

A Study on the Relationship Between Schools' Health and Teachers' Organizational Commitment

Ali Asghar Hayat,^{1*} Naeimeh Kohoulat,² Javad Kojuri,¹ and Hatam Faraji²

¹Quality Improvement in Clinical Education Research Center, Shiraz University of Medical Sciences, Shiraz, IR Iran

²Kharazmi University, Tehran, IR Iran

*Corresponding author: Ali Asghar Hayat, Quality Improvement in Clinical Education Research Center, Shiraz University of Medical Sciences, Shiraz, IR Iran. Tel: +98-9173364806, E-mail: ali.hayat63@gmail.com

Received 2015 February 21; Revised 2015 June 29; Accepted 2015 July 05.

Abstract

Background: Organizational commitment is one of the most popular work attitudes, studied by the researchers. The high levels of employee commitment lead to several important outcomes at individual and organizational levels. Therefore, it is crucial to identify the factors that influence organizational commitment, with special reference to organizational health.

Objectives: The purpose of this study is to examine the relationship between schools' organizational health and teachers' organizational commitment in Shiraz high schools.

Patients and Methods: The statistical population consisted of Shiraz secondary school male teachers. The multistage cluster random sampling method was used to select 250 subjects based on Kersji and Morgans' table (1978). The organizational health inventory (OHI) was used to measure the health of secondary schools. An organizational commitment scale was then utilized to measure teachers' organizational commitment. One-Sample T- test, Pearson correlation and multiple regression tests were used for data analysis.

Results: The findings indicated that schools' organizational health and its dimensions including institutional integrity, consideration, resource support, morale and academic emphasis were at moderate level, but the initiating structure and principal influence were at low level. Also, teacher's commitment and its dimensions (emotional commitment and continuance commitment) were at moderate level and normative commitment was at high level. The results showed that the correlation between schools' organizational health and teachers' commitment was 0.64, and the correlation coefficients between teachers' commitment and institutional integrity, initiating structure, consideration, principal influence, resource support, morale and academic emphasis were 0.56, 0.44, 0.42, 0.22, 0.26, 0.16 and 0.65, respectively. The results indicated that the correlation between schools' organizational health and emotional commitment, continuance commitment, and normative commitment were 0.62, 0.32, and 0.66, respectively. Finally, five dimensions of school health- institutional integrity, initiating structure, resource support, morale and academic emphasis positively predicted teacher commitment.

Conclusions: The results of the present study are discussed with regard to developing the organizational health of schools and improving the organizational commitment of teachers. In other words, it can be concluded that teachers in a healthy school are committed to teaching and learning.

Keywords: School, Health, Teachers

1. Background

Teachers are the ultimate key players in school's effectiveness and improvement (1). Also, they are key constituents of education quality (2). The quality of education is directly associated with the quality of teaching and learning (3). For this reason, comprehensive attention must be given to teacher behavior in the organizational environment of schools (4), since the actual education reform process occurs in the classroom, which means that the responsibilities of improving the quality standard falls on teachers. Hence, in this context, it is believed that teachers' dedication and commitment are vital in quality education. In this sense, teachers' organizational commitment

has been ratified as one of the most crucial factors contributing to the future success of educational system and schools (1).

Organizational commitment is one of the most popular work attitudes, studied by the researchers (5-7). However, most of the research on organizational commitment has been done within industrial organizational and occupational settings. Very little research on organizational commitment has been conducted within educational settings. In the past several decades, an impressive body of literature has been dedicated to understanding the nature, antecedents, and consequences of organizational commitment (8). Organizational commitment is important, for high levels of commitment will result in several impor-

tant outcomes at individual and organizational levels (8-11). Studies indicate that commitment is negatively related to turnover (8, 12-14), burnout (15-17), stress (10), absenteeism, low levels of morale (16), and counterproductive behavior (18) and positively related to job satisfaction (6-8, 19-22), well-being (23), strategies of conflict resolution (24), team effectiveness (25), motivation (13), job performance (8, 26-28), effectiveness (4), student achievement (5, 9), sustained employee's physical health (10), and organizational citizenship behavior (29, 30). Organizationally committed employees are more satisfied at work, wasted less time in their jobs and are less likely to give up the organization (19). Inversely, those with low commitment go through the dilemmas that badly influence the effectiveness of school and cause teachers to be less successful in their professional performance or to leave the occupation (19). In this context, some researchers believe that academic achievement, student satisfaction, student behavior, teacher turnover, and administrative performance are some of the main factors related to the teachers' commitment (5).

Organizational commitment is referred to as a combination of three crucial factors: (1) a strong faith in and admission of the organizational goals and values, (2) a willingness to exercise a great deal of effort on behalf of the organization, and (3) a strong desire to stay a member of the organization (26, 31). Teachers' organizational commitment defined as the relative strength of their identification with and involvement in a particular school. According to this view, teacher organizational commitment may be manifested by a strong belief in and acceptance of the school's values and goals, a willingness to significantly attempt on behalf of the school, and a strong desire to stay a member of the school (14, 16).

Allen and Mayer viewed organizational commitment as a multidimensional concept. They introduced a three-component model, including: affective, continuance, and normative commitment (26, 32, 33). Effective commitment as employee's emotional attachment to, identification with, and involvement in the organization reflected as positive feelings or emotions toward the organization has been defined (8). Employees with high affective commitment keep on working voluntarily and eagerly (31). Continuance commitment refers to an individual's awareness of the costs of breaking away from the organization. An employee with a high level of continuance commitment remains a member of the organization owing to a need to do so. Normative commitment is the feeling of obligation to stay employed by the organization. Employees with a high level of normative commitment believe they should remain as members of the organization, sometimes because of pressure on the part of other employees (31). Vir-

tually, a great deal of studies has been done to determine factors contributing to the development of organizational commitment (10). Researchers place these factors into different groups. For example, Charles Schwenk mentioned that these factors were demographic features, previous experiences, situational, and organizational factors (34). In this context, organizational health has been identified as one of the most important factors influencing organizational commitment (3, 27, 31, 35-37).

Organizational health is a general term that refers to teachers' perceptions of their work environment (38) and personal attachment to the school (39). Also, organizational health refers to the interpersonal relations of students, teachers, and administrators in a school (37). Organizational health is defined as the ability of the organization how to deal with the tensions of competing and diverse values (40). Also, this concept has been considered a meaningful construct for getting to understand teacher behavior because a school's environmental properties can hardly affect teachers' perceptions and attitudes. The construct of organizational health offers an integrating framework for exploring the individual and organization levels influences on outcomes essential for effectiveness (31). As an indicator of a school's psycho-social status, organizational health affects the behaviors of teachers, including the attitudes related to organizational commitment (4, 16, 31, 35-37). Teachers working in healthy schools are committed to teaching and learning activities. They set high expectations associated with student performance goals, seek to gain high standards, and create a serious learning environment. Thus, students try hard and are encouraged to attain high levels (27).

Healthy schools draw out organizational commitment because teachers are safeguarded from unwarranted interference; principals develop structures, resources, consideration, and positive reinforcement, subsequently teachers get along well with each other and set high but attainable academic standards for students (27). Such schools are also characterized by successful professional practice, high levels of student achievement (31, 41), low stress for teachers, and job satisfaction (31, 39, 42, 43), more positive perceptions of students (39), lower burnout (41) and effective teaching and learning (31). As a result, healthy schools put a lot of effort into improving and fostering the mechanisms necessary to develop and maintain teacher organizational commitment. In this regard we can say that teachers in a healthy school are committed to teaching and learning activities and believe that every student will be successful when they try hard and acknowledge the academic efforts of their peers (31).

Celep and Mete examined how organizational health and teacher commitment are interrelated. They reported

that teachers' affective and normative kinds of commitment had a positive correlation with school organizational health, but unrelated to continuance commitment (31). In a study on the relationships between teachers' perceived organizational commitment and school health in Turkish primary schools, Sezgin reported that teacher compliance commitment had a negative relationship to both identification and internalization. Three components of schools' organizational health, that is, morale, institutional integrity, and principal influence negatively predicted teacher commitment (31).

The relationship between organizational health and organizational commitment has been investigated in Ahvaz university of medical sciences and a significant positive relationship has been found between organizational health and organizational commitment. Also, a positively significant relationship was observed between dimensions of organizational health including support resources, principal influence, morale and academic emphasis and organizational commitment (37).

Bahramian and Saeidian investigated the relationship between organizational health, teachers' organizational commitment and their perception of elementary schools principals. The findings indicated that there was a significantly positive relationship between the organizational health and the teachers' perception of the managers' performance, as well as between the organizational health and teachers' organizational commitment (37).

Lin and Lin studied a multilevel model of organizational health culture and the effectiveness of health promotion, and indicated that organizational health culture had a significant effect on the planning effectiveness and production of health promotion. Also, results showed that the effects of organizational health culture on three components of staff effectiveness were completely mediated by health behavior (44).

Hicks in his study discovered that effective and appropriate communication styles can promote organizational health (45).

Bevans et al. investigated the Staff- and school-level predictors of school organizational health and showed that both school- and staff-level characteristics could predict school organizational health (43).

Hussein in his study discovered that relationship between participants' perception of organizational health and the predictors of the quality of patient care were positive and significant (46).

Dudek-Shriber in his study discovered that organizational health from point of views both director and faculty respondents were at the high level. Also, the relationship between leadership and organizational health was significant and strong (47).

2. Objectives

This study aimed to determine the relationship between teacher organizational commitment and school organizational health in a sample of Iranian secondary schools, in relation to the following objectives:

- 1- Determining the status of teacher organizational commitment and school organizational health
- 2- Studying the relationship between teacher organizational commitment and dimensions of school organizational health
- 3- Establishing the contribution of each dimensions of school organizational health in predicting the teachers' organizational commitment

3. Patients and Methods

The current study was a field and descriptive study of correlational type. The statistical population consisted of secondary school male teachers in the city of Shiraz, comprising 250 subjects selected by multi-stages cluster random sampling method and Kersji and Morgans' table. Data were analyzed using SPSS Version 16.0. Descriptive analysis representing mean scores, and inferential statistics including correlation analysis were run to examine the relationship between two variables. Multiple linear regression analysis was also used to test the contribution of each dimensions of school organizational health in predicting the teacher organizational commitment.

3.1. Organizational Health Inventory (OHI)

In order to measure secondary schools health, we administered the organizational health inventory (OHI). This inventory was first designed and developed to measure the health of secondary schools (31). Organizational health inventory has 44 items rated on a 5-point Likert scale. The scores on this inventory are in the range of 44 to 220. Hoy and Feldman examined organizational health in seven dimensions, including Institutional integrity, initiating structure, consideration, principal influence, resource support, morale and academic emphasis (31, 37). Some other studies have tested the validity and reliability of OHI (27, 31). Nevertheless in our research a pilot study (involving 40 teachers) was conducted to measure internal consistency with Cronbach alpha 0.83.

3.2. Teachers' Organizational Commitment

In the second part, an organizational commitment scale was used to measure the levels of organizational commitment of teachers. There are different classifications of

organizational commitment (48), of which the most frequently used is that of Allen and Meyer (1990). This classification is widely used in recent years and subjected to new conceptualizations and evaluation studies (43, 48, 49). Organizational commitment scale has 24 items rated on a 5-point Likert scale. The scores on this scale are in the range of 24 to 120. It includes three sub-dimensions including emotional commitment, continuance commitment and normative commitment (26, 50, 51). Some other studies have tested this scale in terms of validity and reliability (8, 37). Nevertheless in our research a pilot study (involving 40 teachers) was conducted to measure internal consistency with Cronbach alpha 0.78.

4. Results

We run one sample t-test to examine the status quo of teachers' organizational commitment. Hence, three classes including Low Status: 1-2.33, moderate status: 2.34-3.67 and high status: 3.68-5 were distinguished by applying the following formula (Equation 1):

$$\text{status quo} = \frac{\text{Highest possible score} - \text{Lowest possible score}}{\text{Categories}} \quad (1)$$

(Highest possible score - Lowest possible score) / Categories = (5 - 1) / 3 = 1.33 (38).

The results of t-test showed that organizational commitment and all its dimensions among teachers was at moderate level, except normative commitment which was at highest level (Table 1).

As presented in Table 2, Schools' organizational health and its dimensions are at the moderate level. But only initiating structure and principal influence are at low level.

The primary goal of this investigation was to assess the relationship between schools' organizational health and teachers' organizational commitment. As shown in Table 3, there was a significant and positive relationship between schools' organizational health and teachers' organizational commitment.

The findings showed a significant correlation coefficient of organizational health and its components (Institutional Integrity, Initiating Structure, Consideration, Principal Influence, Resource Support, Morale and Academic Emphasis) with organizational commitment of teachers.

As shown in Table 4, there was a significant and positive relationship between teachers' organizational commitment and its components (emotional commitment, continuance commitment and normative commitment) with schools' organizational health.

Considering the highly significant correlations, a multiple regression analysis was performed to determine the

contribution of each independent variable in predicting the dependent variable. The result of regression showed that among the schools' organizational health dimensions- institutional integrity ($\beta = 0.130$), initiating structure ($\beta = 0.180$), resource support ($\beta = 0.33$), morale ($\beta = 0.37$) and academic emphasis ($\beta = 0.58$) could predict school teachers' organizational commitment.

5. Discussion

According to our findings, teachers' organizational commitment and all its dimensions, except normative commitment which was at a high level, were at a moderate level. Also, results showed that schools' organizational health and its dimensions were at a moderate level. But only initiating structure and principal influence were at low level.

The results of Pearson correlation indicated that there was a significant, high and positive correlation between schools' organizational health and teachers' organizational commitment, which was in agreement with those of previous studies. These studies have linked organizational health to organizational commitment (27, 31, 35-37). In other word, the findings of this study are consistent with the study concerning the fact that organizational health is a predictor of organizational commitment (37). A positive and significant relationship has been indicated between organizational health and teacher commitment (31), the investigation by Bahramian and Saeidian showing positive and significant relationship between organizational health and teachers' organizational commitment (37), the findings of Zahed Babelan indicating the levels of organizational health as predictors of organizational commitment (52), and the study conducted by Nabipour suggesting the relationship between organizational health and organizational commitment (35).

Organizational health must be enhanced to retain the human resources, which are of highest value to the employers. The managers should make efforts toward enhancing organizational health of the enterprises to increase commitment of employees and maintain the low turnover rate of the personnel.

Results indicated that different school health dimensions were significantly related to teachers' commitment. Institutional integrity, initiating structure, consideration, principal influence, resource support, morale and academic emphasis were significantly and positively related to teachers' commitment. Also the results indicated that school health was significantly related to three dimensions of teachers' organizational commitment including emotional, continuance and normative variables.

Table 1. Organizational Commitment and Its Dimensions Among Teachers

Variables	Mini	Max	Mean \pm SD	t	df	Sig	Status
Organizational commitment	2.13	4.50	3.27 \pm 0.42	9.64	249	0.000	Moderate
Emotional commitment			3.14 \pm 0.45	4.50	249	0.000	Moderate
Continuance commitment			2.95 \pm 0.53	1.36	249	0.175	Moderate
Normative commitment			3.74 \pm 0.54	19.84	249	0.000	High

Table 2. Schools' Organizational Health and Its Dimensions

Variables	Mini	Max	Mean \pm SD	T	Df	Sig	Status
Schools' organizational health	1.43	3.46	2.39 \pm 0.25	-34.30	249	0.000	Moderate
Institutional integrity			2.55 \pm 0.47	-13.75	249	0.000	Moderate
Initiating structure			2.31 \pm 0.42	-23.49	249	0.000	Low
Consideration			2.50 \pm 0.40	-17.96	249	0.000	Moderate
Principal influence			2.00 \pm 0.37	-38.70	249	0.000	Low
Resource support			2.46 \pm 0.41	-18.93	249	0.000	Moderate
Morale			2.63 \pm 0.55	-9.55	249	0.000	Moderate
Academic emphasis			2.47 \pm 0.43	-17.35	249	0.000	Moderate

Table 3. Relationship Between Schools' Organizational Health and Teachers' Organizational Commitment

Variables Correlated With Teachers' Organizational Commitment	R Coefficient ^a	Sig
Schools' organizational health	0.64	0.000
Institutional integrity	0.56	0.000
Initiating structure	0.44	0.000
Consideration	0.42	0.000
Principal influence	0.22	0.000
Resource support	0.26	0.000
Morale	0.16	0.021
Academic emphasis	0.65	0.000

^a P < 0.01.**Table 4.** Relationship Between Organizational Commitment, its Components and Schools' Organizational Health

Variables Correlated With schools' Organizational Health	R Coefficient ^a	Sig
Emotional commitment	0.62	0.000
Continuance commitment	0.32	0.000
Normative commitment	0.66	0.000

^a P < 0.01.

In this study, school health dimensions as the predictors of organizational commitment showed that school organizational health is a meaningful construct for understanding and explaining teacher organizational commitment. The results showed that different school health dimensions were significantly associated with teacher commitment. Institutional integrity, initiating structure, resource support, morale and academic emphasis were essential variables to predict teachers' commitment. However, results indicated that two school health dimensions including consideration and principal influence were not significant predictors of teacher commitment. This is not consistent with the findings of some earlier studies (31). Such discrepancies may be related to the nature of study population or sample selection.

It is important to note that our results are limited to secondary school teachers in Shiraz and cannot be extrapolated to other populations, unless further studies are carried out using larger samples of teachers from different provinces. Also, due to the lack of access to female teachers, the survey was conducted exclusively by male teachers. Because of this limitation, the future studies should be carried out to incorporate both male and female teachers. Despite these limitations, the findings of present study are important, because they indicate that fostering school health could promote the teachers' organizational commitment.

Table 5. Model Summary

Model	R	R Square	Adjusted R	Std. Error	F	Sig
1	0.74	0.56	0.55	0.28	37.94	0.000

Table 6. Results of Multiple Regression to Predict the Contribution of Each Dimensions of School Organizational Health in Teacher Organizational Commitment

Model	Non-Standardized Coefficients		Standardized Coefficients	T	Sig
	B	Std. Error	Beta		
Constant	0.84	0.184		4.56	0.000
Institutional integrity	0.115	0.056	0.130	2.05	0.04
Initiating structure	0.179	0.052	0.180	3.43	0.001
Consideration	0.098	0.060	0.094	1.67	0.096
Principal influence	0.087	0.056	0.077	1.54	0.123
Resource support	0.343	0.099	0.335	3.45	0.001
Morale	0.284	0.068	0.379	4.193	0.000
Academic emphasis	0.568	0.069	0.589	8.5174	0.000

References

- Salamat N, Nordin N. Teacher's commitment and emotional intelligence: evidence from Malaysian schools. *Int J Sci Commer Humanities*. 2014;**2**(3):2-3.
- Mitchell MM, Bradshaw CP. Examining classroom influences on student perceptions of school climate: the role of classroom management and exclusionary discipline strategies. *J Sch Psychol*. 2013;**51**(5):599-610. doi: [10.1016/j.jsp.2013.05.005](https://doi.org/10.1016/j.jsp.2013.05.005). [PubMed: [24060062](https://pubmed.ncbi.nlm.nih.gov/24060062/)].
- Mkumbo KAK. Teachers' commitment to, and experiences of, the teaching profession in Tanzania: findings of focus group research. *Int Educ Stud*. 2012;**5**(3):p222. doi: [10.5539/ies.v5n3p222](https://doi.org/10.5539/ies.v5n3p222).
- Tsui KT, Cheng YC. School Organizational Health and Teacher Commitment: A Contingency Study with Multi-level Analysis. *Educ Res Eval*. 1999;**5**(3):249-68. doi: [10.1076/edre.5.3.249.3883](https://doi.org/10.1076/edre.5.3.249.3883).
- Rauf M, Akhtar MS, Mohammad S. Relationship between Organizational Commitment and Job Satisfaction of Teachers Serving as Subject Specialists at Higher Secondary Schools in Khyber Pakhtunkhwa. *Dialogue*. 2013;**8**(2):144-54.
- Velickovic VM, Visnjic A, Jovic S, Radulovic O, Sargic C, Mihajlovic J, et al. Organizational commitment and job satisfaction among nurses in Serbia: a factor analysis. *Nurs Outlook*. 2014;**6**(6):415-27. doi: [10.1016/j.outlook.2014.05.003](https://doi.org/10.1016/j.outlook.2014.05.003). [PubMed: [25062809](https://pubmed.ncbi.nlm.nih.gov/25062809/)].
- Yang J, Liu Y, Chen Y, Pan X. The effect of structural empowerment and organizational commitment on Chinese nurses' job satisfaction. *Appl Nurs Res*. 2014;**27**(3):186-91. doi: [10.1016/j.apnr.2013.12.001](https://doi.org/10.1016/j.apnr.2013.12.001). [PubMed: [24524954](https://pubmed.ncbi.nlm.nih.gov/24524954/)].
- Kappagoda S. The Impact of English Teachers' Organizational Commitment on Their Job Performance in Sri Lankan Schools. *Proceedings of ICBT*. 2011.
- Chughtai AA, Zafar S. Antecedents and consequences of organizational commitment among Pakistani university teachers. *Appl H.R.M. Res*. 2006;**11**(1):39-64.
- Jain AK, Giga SI, Cooper CL. Stress, health and well-being: the mediating role of employee and organizational commitment. *Int J Environ Res Public Health*. 2013;**10**(10):4907-24. doi: [10.3390/ijerph10104907](https://doi.org/10.3390/ijerph10104907). [PubMed: [24157512](https://pubmed.ncbi.nlm.nih.gov/24157512/)].
- Chang IC, Shih CH, Lin SM. The mediating role of psychological empowerment on job satisfaction and organizational commitment for school health nurses: a cross-sectional questionnaire survey. *Int J Nurs Stud*. 2010;**47**(4):427-33. doi: [10.1016/j.ijnurstu.2009.09.007](https://doi.org/10.1016/j.ijnurstu.2009.09.007). [PubMed: [19850293](https://pubmed.ncbi.nlm.nih.gov/19850293/)].
- Han J, Woo H, Ju E, Lim S, Han S. [Effects of nurses' social capital on turnover intention: focused on the mediating effects organizational commitment and organizational cynicism]. *J Korean Acad Nurs*. 2013;**43**(4):517-25. doi: [10.4040/jkan.2013.43.4.517](https://doi.org/10.4040/jkan.2013.43.4.517). [PubMed: [24071756](https://pubmed.ncbi.nlm.nih.gov/24071756/)].
- Han SS, Han JW, An YS, Lim SH. Effects of role stress on nurses' turnover intentions: The mediating effects of organizational commitment and burnout. *Jpn J Nurs Sci*. 2014. doi: [10.1111/jjns.12067](https://doi.org/10.1111/jjns.12067). [PubMed: [25469956](https://pubmed.ncbi.nlm.nih.gov/25469956/)].
- De Gieter S, Hofmans J, Pepermans R. Revisiting the impact of job satisfaction and organizational commitment on nurse turnover intention: an individual differences analysis. *Int J Nurs Stud*. 2011;**48**(12):1562-9. doi: [10.1016/j.ijnurstu.2011.06.007](https://doi.org/10.1016/j.ijnurstu.2011.06.007). [PubMed: [21821254](https://pubmed.ncbi.nlm.nih.gov/21821254/)].
- Gemlik N, Sisman FA, Sigril U. The relationship between burnout and organizational commitment among health sector staff in Turkey. *J Global Strategic Manag*. 2010;**8**:147-59.
- Zhou Y, Lu J, Liu X, Zhang P, Chen W. Effects of core self-evaluations on the job burnout of nurses: the mediator of organizational commitment. *PLoS One*. 2014;**9**(4):eee95975. doi: [10.1371/journal.pone.0095975](https://doi.org/10.1371/journal.pone.0095975). [PubMed: [24755670](https://pubmed.ncbi.nlm.nih.gov/24755670/)].
- Peng J, Jiang X, Zhang J, Xiao R, Song Y, Feng X, et al. The impact of psychological capital on job burnout of Chinese nurses: the mediator role of organizational commitment. *PLoS One*. 2013;**8**(12):eee84193. doi: [10.1371/journal.pone.0084193](https://doi.org/10.1371/journal.pone.0084193). [PubMed: [24416095](https://pubmed.ncbi.nlm.nih.gov/24416095/)].
- Dalal RS. A meta-analysis of the relationship between organizational citizenship behavior and counterproductive work behavior. *J Appl Psychol*. 2005;**90**(6):1241-55. doi: [10.1037/0021-9010.90.6.1241](https://doi.org/10.1037/0021-9010.90.6.1241). [PubMed: [16316277](https://pubmed.ncbi.nlm.nih.gov/16316277/)].
- Chavez FC. The Relationship Between Burnout and Organizational Commitment among Health Sector Staff in Turkey. *Southeast Asian Interdiscip Res J*. 2013;**1**(1).

20. Kamau C, Medisaukaite A, Lopes B. Inductions buffer nurses' job stress, health and organizational commitment. *Arch Environ Occup Health*. 2014. doi: [10.1080/19338244.2014.891967](https://doi.org/10.1080/19338244.2014.891967). [PubMed: [24971576](https://pubmed.ncbi.nlm.nih.gov/24971576/)].
21. Chang CS. Moderating Effects of Nurses' Organizational Support on the Relationship Between Job Satisfaction and Organizational Commitment. *Western J Nurs Res*. 2015;**37**(6):724-45.
22. Li A, Early SF, Mahrer NE, Klaristenfeld JL, Gold JL. Group cohesion and organizational commitment: protective factors for nurse residents' job satisfaction, compassion fatigue, compassion satisfaction, and burnout. *J Prof Nurs*. 2014;**30**(1):89-99. doi: [10.1016/j.profnurs.2013.04.004](https://doi.org/10.1016/j.profnurs.2013.04.004). [PubMed: [24503320](https://pubmed.ncbi.nlm.nih.gov/24503320/)].
23. Sawada T. [The relationships among occupational and organizational commitment, human relations in the workplace, and well-being in nurses]. *Shinrigaku Kenkyu*. 2013;**84**(5):468-76. [PubMed: [24505973](https://pubmed.ncbi.nlm.nih.gov/24505973/)].
24. Pinho P, Albuquerque C. [Influence of organizational commitment and professional nurses in conflict resolution strategies]. *Servir (Lisbon, Portugal)*. 2012;**58**(1-2):103-16.
25. Freund A, Drach-Zahavy A. Organizational (role structuring) and personal (organizational commitment and job involvement) factors: do they predict interprofessional team effectiveness? *J Interprof Care*. 2007;**21**(3):319-34. doi: [10.1080/13561820701283918](https://doi.org/10.1080/13561820701283918). [PubMed: [17487709](https://pubmed.ncbi.nlm.nih.gov/17487709/)].
26. Allen NJ, Meyer JP. The measurement and antecedents of affective, continuance and normative commitment to the organization. *J Occup Psychol*. 1990;**63**(1):1-18. doi: [10.1111/j.2044-8325.1990.tb00506.x](https://doi.org/10.1111/j.2044-8325.1990.tb00506.x).
27. Tarter CJ, Hoy WK, Kottkamp RB. School health and organizational commitment. *J Res Dev Educ*. 1990;**23**(4):236-242.
28. Luchak AA, Gellatly IR. A comparison of linear and nonlinear relations between organizational commitment and work outcomes. *J Appl Psychol*. 2007;**92**(3):786-93. doi: [10.1037/0021-9010.92.3.786](https://doi.org/10.1037/0021-9010.92.3.786). [PubMed: [17484557](https://pubmed.ncbi.nlm.nih.gov/17484557/)].
29. Feather NT, Rauter KA. Organizational citizenship behaviours in relation to job status, job insecurity, organizational commitment and identification, job satisfaction and work values. *J Occup Organ Psychol*. 2004;**77**(1):81-94. doi: [10.1348/096317904322915928](https://doi.org/10.1348/096317904322915928).
30. Kazemipour F, Mohamad Amin S, Pourseidi B. Relationship between workplace spirituality and organizational citizenship behavior among nurses through mediation of affective organizational commitment. *J Nurs Scholarsh*. 2012;**44**(3):302-10. doi: [10.1111/j.1547-5069.2012.01456.x](https://doi.org/10.1111/j.1547-5069.2012.01456.x). [PubMed: [22804973](https://pubmed.ncbi.nlm.nih.gov/22804973/)].
31. Sezgin F. Examining the relationship between teacher organizational commitment and school health in Turkish primary schools. *Educ Res Eval*. 2009;**15**(2):185-201. doi: [10.1080/13803610902820115](https://doi.org/10.1080/13803610902820115).
32. Tsai Y. Learning organizations, internal marketing, and organizational commitment in hospitals. *BMC Health Serv Res*. 2014;**14**:152. doi: [10.1186/1472-6963-14-152](https://doi.org/10.1186/1472-6963-14-152). [PubMed: [24708601](https://pubmed.ncbi.nlm.nih.gov/24708601/)].
33. Mosadeghrad AM, Ferdosi M. Leadership, job satisfaction and organizational commitment in healthcare sector: proposing and testing a model. *Mater Sociomed*. 2013;**25**(2):121-6. doi: [10.5455/msm.2013.25.121-126](https://doi.org/10.5455/msm.2013.25.121-126). [PubMed: [24082837](https://pubmed.ncbi.nlm.nih.gov/24082837/)].
34. Aydin A, Sarker Y, Uysal S. The Effect of Gender on Organizational Commitment of Teachers: A Meta Analytic Analysis. *Educ Sci Theory Pract*. 2011;**11**(2):628-32.
35. Nabipour HK, Zainally Pour H, Rahmani MN. Investigation of the relationship between organizational health and organizational commitment with positive attitude toward change among primary school principals of Tehran city. Nabipour H K, Zainally Pour H, Rahmani M N. *Eur Online J Natl Soc Scie*. 2014;**3**(1):176-84.
36. Yüceler A, Doğanalp B, Kaya ŞD. The relation between organizational health and organizational commitment. *Mediterr J f Soc Sci*. 2013;**4**(10):781.
37. Bahramian A, Saeidian N. The Relationship between Organizational Health, Teachers' Organizational Commitment and their Perception of Elementary Schools Principals at Region 2, Esfahan in the Academic Year 2012-2013. *Eur Online J Natl Soc Sci*. 2013;**2**(3):2388-96.
38. Khademfar M, Idris K. The Relationship between Transformational Leadership and Organizational Health in Golestan Province of Iran. *Int J Humanit Soc Sci*. 2012;**2**(12).
39. Bottiani JH, Bradshaw CP, Mendelson T. Promoting an equitable and supportive school climate in high schools: the role of school organizational health and staff burnout. *J Sch Psychol*. 2014;**52**(6):567-82. doi: [10.1016/j.jsp.2014.09.003](https://doi.org/10.1016/j.jsp.2014.09.003). [PubMed: [25432272](https://pubmed.ncbi.nlm.nih.gov/25432272/)].
40. Orvik A, Axelsson R. Organizational health in health organizations: towards a conceptualization. *Scand J Caring Sci*. 2012;**26**(4):796-802. doi: [10.1111/j.1471-6712.2012.00996.x](https://doi.org/10.1111/j.1471-6712.2012.00996.x). [PubMed: [22571624](https://pubmed.ncbi.nlm.nih.gov/22571624/)].
41. Sabancı A. The effect of primary school teachers' burnout on organizational health. *Procedia Soc Behav Sci*. 2009;**1**(1):195-205.
42. Mehta TG, Atkins MS, Frazier SL. The Organizational Health of Urban Elementary Schools: School Health and Teacher Functioning. *School Ment Health*. 2013;**5**(3):144-54. doi: [10.1007/s12310-012-9099-4](https://doi.org/10.1007/s12310-012-9099-4). [PubMed: [23935763](https://pubmed.ncbi.nlm.nih.gov/23935763/)].
43. Bevans K, Bradshaw C, Miech R, Leaf P. Staff- and school-level predictors of school organizational health: a multilevel analysis. *J Sch Health*. 2007;**77**(6):294-302. doi: [10.1111/j.1746-1561.2007.00210.x](https://doi.org/10.1111/j.1746-1561.2007.00210.x). [PubMed: [17600586](https://pubmed.ncbi.nlm.nih.gov/17600586/)].
44. Lin YW, Lin YY. A multilevel model of organizational health culture and the effectiveness of health promotion. *Am J Health Promot*. 2014;**29**(1):e53-63. doi: [10.4278/ajhp.121116-QUAN-562](https://doi.org/10.4278/ajhp.121116-QUAN-562). [PubMed: [24200255](https://pubmed.ncbi.nlm.nih.gov/24200255/)].
45. Hicks JM. Leader communication styles and organizational health. *Health Care Manag (Frederick)*. 2011;**30**(1):86-91. doi: [10.1097/HCM.0b013e3182078bf8](https://doi.org/10.1097/HCM.0b013e3182078bf8). [PubMed: [21248553](https://pubmed.ncbi.nlm.nih.gov/21248553/)].
46. Hussein AHM. Relationship between nurses' and physicians' perceptions of organizational health and quality of patient care. *Eastern Mediterr Health Res*. 2014;**20**(10).
47. Dudek-Shriber L. Leadership qualities of occupational therapy department program directors and the organizational health of their departments. *Am J Occup Ther*. 1997;**51**(5):369-77. [PubMed: [9127063](https://pubmed.ncbi.nlm.nih.gov/9127063/)].
48. Yilmaz K. The Relationship Between Organizational Trust and Organizational Commitment in Turkish Primary Schools. *J Appl Sci*. 2008;**8**(12):2293-9. doi: [10.3923/jas.2008.2293.2299](https://doi.org/10.3923/jas.2008.2293.2299).
49. Top M, Tarcan M, Tekingunduz S, Hikmet N. An analysis of relationships among transformational leadership, job satisfaction, organizational commitment and organizational trust in two Turkish hospitals. *Int J Health Plann Manage*. 2013;**28**(3):e217-41. doi: [10.1002/hpm.2154](https://doi.org/10.1002/hpm.2154). [PubMed: [23239046](https://pubmed.ncbi.nlm.nih.gov/23239046/)].
50. Honda Y, Hoshi Y, Mizuno M. Consequences of organizational commitment in abolished company sports team - a case study in Japan. *Work*. 2012;**41** Suppl 1:5754-5. doi: [10.3233/WOR-2012-0940-5754](https://doi.org/10.3233/WOR-2012-0940-5754). [PubMed: [22317676](https://pubmed.ncbi.nlm.nih.gov/22317676/)].
51. Jahangir F, Shokrpour N. Three components of organizational commitment and job satisfaction of hospital nurses in Iran. *Health Care Manag (Frederick)*. 2009;**28**(4):375-80. doi: [10.1097/HCM.0b013e3181b3eade](https://doi.org/10.1097/HCM.0b013e3181b3eade). [PubMed: [19910713](https://pubmed.ncbi.nlm.nih.gov/19910713/)].
52. Zahed B. A Study of the Relationship between Organizational Health and Organizational Commitment of Boys' High School Teachers in Ardebil Province. *Educ Psychol Q*. 2007.