Emphasis (AE).

Key words: Organizational health, school, teacher, different variables

ÖZET: Bu araştırmanın amacı, ilköğretim okullarında görev yapan öğretmenlerin okullarının örgüt sağlığına ilişkin algılarını farklı değişkenler açısından incelemektir. Araştırmanın örneklemini Aksaray ve Esenköy hizmetiçi eğitim merkezlerinde kursa katılan 385 ilköğretimi okulu öğretmeni oluşturmaktadır. Araştırmada Hoy ve Miskel tarafından geliştirilen Örgüt Sağlığı Ölçeği kullanıldı. Örgüt Sağlığı Ölçeği araştırmacı tarafından Türkçe'ye uyarlandı ve geçerlik ve güvenilirlik çalışmaları yapıldı. Araştırmada frekans, yüzde, aritmetik ortalama, t-testi ve varyans analizi hesaplandı. Araştırma sonuçları $p < .05$ düzeyinde test edildi. Araştırmanın sonucunda, ilköğretim okullarında görevli öğretmenler, inisiyatif yapısı en azda Akademik önem gerçekleştiğini belirtmektedirler. Örgüt sağlığının alt boyutları arasındaki ilişki incelendiğinde, orta düzeyden üst düzeye doğru bir ilişkinin olduğu görülmektedir. En güçlü ilişki initiating structure (IS) ile consideration (C) alt boyutu arasındadır. Cinsiyetle Örgütsel Bütünlük, medeni durumla moral, yaşla İnisiyatif Yapısı ve Akademik Önem, branşla Kaynak Desteği, Akademik Önem arasında anlamlı bir ilişki bulundu.

Anahtar sözcükler: Örgüt sağlığı, okul, öğretmen, farklı değişkenler

1. INTRODUCTION

The concept of "organizational health", which has been frequently used recently, has become a widely approved approach both by the theoreticians and practitioners. The concept of organizational health was used by Miles in 1969 in organizational health analysis of schools. Miles suggested a model for the organizational health of the schools and defined healthy organization in the following terms: "A healthy organization is the one which is not static in its existing setting, but is everdeveloping itself and its skills to handle and carry on" (Miles, 1969: 376; Akbaba-Altun, 2001: 26). The term "organizational health", which was first used to express the continuous aspect of organizational health, was defined by Parsons, Bales and Sils (1953), Hoy and Tarter (1997) and

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Hoy and Miskel (1991) as the ability to adapt organization to its environment, create harmony among its members and achieve its goals (Korkmaz, 2004: 476). Some researchers have drawn a similarity between the organization and humans and suggest that an organization could be ill or well, just like a person. Organs should be working perfectly in harmony together for a body to be healthy. Similarly, all sub-systems should be working regularly in harmony for an organization to be healthy. A Healthy organization is functional, it functions regularly, and can effectively offer goods and services. The Health level of the organization is related to its ability to achieve instruments and goals (Akbaba-Altun 2001). The concept of organizational health has been used by the educationists, school management, efficiency, culture and climate in terms of the harmony between employer-employee, i.e teacher-student-management and the efficiency which follows (Tsui, Cheng; 1999; Akt. Aytaç, 2003:1). Brookover (1987) and Akbaba-Altun (2001: 35) conceptualized school health by using the organizational climate of the schools and determined significant variables about the effectiveness of the school. Hoy and Feldman (1987), identified criteria for healthy and unhealthy schools after having developed the Organizational Health Inventory. Protecting the school against the possible pressures from the environment, leadership of the school manager, good communication and interaction between teachers, students' achievement, equipment used at school, etc were included in these criteria. The following criteria were also used for the identification of unhealthy schools: aggression of the pressure groups surrounding the school, incapable school administrator, communication gap between the teachers, conflict and low academic expectations.

When the research studies on organizational health are analysed, can be easily observed that they started in late 1970s and rapidly advanced in 1980s. Clark ve Fairman (1983) regarded organizational health as a significant power in planned change. Childer and Fairman (1986) emphasizes that counselors at schools may play the role of a facilitator in improving the organizational health. Kimpston and Sonnabend (1975) studied the relationship between organizational health in formal secondary schools, innovation and staff characteristics. Ash (1992) analysed the relationship between the organizational health and the opinions of the teachers on innovation. Hoy, Tarter and Bliss (1990) made an analysis as they compared the effectiveness of organizational climate and organizational health. Podgurski (1990) searched for the relationship between school effectiveness and organizational health of primary schools, while El-Hage (1980) studied the relationship between organizational health and effectiveness. Scherrey (1991) studied the relationship between the self-realization of the school managers and the organizational health of the schools. Fliegner (1984) studied the relationship between school leadership and organizational health. Ransom (1991) studied the relationship between organizational health and the elements of participatory management. As Hoy and Miskel (1991) and Hoy and Tarter (1997) have stated that in a healthy school, technical, managerial and institutional levels are in harmony, and the harmony between these three levels should be teaching and student learning (Korkmaz, 2004: 477).

The studies carried out on organizational health abroad have also affected Turkish educational system. Consideration of organizational health as a variable which affects organizational performance within Turkish education system resulted in various new legal regulations. Concepts such as organizational effectiveness, leadership, performance assessment and quality assurance also started to be discussed in our education system. Seminars, courses and certification programs are being organized on such concepts. The quality of education by means of teachers and school managers has been tried to be improved through graduate programs with or without thesis. The aim of this research is to analyse the primary school teachers' perception of organizational health in terms of different variables. For this aim, answers to the following questions are sought for. 1. Is there a significant relationship between the subdimensions of organizational health? 2. Is there a significant relationship between the organizational health experienced by the teachers at school and their gender? 2. Is

there a significant relationship between the organizational health experienced by the teachers at school and their marital status? 3. Is there a significant relationship between the organizational health experienced by the teachers at school and their age? 4. Is there a significant relationship between the organizational health experienced by the teachers at school and their branch?

2. METHOD

2.1 Sample

The universe of this research comprises of 399.025 elementary school teachers who worked in elementary schools in Turkey during the 2004-2005 academic year. The sample of this research is 385 elementary school teachers who attended the courses in Inservice Training Centers in Aksaray and Yalova- Çınarcık-Esenköy between July 4th - 22nd 2005. Teachers in sampling group attended the course from 7 different regions of Turkey. These teachers come from settlements of different socio-economic levels and each one from a different school. Therefore, data of the research was obtained from a wide area. Research questionnaires were applied to 385 elementary school teachers. 41 questionnaires were not sent back. 7 questionnaires were not filled in as per the instructions on filling in the questionnaires, therefore they were considered outside the scope of the research. A total of 337 questionnaires were evaluated. 54,3% of the teachers in sampling group were males and 45,7% female. 63,8 % was married, 33,2 % was single and 2,7 % was divorced or widowed. When the age diversification among the teachers in the sampling was analysed, it was observed that 63,5 % was between 23- 35. As for the ages between 36 – 48, it was 33,2 %. And 3,5 % was 49 and over. The sample group was comprised of young teachers. When the branch diversification was analysed, it was observed that 70,6% was Secondary School Teachers and 29,4% was Elementary School teacher.

2.2 Instruments

The Organizational Health Inventory (OHI-S): This scale was developed by Hoy and Miskel (1991), to measure organizational health. A secondary form of the OHI-S was also published by Hoy and Tarter (1997) and Hoy and Sabo (1998). The OHI-S developed by Licata and Harper (2001) was composed of 33 items distributing across 6 sub-scales accounting for approximately 77 per cent of the cumulative variance. Relatively high alpha reliability coefficient for these sub-scales ranged from .82 to .92. The instrument used by Licata and Harper (2001) for their research was also used in the study. And also Korkmaz (2004:480) used the instrument in his research. Permission was taken from Hoy before using The Organizational Health Inventory (OHI-S). The instrument was adapted to Turkish linguistic and cultural reasons. For reliability and validity, a pilot study was undertaken involving 145 teachers from 6 schools. After this, a factor analysis was carried out. As a result of the factor analysis, 39 items were identified as distributing across 7 subscales accounting for 62 per cent of the cumulative variance. Five items were extracted from OHI-S as their factor loadings were under .30. Although Institutional Integrity 2 and Morale (M) 1 were under .30 factor loading, expert opinion was taken and it was decided to be used in the research. The alpha level was .93. Alpha level for subscales were Institutional Integrity (II).60, Initiating Structure (IS) .79, Consideration (C) .90, Principal Influence (PI) .71, Resource Support (RS) .92, Morale (M) .89 and Academic Emphasis (AE) .82. Factor loads of sub-scales and article numbers were as the following: Institutional Integrity (II) 6 items, factor loading was .23 - .45. Initiating Structure (IS) 4 items, factor loading .59 - .68, Consideration (C). 5 items factor loading .57 - .76, Principal Influence (PI) 4 items, factor load .42 - .72, Resource Support (RS) 5 items, factor loading .71 - .81, Morale (M) 8 items, factor loading .29 - .72 and Academic Emphasis (AE). 7 items, factor loading .34 - .62.

The responses vary along a four-point scale defined by the categories “rarely occurs”, “sometimes occurs”, “often occurs” and “frequently occurs. (1 through 4, respectively). When an item is reversed scored, “rarely occurs” receives a 4, “sometimes occurs”, a 3, and so on. Each item is scored for each respondent, and then an average school score for each item is computed by averaging the item responses across the school because the school is the unit of analysis. These seven scores represent the health profile with the other schools. Arithmetic mean, standard deviation and maximum scores are calculated for each sub-scale. Sub-scales of OHI-S cover the following issues. Institutional Integrity (II) describes a school that has integrity in its educational program. The school is not vulnerable to narrow, vested interests of community groups; indeed, teachers are protected from unreasonable community and parental demands. The school is able to cope successfully with destructive external forces. Initiating Structure (IS) is task- and achievement-oriented behavior. The principal makes his or her attitudes and expectations clear to the faculty and maintains definite standards of performance. Consideration (C) is principal behavior that is friendly, supportive, and collegial. The principal looks out for the welfare of faculty members and is open to their suggestion. Principal Influence (PI) is the principal’s ability to affect the actions of superiors. The influential principal is persuasive, work effectively with the superintendent, simultaneously demonstrates independence in thought and action. Resource Support (RS) refers to a school where adequate classroom supplies and instructional materials are available and extra materials are easily obtained. Morale (M) is the sense of trust, confidence, enthusiasm, and friendliness among teachers. Teachers feel good about each other and at the same time, feel a sense of accomplishment from their jobs. Academic Emphasis (AE) refers to the school pressure for achievement. High but achievable goals are set for students; the learning environment is orderly and serious; teachers believe students can achieve; and students work hard and respect those who do well academically. In this study, frequency, percentage, arithmetic mean, chi-square and variance analysis were measured. Research findings were tested at the level of $p < .05$.

3. FINDINGS

Table 1 summary of descriptive statistics for all measures in the study.

Organizational Health Inventory	<i>M</i>	<i>SD</i>	<i>Max</i>	<i>Max-M</i>
Institutional Integrity (II) (6)	16.29	3.22	23.00	6.71
Initiating Structure (IS) (4)	11.30	2.98	16.00	4.70
Consideration (C) (5)	13.06	4.40	20.00	6.94
Principal Influence (PI) (4)	10.18	2.52	16.00	5.82
Resource Support (RS) (5)	11.86	4.32	20.00	8.14
Morale (M) (8)	22.33	5.38	32.00	9.67
Academic Emphasis (AE) (7)	17.82	4.53	28.00	10.18

When the *Max-M* values for the sub-dimensions of organizational health are analysed in Table 1, Initiating Structure (IS) 4.70 dimension is much frequently realized, while Academic Emphasis (AE) 10.18 subdimension is less realized. Organizational health score of the schools is quite high. The teachers’ perception of Principal Influence (PI), which was a sub-scale of the OHI-S, had the lowest Standard deviation. In other words, it was the variable with the highest homogeneity. The biggest change of teachers’ perception, except for the Standard Deviation given to the whole OHI-S, belongs to Morale sub-scale. That is, it is this sub-scales where the variable has the lowest degree of homogeneity in teachers’ perception. Table 1 shows the 39- item OHI-S, its sub-scales and the number of items related to the sub-scales. The correlations of OHI-S are given in Table-2.

Table 2 Correlations Between OHI-S

Organizational Health Inventory	*P < 0.01	II	IS	C	PI	RS	M	AE
Institutional Integrity (II)		–	0.22*	0.33*	0.21*	0.15*	0.37*	0.12*
Initiating Structure (IS)			–	0.69*	0.62*	0.53*	0.48*	0.54*
Consideration (C)				–	0.59*	0.54*	0.53*	0.48*
Principal Influence (PI)					–	0.48*	0.38*	0.45*
Resource Support (RS)						–	0.42*	0.63*
Morale (M)							–	0.62*
Academic Emphasis(AE)								–

When the relationship between the subdimensions of organizational health are analysed, a relationship was observed from the middle level to the upper. Correlation values were between 0.15 and 0.37. The strongest relation among sub-scales is between teachers' perception of the initiating structure (IS) by the school and teachers' views about consideration (C) ($r=0.69$). It is mutual relationship. That is, wherever there is an increase in the views of teachers about initiating structure (IS), there is also an increase in the views of teachers about consideration (C). There is a significant and positive relationship between Resource Support (RS) and Academic Emphasis (AE). The lowest relationship is between Institutional Integrity (II) and Academic Emphasis (AE) ($r=0.12$). T-test results of the teachers' gender and organizational health are shown in Table-3.

When the table on the differentiation in the subdimensions of gender and organizational health is analysed, it is observed that morale dimension took place most frequently in male and female teachers most frequently (M) ($\bar{X}=22,79$, $\bar{X}=21,72$). The least realized dimension was the subdimension of principal influence (PI) in both genders ($\bar{X}=10,28$, $\bar{X}=10,05$). When the difference between gender and organizational health subdimensions are analysed, there was a significant difference only in the subdimension of Institutional Integrity (II) [$t(290)=1,99$, $p<.05$], while there was no significant difference in the subdimensions of Initiating Structure (IS) [$t(314)=,07$, $p>.05$], Consideration (C) [$t(317)=,66$, $p>.05$], Principal Influence (PI) [$t(305)=,80$, $p>.05$], Resource Support (RS) [$t(307)=,56$, $p>.05$], Morale (M) [$t(299)=1,71$, $p>.05$], Academic Emphasis (AE) [$t(302)=1,18$, $p>.05$]. This finding can be interpreted in these terms: the teachers' view on organizational health do not differentiate according to gender, except for the subdimension of Institutional Integrity (II), and gender is not a determining factor for the teachers' perception of organizational health.

Table 3 t-test results of the teachers' gender and organizational health

OHI-S (No. Of items in scale)	Male			Female			t	p	
	n	\bar{X}	ss	n	\bar{X}	ss			
Institutional Integrity (II)	167	16,62	3,01	125	15,86	3,45	290	1,99	,04*
Initiating Structure (IS)	176	11,28	2,88	140	11,31	3,11	314	,07	,94
Consideration (C)	177	13,20	4,28	142	12,88	4,56	317	,66	,50
Principal Influence (PI)	175	10,28	2,48	132	10,05	2,57	305	,80	,42
Resource Support (RS)	171	11,98	4,47	138	11,71	4,13	307	,56	,57
Morale (M)	172	22,79	5,23	129	21,72	5,54	299	1,71	,08
Academic Emphasis (AE)	171	18,09	4,54	133	17,47	4,52	302	1,18	,23

t-test on teachers' marital status and organizational health is given Table-4.

Table 4 Variance results for teachers' marital status and organizational health

Institutional Integrity (II)	Variance Source	Sum of Squares	df	Mean Square	F
	Between Groups	8,398	2	4,199	,402
	Within Groups	3009,767	288	10,451	
	Total	3018,165	290		
Initiating Structure (IS)	Between Groups	6,587	2	3,294	,369
	Within Groups	2786,124	312	8,930	
	Total	2792,711	314		
Consideration (C)	Between Groups	4,738	2	2,369	,121
	Within Groups	6149,554	315	19,522	
	Total	6154,292	317		
Principal Influence (PI)	Between Groups	6,848	2	3,424	,535
	Within Groups	1938,903	303	6,399	
	Total	1945,752	305		
Resource Support (RS)	Between Groups	32,491	2	16,246	,872
	Within Groups	5682,028	305	18,630	
	Total	5714,519	307		
Morale (M)	Between Groups	227,472	2	113,736	4,017*
	Within Groups	8409,925	297	28,316	
	Total	8637,397	299		
Academic Emphasis (AE)	Between Groups	107,864	2	53,932	2,648
	Within Groups	6109,034	300	20,363	
	Total	6216,898	302		

When the relationship between the marital status of the teachers and the organizational health is analysed, there was no significant relationship between the subdimensions of marital status and morale (M) [F (2-297)=4,017, $p<.05$]. The result of the scheffe test carried out to identify which groups showed significance, suggests that the morale (M) level of the married teachers was higher than that of the single teachers. This finding can be interpreted as marriage and children have a positive effect on the relationship type of organizational life. There was no significant difference between marital status and Institutional Integrity (II) [F (2-288)=0,402, $p>.05$], Initiating Structure (IS) [F (2-312)= ,369, $p>.05$], Consideration (C) [F (2-315)= ,121, $p>.05$], Principal Influence (PI) [F (2-303)= ,535, $p>.05$], Resource Support (RS) [F (2-305)= ,872, $p>.05$] and Academic Emphasis (AE) [F (2-300)= 2,648, $p>.05$]. This finding is not a determining factor for the views of teachers on organizational health except for the subdimension of marital status and morale (M). T-test values for the teachers' age and organizational health are given in Table-5.

Table 5 Variance results for the teachers' age and organizational health

Institutional Integrity (II)	Variance Source	Sum of Squares	df	Mean Square	F
	Between Groups	18,729	2	9,365	,899
	Within Groups	3010,350	289	10,416	
	Total	3029,079	291		
Initiating Structure (IS)	Between Groups	66,342	2	33,171	3,789*
	Within Groups	2740,098	313	8,754	
	Total	2806,440	315		
Consideration (C)	Between Groups	103,390	2	51,695	2,689
	Within Groups	6075,356	316	19,226	
	Total	6178,746	318		
Principal Influence (PI)	Between Groups	14,409	2	7,204	1,134
	Within Groups	1932,008	304	6,355	
	Total	1946,417	306		
Resource Support (RS)	Between Groups	76,095	2	38,047	2,051
	Within Groups	5676,196	306	18,550	
	Total	5752,291	308		
Morale (M)	Between Groups	38,969	2	19,484	,669
	Within Groups	8673,809	298	29,107	
	Total	8712,777	300		
Academic Emphasis (AE)	Between Groups	165,051	2	82,526	4,093*
	Within Groups	6069,357	301	20,164	
	Total	6234,408	303		

When the relationship between the teachers' ages and organizational health is analysed, there was a significant difference between the subdimensions of teachers' ages and Initiating Structure (IS) [F (2-313)= 3,789, $p < .05$] and Academic Emphasis (AE) [F (2-301)= 4,093, $p < .05$]. Scheffe test, which was carried out to identify which groups showed significance, revealed that, in both of the subdimensions the difference was between the young teachers and the teachers at the age of 49 and over. There was no significant difference between the teachers' ages and Institutional Integrity (II) [F (2-289)= ,899, $p > .05$], Consideration (C) [F (2-316)= 2,689, $p > .05$], Principal Influence (PI) [F (2-304)= 1,134, $p > .05$], Resource Support (RS) [F (2-306)= 2,051, $p > .05$] and Morale (M) [F (2-298)= ,669, $p > .05$]. In other words, teachers' age is not a determiner for the subdimensions of the organizational health. T-test values for the branches of teachers and organizational health are given in table 6.

Table 6 t-test values for the branches of teachers and organizational health

OHI-S (No. Of items in scale)	Class			Branch			sd	t	p
	n	\bar{X}	ss	n	\bar{X}	ss			
Institutional Integrity (II)	89	16,13	3,21	203	16,36	3,23	290	,57	,56
Initiating Structure (IS)	95	11,00	2,98	221	11,42	2,98	314	1,17	,24
Consideration (C)	93	12,60	4,41	226	13,25	4,39	317	1,19	,23
Principal Influence (PI)	91	9,90	2,39	216	10,30	2,57	305	1,28	,20
Resource Support (RS)	95	11,03	3,99	214	12,23	4,41	307	2,27	,02*
Morale (M)	87	21,91	5,51	214	22,50	5,34	299	,84	,39
Academic Emphasis (AE)	92	16,66	4,19	212	18,32	4,59	235	2,97	,00*

When the table is analysed to determine the difference between the subdimensions of the branches of the teachers and organizational health, there was a significant difference between Resource

Support (RS) [$t(307) = 2.27, p < .05$] and Academic Emphasis (AE) [$t(235) = 2.97, p < .05$]. There was no significant difference between teachers' branches and organizational health in terms of Institutional Integrity (II) [$t(290) = .57, p > .05$], Initiating Structure (IS) [$t(314) = 1.17, p > .05$], Consideration (C) [$t(317) = 1.19, p > .05$], Principal Influence (PI) [$t(325) = 1.28, p > .05$], Morale (M) [$t(299) = .84, p > .05$]. In other words, the branches of the teachers are not a determiner for these subdimensions.

5. RESULTS AND DISCUSSION

The research showed that among the subdimensions of the organizational health the highest score was between Initiating Structure (IS) dimension is much frequently realized, while Academic Emphasis (AE) subdimension is less realized. Principal Influence (PI), Initiating Structure (IS), while the highest was in Morale (M). However, when the maximum score values were analysed, the organizational health scores were very low in general. When the fact that organizational health is influential on the vision of the school (Logan, 1993; Willower & Jones, 1965; Korkmaz, 2004), management stress (Trasher, 1980), participation in decision-taking (Ransom, 1991) academic success of the students (Hoy ve Woolfolk, Allison, 1992), and teacher-teacher, subordinate-senior relationship (Hardage, 1978) is considered, it is possible to suggest that poor organizational health can be the cause of failure in education activities at school. According to Cooper (1994) employees go to their work places, however they make limited contribution to the organization or none due to the stress and the unhealthy aspects of the organizational climate. It means that the only reason of their presence is out of presenteeism. Therefore, such organizations are described as unhealthy (Cited. Akbaba-Altun, 2001). Environmental factors such as society, family, other organizations, government policies, etc also affect organizational health. On the other hand, individual characteristics of the employees and the organizational structure, bring the culture, employee satisfaction and in turn organizational performance into surface. In other words, individual and organizational characteristics, as the keys to the organizational health, influence the increase or decrease the individual and organizational performance, which is an indicator of the organizational health (Aytaç, 2003).

The relationship among the sub-scales of the OHI-S is from the middle level to high-level. These correlation coefficients are between 0.15 and 0.37 and are higher than the ones first developed for middle schools (Hoy & Sabo, 1998; Korkmaz, 2004:481). They are close to the correlation of the values which Licata and Harper (2001) developed for middle schools. The strongest relation among sub-scales is between teachers' perception of the initiating structure (IS) by the school and teachers' views about consideration (C). It is mutual relationship. That is, wherever there is an increase in the views of teachers about initiating structure (IS), there is also an increase in the views of teachers about consideration (C). This finding stems from the fact that initiating structure (IS) and consideration (C) sub-scales complement one another in terms of content. There is a highly positive and significant relationship between Resource Support (RS) and Academic Emphasis (AE). The findings of the present study is similar to the findings of Davis (1989), Conley (1992) and Korkmaz (2004) in that there is a parallel relation between resource support and academic emphasis, which can be thought of as the result of effective leadership in schools. This is because two important components of leadership are interpersonal positive relationship and developing a school health.

The lowest relationship is between Institutional Integrity (II) and Academic Emphasis (AE). This finding can be evaluated in a situation which arose as a result of the centralized structure of the Turkish Educational System. In the central system all-hiring, transferring and turnover procedures are carried out by the central authority. The central system has authorized the school principal to manage the school and to the all the jobs related to it (Korkmaz, 2004: 481). Therefore, school manager does not have too much authority and he faces some problems in using authority. The

findings of this research is consistent with those of Korkmaz, 2004. They do not have similarities with the results of the research by Licate and Harper (2001). Because the country and the education system on which Licate and Harper (2001) carried out their research were very different from those of the present study. One of the reasons why the relationship between Institutional Integrity (II) and other sub-scales was low was that Turkish National Education System is too much centralist. In the subdimension of gender and organizational health there was significant difference only in Institutional Integrity (II). Gender has not been a significant variable for other subdimensions. The scores of male teachers in the subdimension of Institutional Integrity (II) are higher than those of female teachers. When it is considered that the subdimension of Institutional Integrity (II) involves the programme of the school, groups in the school, and the attitudes and behaviors of the pressure groups around the school towards the school, men manage to resist these pressures more effectively than women. Also, when the limitation on the school management authority and the presence of the function of the political pressure groups are taken for granted, the possibility of the realization of the subdimension of Institutional Integrity (II) decreases, as expected. There was a significant difference between the views on the relationship between marital status of the teachers and the subdimension of morale of organizational health (M), as expected. Especially, morale scores of married male teachers were higher, which supported our claim. This can be interpreted as the cultural structure of the oriental societies has a relational identity, family relationship has an effect of therapy and family support components increase the morale level. The results of the studies conducted by Tsui & Cheng (1999) also support these findings.

When the relationship between the teachers' age and organizational health is analysed, there was a significant difference between the subdimensions of Initiating Structure and Academic Emphasis. The result of the scheffe test, which was conducted to find out which groups showed significance, suggests that the difference between the two subdimensions was between those 49 and over and young teachers. This finding can be interpreted as the teachers find the practises on organizational structure more adequate as they grow older. As for the young teachers, they have high hopes for the organization, therefore their perception is quite different than that of the senior teachers. In contrary with the senior teachers, young teachers are not satisfied with the organizational structure and the academic life. There was a significant difference between teachers' branches and the subdimensions of Resource Support (RS) and Academic Emphasis (AE). Classroom teachers state that they do not make so efficient use of the resources at school as the branch teachers. Also, expectations from the academic life are higher among branch teachers when compared to classroom teachers. This finding can be interpreted as the job dissatisfaction among classroom teachers is high and vocational perception is problematic in classroom teachers. The research revealed that, in the realization of the subdimensions of the organizational health the lowest maximum possible scores mean was 10.18 (for Principal Influence (PI), and Initiating Structure (IS) which means that teachers' views as regard the perception of the Initiating Structure and Principal Influence sub-scale's item were close to one another, the highest maximum possible mean scores was 22.33 (for Morale (M), which means that teachers' views regarding Morale were different from one another. There was a significant difference between the gender and the subdimension of Institutional Integrity (II), marital status and Morale (M), age and Initiating Structure (IS) and Academic Emphasis (AE), branch and Resource Support (RS) and Academic Emphasis (AE).

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