

Organizational Health at mid-West Bank Government Schools: Analysis of Teachers' and Administrators' Perceptions

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Abstract: The objective of this study was to investigate the perceptions of teachers and school administrators about organizational health at government schools at mid-West Bank, Palestine. The sample of the study consisted of 62 administrators and 610 teachers from 39 selected schools. An Arabic version of the Organizational Health Inventory OHI was used to collect data. Results revealed that respondents perceived organizational health at their schools positively. Morale dimension got the highest mean, while academic emphasis got the lowest mean. No statistically significant differences among respondents' perceptions were found. (**Keywords:** organizational health, government schools, West Bank, effectiveness).

الصحة التنظيمية في المدارس الحكومية في وسط الضفة الغربية: تحليل إدراكات المعلمين والإداريين

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ملخص: هدفت هذه الدراسة تعرف إدراكات المعلمين والإدارات المدرسية للصحة التنظيمية في المدارس الحكومية في وسط الضفة الغربية في فلسطين. شملت عينة الدراسة 62 إدارياً و610 معلماً من 39 مدرسة مختارة. وتم جمع بيانات الدراسة باستخدام نسخة معربة من مقياس الصحة التنظيمية Organizational Health Inventory (OHI). وأشارت النتائج أن المبحوثين يقدرون الصحة التنظيمية في مدارسهم بشكل إيجابي، وأن بُعد الروح المعنوية حصل على أعلى المتوسطات الحسابية، بينما حصل بُعد التركيز الدراسي على أقلها. ولم تظهر النتائج فروقاً ذات دلالة إحصائية بين استجابات المبحوثين بحسب متغيرات الدراسة [عمل المستجيب، وجنسه، وخبرته، ومؤهله العلمي، ومستوى المدرسة].

Introduction

Issues of educational reform and school improvement have long focused on the roles of both teachers and school administrators. Some researchers (Rivkin, Kain, & Hanushek, 2005; Sezgin, 2009) confirm that the teacher is the key element to school effectiveness because it is the teacher who organizes instruction, communicates learning goals, assesses students' progress, and adjusts the content as well as interaction of the classroom in response. Valente (1999) asserts that the direct influence to the success of students is the teacher, not the principal, which implies that he/ she be empowered. For other researchers (Brown, Benkovitz, Muttillio, & Urban, 2011; Kane & Staiger, 2008; Sergiovanni, 1999; West, 2011), it is the principal who makes the difference. The principal encourages academic achievement, offers instructional feedback, creates a setting for teamwork and excellence, builds up a highly-functioning development community, and establishes equity in serving students. According to Hallinger and Heck (1998), principals have indirect impact on learning through the culture and climate of the school. It is argued that if students are to learn effectively and attain goals, effective schools, not just effective classrooms, are vital.

Otherwise, if a student moves from one classroom to another, his or her achievement gains will be negated (Kane & Staiger, 2008). In conjunction with this focus, an important question is facing educators and researchers, and that question is "what kind of school environment is functional for students to learn and for teachers to teach"? In actuality, a healthy environment is the prescription.

Health has become part of the language of not only medics and medical community, but also the language of educators and researchers. While physicians and health practitioners are concerned about the attainment of individual health and well-being, administrators and human resources specialists, in educational fields and otherwise, show concern about the well-being of the organization as well. Undoubtedly, in order for the school to achieve set goals and objectives, it should have the capacity and potential to carry out its mission, that is, it should be healthy. A school as an organization, likewise individual students, teachers, and principals, may either be healthy and functional, or unhealthy and dysfunctional. For the school to be healthy, all its subsystems should be functioning in harmony. According to Hoy, Tarter, & Kottkamp (1991), healthy organizations avoid persistent ineffectiveness.

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Organizational health and school effectiveness are juxtaposed concepts. It can therefore be concluded that ineffective schools indicate that their environments are unhealthy; unhealthy school environments indicate that schools will not function effectively, nor will they achieve effective gains. Economically speaking, the direct and indirect costs of unhealthy school environments are huge. Unhealthy environments impose additional cost burdens upon the school and the governing bodies. When school environments are unhealthy, teachers may develop the intent to leave (Shapira-Lishchinsky & Rosenblatt, 2009; Smits, 2009), have spurious morale (Lattimar, 2007), and yield dissatisfaction with the job (Kadushin & Kulys, 1995; Klassen & Anderson, 2009); these sorts of demeanor will result in extra cost for new employment, training, and treatment. Furthermore, in unhealthy school environments, students may drop out (Abdeen, 2001), involve in chaos, disorder, and fear (Akibo, 2010; Chen & Weikart, 2008), and fail to get excellent accomplishments (Roberts, Edgerton, & Peter, 2008), all of which are signs of dissipate and attrition of school monies and resources.

Research has used a variety of terms related to the organizational health concept. Of those terms are school management, activities, culture, and climate (Özan & Özdemir, 2010; Shoaf, Genaidy, Karwowski, & Huang, 2004). To determine whether an organization is healthy or not, research explores the conditions that create a psychologically, physically, and socially healthy work place (Grawitch & Barber, 2009).

Although organizational health is an important concept within educational organizations, it is not prevalent in the Palestinian educational research contexts. With the exception of Atalla (1996) and Hajjar (2006), Palestinian researchers tended to use the terms of organizational climate (Musleh, 2004; Orikat, 2003) and organizational culture (Abdeen, 2011). In this research, focus is being given to organizational health.

Theoretical Framework

The roots of organizational health concept emerged in the middle of last century when humanistic researchers like Argyris, Maslow, McGregor, and Vroom showed concern about workers and the way they were treated at work. Those humanistic researchers endeavored to link job content to the well-being of workers in the context of effective organizations, thus leading to the formation of basis for organizational health (Shoaf et al., 2004). In education field, Miles (1969) first proposed the term organizational health to examine the school climate. Miles asserted that healthy organizations are organizations that survive in their environments, succeed in coping, and continuously develop and extend their survival and coping. In Miles's words, organizational health is "the school system's ability not only to function effectively, but also to develop and grow into a more fully-functioning system"

(1969, p. 378). Thus, this term was metaphorically used to describe the interpersonal relations of students, teachers, and administrators in a school (Hart, Conn, & Carter, 1992). Korkmaz (2006) illustrated that the term "organizational health" was used by researchers to refer to "the ability to adapt an organization to its environment, create harmony among its members, and achieve its goals" (p. 19). Therefore, organizational health could be considered as a sign of the functioning of the school and interrelationships among staff and between staff and school administrators.

The emergence of the term "organizational health" has made educators focus on internal elements of the educational system, rather than exclusively limit themselves to external elements, such as population growth, community characteristics and support, and finance (Korkmaz, 2006). Researchers examine organizational health of schools in order to determine the need for change and renovation (Clark & Fairman, 1983), to diagnose flows and solve problems at the school (Tarter, Hoy, & Kottkamp 1990), and to ascertain opportunities and threats at the school (Bevans, Bradshaw, Meich, & Leaf, 2007).

Earlier in 1969, Miles introduced ten dimensions of organizational health under three main categories: task needs, maintenance needs, and growth and development needs. The first group included goal focus, communication adequacy, and optimal power equalization. The second set of dimensions included resource utilization, cohesiveness, and morale. Lastly, the growth and development category included innovativeness, autonomy, adaptation, and problem-solving adequacy. In following years, different attempts that were made to develop instruments to measure organizational health (Childers & Fairman, 1986; Clark & Fairman, 1983; Kimpston & Sonnabend, 1975; Neugebauer, 1990) ended with wide criticism. Later, Hoy et al. (1991) managed to develop the Organizational Health Inventory (OHI) to describe and measure organizational health at schools. OHI for secondary level conceptualized seven dimensions representing the basic needs of social systems and the levels of control in organizations. These dimensions were: institutional integrity, initiating structure, consideration, principal influence, resource support, morale, and academic emphasis.

Healthy schools function in harmony in all levels: technical, managerial, and institutional levels, which in turn supports teaching and learning (Hoy & Miskel, 1996; Hoy & Tarter, 1997). As previously expounded by Parsons (1967), the technical level refers to the processes of teaching and learning at school, the managerial level refers to the administrative systems of internal coordination and resource allocation within the school, and the institutional level refers to the inter- and intra-relationships among the school human resources and between the school and its larger social

environment. Research (Hoy & Feldman 1987; Tarter et al., 1990) has suggested that the dimensions of organizational health include morale and academic emphasis at the technical level; principal influence, consideration, initiating structure, and resource allocation at the managerial level; and institutional integrity at the institutional level.

At the technical level, “morale” entails the formation of feelings of friendliness, trust, confidence, openness, and success among teachers. “Academic emphasis” entails that the school has high and achievable standards for student achievement and provides orderly systems for teaching and learning activities. At the managerial level, “principal influence” reflects the principal’s ability to influence the behavior of superiors and decisions pertaining to the school. “Consideration” refers to the friendliness, support, collaboration, and openness of the principal. “Institutional structure” stands for the principal’s task-oriented behaviors. Finally, “resource support” refers to the principal’s responsibility for furnishing sufficient materials and providing extra materials when needed. At the institutional level, “institutional integrity” refers to the ability of the school to cope with disruptive external forces in its environment and direct their energies toward the educational mission. Thus, a healthy school protects teachers from unreasonable demands and supports instructional activities (Hoy & Feldman, 1987; Hoy & Hannum, 1997; Hoy et al., 1991).

In 2007, Korkmaz developed a Turkish form of five dimensions of organizational health instead of seven dimensions. Having combined principal influence, consideration, and initiating structure into a newly-named dimension, professional leadership, Korkmaz’s organizational health dimensions were academic emphasis, institutional integrity, morale, resource support, and professional development. Sezgin (2009) used Korkmaz’s category in his research.

Regardless of what or how many dimensions organizational health has, it requires that schools acquire sufficient resources to achieve goals effectively, to maintain solidarity with the school, to create and preserve a value system, and to meet its needs (Hoy & Miskel, 1996; Hoy, Tarter, & Bliss, 1990). Healthy schools “must mobilize their resources to achieve their goals as well as infuse common values into the work group” (Hoy et al., 1991, p. 56). In conceptualizing the school organizational health, two considerations arise. First, school organizational health should reflect the interactions among the school members (students, teachers, principals, and other school citizens) who take different roles in the school as a social system. Secondly, school organizational health should reflect the schools’ potential to perform its various functions at all levels in harmony and to direct its energies towards its mission (Tsui & Cheng, 1999).

Numerous studies have indicated that there are many correlates to organizational health. For example, Cemaloğlu (2006) has studied the relationship between organizational health and bullying teachers experience at primary schools. Research has also found that school environment is associated with teacher motivation and commitment (Hoy et al., 1991; Nir, 2002; Sezgin, 2009), with trust (Cosner, 2009; Smith, Hoy, & Sweetland, 2001), and with students achievement (Bevans et al., 2007; Brown, Roney, & Anfara, 2009; Henderson et al., 2005; Hoy & Hannum, 1997; MacNeil, Porter, & Busch, 2009; Marshall, Pritchard, & Gunderson, 2004). Moreover, significant relationships have been identified between organizational health on one hand, and robust school vision (Korkmaz, 2006) and school leadership (Fliegner, 1984; Korkmaz, 2007) on the other hand. Marshall et al. (2004) has found that there is a significant relationship between Deming’s total quality principles and organizational health of schools. However, teachers’ influence on the organizational health of schools is statistically less significant than that of the principal (Valente, 1999).

Research on organizational health has revealed various results. In his research on teachers’ and principals’ perceptions about organizational health of elementary schools at Gaza Strip, Hajjar (2006) has found that organizational health is positive with a 2.10 mean score (max = 3.0) which is equal to 70%. Attala (1996) has found that organizational health at government and UNRWA schools in Nablus (West Bank, Palestine) is not high, and that consideration, initiating structure, and morale have got the highest means. Korkmaz (2006) has found that teachers perceive organizational health of Turkish schools fairly positively (average mean score = 2.5; max = 4.00), and that healthy organizations have robust school visions. Sezgin (2009) has found that organizational health dimensions of institutional integrity, professional leadership, and morale which respectively represent institutional, managerial, and technical levels are most related to organizational commitment.

Social cognitive theory (Bandura, 2001) suggests that perceptions of teachers as well as principals about school environment are expected to have influence on their behaviors. Those who perceive their schools to be organizationally healthy tend to have greater commitment to their institutions, thus affecting the quality of education provided to students (Tsui & Cheng, 1999). Having this in mind, this study comes in this context, that is, it investigates the perceptions of school level educators (teachers, principals, and vice principals) about organizational health of their schools.

Purpose of the Study

This research seeks to determine teachers’ and administrators’ perceptions of the organizational health of the school (i.e. the well-functioning of the school and its work environment), because it is believed that

perceptions of the work environment will indirectly influence job performance and the quality of education at schools. According to Hoy & Miskel (1996) and Owens (1991), the school organizational health can be used to investigate the relationship between school environment and teacher performance. In specific, the objective of this study is to compare the perceptions of teachers and school administrators (principals and vice-principals) about organizational health at government schools at mid-West Bank, Palestine. The following research questions are specifically put forward:

1. What are the perceptions of teachers and school administrators at mid-West Bank government schools about the organizational health of their schools?
2. Are there statistically significant differences at ($\alpha \leq 0.05$) level of significance between teachers' and administrators' perceptions about organizational health due to sort of job, gender, years of experience, level of education, and school level?

Methodology

Research Design

This descriptive study was designed to survey teachers' and school administrators' perceptions about organizational health, and to compare one to the other through determining statistically significant differences between responses means. Sort of job, gender, years of experience, level of education, and school level were identified as independent variables in the study. It was hypothesized that there were no statistically significant differences at ($\alpha \leq 0.05$) level of significance between teachers' and administrators' perceptions about organizational health due to sort of job, gender, years of experience, level of education, and school level.

Participants (Population and Sample)

The population of this study consisted of all government schools at mid-West Bank Palestinian cities. These schools lie in the cities of Bethlehem, Jericho, Jerusalem, and Ramallah. According to available data from the Ministry of Education, the total number of these schools was 388 basic and secondary schools. A 10% cluster sample from the school population, i.e., 39 schools, was randomly picked up. There were 39 principals, 39 full-time or part-time vice principals, and 858 teachers at the selected schools. The researcher considered all 78 administrators, of whom 36 were males and 42 were females, and all teachers, of whom 334 were males and 524 were females, at the selected schools as the sample of the study.

Data Collection (Instrument)

The researcher developed a two-part questionnaire to collect data from participants. Part one solicited demographic information from participants about their sort of job (administrator or teacher), gender, years of experience, level of education, and school level. Part two was comprised of 44 items answered on a 4-degree *Likert* rating scale from 1 (rarely) to 4 (very frequently).

In order to come up with these items, the researcher followed the Organizational Health Inventory (OHI) (See Appendix 1) which was originally developed by Hoy, Tarter, and Kottkamp (1991). The researcher got the permission of OHI developers to make use of the tool in this research (Appendix 2). The original OHI focused on the organization as the unit of analysis for organizational health. It consisted of 44 items covering seven dimensions of organizational health: institutional integrity, principal influence, consideration, initiating structure, resource support, moral, and academic emphasis. OHI was basically developed for use in secondary schools, but this research used it to examine organizational health in secondary and basic schools. The statement of OHI developers that "its framework seem[ed] sound for work in elementary schools" (Hoy, et al., 1991. p. 72) justified its use for both school levels.

As mentioned before, the items of part two came from OHI. First, the researcher prepared a draft of Arabic translation of the OHI 44 items, and asked three experienced teachers of English to review translation and back translate it into English. A few modifications on the wording of certain items were necessary according to reviewers. Next, the researcher asked the favor of five educators who were bilingual in Arabic and English to evaluate the Arabic version in terms of clarity, appropriateness, and translation accuracy. They suggested that item 29 be further modified to suit Palestinian educational system and literature and be possible to measure. Having taken that suggestion into consideration, the instrument (Appendix 3) was thereafter determined valid. Finally, to determine reliability of the instrument, Cronbach alpha reliability coefficient was calculated. Reliability scores for the instrument were relatively high. For the whole instrument, Cronbach alpha coefficient was found to be .91; individual dimension alpha coefficients were as follows: institutional integrity (.81), principal influence (.82), consideration (.72), initiating structure (.83), resource support (.89), morale (.87), and academic emphasis (.74).

Once approval to carry out the study was received from the top administrative bodies at the Ministry of Education, the instrument was distributed to the selected schools. A week later, the researcher sent a follow-up memo to subjects to urge them to fill in the questionnaire and send it back to him, if they had not done that yet. By the end of the second week, the researcher managed to receive 691 responses (response rate: 73.8%).

Data Analysis

Both descriptive and analytical statistics were used to analyze data. First, frequencies, percentages, means, and standard deviations were calculated to determine the characteristics of the participants and their perceptions about the organizational health of their

schools. Second, t-test was used to test hypotheses about statistically significant differences between respondents' means with regard to sort of job, gender, and school level, whereas one-way ANOVA was used to test hypotheses about differences with regard to years of experience and level of education. The following criterion was developed to judge the respondents' perceptions about organizational health. Organizational health was considered "highly positive" for means over 3.00 (over 75%), "positive" for means ranging between 2.01 and 3.00 (50.01% - 75%), and "negative" for means 2.0 or less (50% or less). Statistical Package for Social Sciences (SPSS) was used for the data analysis.

Results

Responses were screened to drop out invalid ones. Of the 691 returned responses, 672 responses were completed correctly and were thus considered valid for analysis. Descriptive analysis showed that 62 (9.2%) valid responses came from administrators, whereas 610 valid responses (90.8%) came from teachers. Demographic data analysis also revealed that there were 248 (36.9%) male and 424 (60.1%) female respondents; 171 (25.4%) respondents had a little experience (less than 5 years), 231 (34.4%) had a medium experience (5-10 years), and 270 (40.2%) had a large experience (more than 10 years); and that 410 (61%) respondents worked at basic level and 262 (39%) worked at secondary level. Finally, demographic data analysis

showed that 63(9.4%) persons did not have a bachelor's degree, 531(79%) respondents had a bachelor's degree, and 78 (11.6%) respondents had higher degrees, i.e., masters or higher.

Table 1 shows the descriptive statistics for administrators' and teachers' perceptions about organizational health in general and for its dimensions. The overall mean is 2.88 (72%), and it indicates that respondents perceive organizational health at government secondary schools positively. As shown in the table, the highest mean is associated with morale (mean = 3.15, 78.75%), and it lies in the upper quarter percentage indicating positive perceptions. The other dimensions gain the following means respectively: resource support (mean = 2.99, 74.75%), principal influence (mean = 2.90, 72.5%), initiating structure (mean = 2.87, 71.75%), consideration (mean = 2.84, 71%), institutional integrity (mean = 2.71, 67.75%), and academic emphasis (mean = 2.69, 67.25%). All means indicate that administrators and teachers at Palestinian government schools perceive organizational health positively. Standard deviations values show that perceptions are not very different from one another. The highest degree of homogeneity in perceptions (SD = 0.61) lies in academic emphasis dimension, whereas the lowest degree of homogeneity (SD = 0.37) lies in morale dimension.

Table 1: Means and standard deviations for respondents' perceptions about organizational health.

Dimension	number of items	mean	SD	%	rank
institutional integrity	7	2.71	0.45	67.75	6
principal influence	5	2.90	0.44	72.50	3
consideration	5	2.84	0.50	71.00	5
initiating structure	5	2.87	0.44	71.75	4
resource support	5	2.99	0.46	74.75	2
morale	9	3.15	0.37	78.75	1
academic emphasis	8	2.69	0.61	67.25	7
overall organizational health	44	2.88	0.41	72.00	====

Analytical statistics are presented in Table 2 and Table 3. Results of t-test in Table 2 show that there are no statistically significant differences between means of administrators' versus teachers' perceptions ($t = 1.36$, $\alpha > 0.05$), between means of females' versus males' perceptions ($t = 1.56$, $\alpha > 0.05$), and between means of basic versus secondary administrators' and teachers'

perceptions ($t = -1.02$, $\alpha > 0.05$). This leads to acceptance of what has been hypothesized previously, i.e. that there were no statistically significant differences at ($\alpha \leq 0.05$) level of significance between teachers' and administrators' perceptions about organizational health due to sort of job, gender, and school level.

Table 2: t-test results for the variables of sort of job, gender, and level of education.

Variable.	N	mean	SD	<i>t</i>	Sig
Sort of job					
• Administrator	066	2.98	0.41	1.36	0.26
• Teacher	610	2.87	0.53		
Gender					
• Female	424	2.90	0.48	1.56	0.14
• Male	248	2.83	0.44		
School level					
• Basic	410	2.84	0.42	-1.02	0.31
• Secondary	262	2.93	0.45		

Table 3 presents the results of one-way ANOVA testing differences between means with regard to respondents' experience and level of education.

Differences between means of responses are not significant.

Table 3: One-way ANOVA results for the variables of years of experience and level of education.

Variable / Source of variance	SS	df	MS	F	Sig
Years of experience					
Between groups	0.340	002	0.680	2.81	0.06
Within groups	0.121	669	1.058		
Total		671	81.738		
Level of education					
Between groups	0.060	002	0.120	0.49	0.61
Within groups	0.122	669	81.618		
Total		671	81.738		

It is obvious that F values are not statistically significant ($\alpha > 0.05$) for both variables. F values are 2.81 for years of experience variable and 0.49 for level of education variable. Thus, what was hypothesized previously could not be rejected.

Discussion

To start with, demographic data analyses have shown that most respondents are females. This obviously indicates that teaching and principalship in Palestinian schools have become feminine careers. The feminization of these two careers is consistent with recent trends. International research has shown that there is not only an increase in the portion of women in the teaching population in the last two centuries, but also that the degree of feminization in teaching and employment practices in education has already exceeded that of males (Albisetti, 1993; Depaepe & Simon, 1997). Besides, results show that the majority of respondents work at basic level schools. This reflects the focus of the Palestinian educational system, and never symbolizes bias in sample selection. Palestinian educational system incorporates two school-levels of two different year lengths. The first is basic level and extends to ten years (grades 1 through 10), and the other is secondary level and extends to only two years (grades 11 and 12). Finally, the majority of school level administrators and teachers are university degree holders; the small portion of non-university degree personnel at schools might have joined the career long time ago prior to the establishment of the current Palestinian educational system and the Palestinian National Authority, or might have been employed exceptionally. Nowadays, no teacher or principal is eligible for the position unless he or she holds a university degree, with the exception of very limited unavoidable necessary cases. For example, when there is no university graduate candidate for the position in some urban schools, or when a non-university degree candidate with excellent leadership skills comes top in screening and interview, he or she could temporarily assume the position.

The findings of this research show that administrators and teachers perceive organizational health at government schools positively, even though responses means are not high with the exception of morale dimension. Those perceptions do not only constitute a critical ingredient of work climate and environment, but they also influence the behaviors of those who live and work in that environment. Actually, these findings are consistent with what Attala (1996) and Hajjar (2008) have found, and they seem to support the findings of other local research (Musleh, 2004; Orikat, 2003) that organizational climate at Palestinian government schools is not quite open, nor is it prosperous. In this situation, it is probable that target Palestinian government schools do not sufficiently direct their potential energies towards the realization of their goals, nor do they effectively cherish teaching and learning. This situation makes the quality of teaching and learning at Palestinian government schools unenviable, and even under criticism. More efforts are necessary to escape the perils of this situation. Probably, when organizational health is not clearly positive, principals, teachers, and students will suffer. Low commitment, intent to leave, low motivation, low creativity, dissatisfaction with the job, low achievement, high dropout, high absenteeism, high disorder problems, and feelings of alienation, poorness, and subordination will prevail (Abdeen, 2001; Akibo, 2010; Hoy & Miskel, 1996; Klassen & Anderson, 2009; Roberts et al., 2008; Shapira-Lishchinsky & Rosenblatt, 2009; Smits, 2009). Such ramifications are certainly undesirable in the Palestinian context because they hinder the development and prosperity of the educational system in general, and principalship in particular.

Surprisingly, academic emphasis dimension has got the lowest mean. This result is undesirable and inconsistent with previous research on school effectiveness (Bevans et al, 2007; Brown et al, 2011; Odhiambo & Hii, 2012). Meanwhile, it is not exceptional. Hajjar's (2006) research has revealed that academic emphasis has the last rank among all

organizational health dimensions. Also, Cemaloğlu (2006) has found that academic emphasis was less frequently realized. In actuality, embodied in this result is that student achievement will be negatively influenced. Academic emphasis is definitely related with high student achievement (Henderson et al., 2005). This low academic emphasis may be a result of some school-level factors in local Palestinian context that challenge the school functioning and stability. These factors include student enrollment, staff turnout rate, student absenteeism, and discipline. Probably, the distribution of power and influence is inequitable and there is no fit between principals' and teachers' personal needs and the role demands of the government schools. Government schools principals and teachers may be overloaded and this could have resulted in nearly low academic emphasis. Also, it is probable that teacher empowerment and principal leadership are not strong (Smylie, 1994; Valente, 1999). This situation entails that principals have to introduce change in teachers' work-related self-efficacy, especially their ability to positively influence learning.

Partially, the results of this research and Hajjar's (2006) research regarding resource support are in rapport. Resource support has come second in perceptions means order in both pieces of research. This is different from Klingele & Lyden's (2001) finding that resource allocation was the weakest dimension in organizational health. The other aspects of managerial level that represent principal leadership, that is, principal influence, initiating structure, and consideration come next to resource support in means order. Regardless of the controversy that the two ingredients of technical level have got opposite orders that may arise, the three levels of organizational health, i.e., technical, managerial, and institutional level, seem to function in harmony. Prior research (Tsui & Cheng, 1999) supports this situation.

In accordance with the objective of this research, it has been limited to examination of perceptions of teachers and school administrators about organizational health of schools. It has not examined correlation between perceptions in dimensions of the implemented tool. Akbaba's (1999) research has shown that teachers' and principals' perceptions of resource support and collegial leadership are high, and that there is a high positive relationship between perceptions of teachers and principals of resource support and their perceptions of collegial leadership and academic emphasis. In comparison, the current research does not support Akbaba's (1999) findings. In this research, the big difference between means of resource support dimension (2.71) and institutional integrity dimension (2.99) discloses that, in spite of the availability of resources, government schools teachers and administrators are less willing to take risks, and so, less initiative. On one hand, this may be one reflection of the centralization in the Palestinian educational system.

Teachers and school administrators have limited input in school policies. Policies, curriculum, regulations, and monies are exclusively considered at the top administrative level, i.e. the Ministry of Education. Therefore, teachers and school administrators do not have to bother about coping with disruptive external forces and pressures. On the other hand, this is disturbing; signs of effective leadership are not satisfactory. The two-decade staff and administrators training and empowerment efforts the Palestinian Ministry of Education has gone through have not put an end to the major challenge of professional development.

Also, the findings of this research support the hypothesis of the study that there are no statistically significant differences between administrators' and teachers' perceptions. Both groups perceive organizational level positively. This result unexpectedly differs from what prior research (Akbaba, 1999; Hoy & Tarter, 1987; Hajjar, 2006; Klingele & Lyden, 2001) has found; prior research shows that principals perceive higher levels of organizational health than teachers do. In this research, means of perceptions of male and female respondents are not significantly different. This discloses that there is no discrepancy between teachers' and administrators' discernments about organizational health. Prior research (Attala, 2006) indicates that female teachers tend to have more positive perceptions about school climate than male teachers.

Respondents' experience and level of education as well as their school level have not influenced the means of their perceptions about organizational health of schools. No discrepancy between respondents with regard to these independent variables is found. This is partially in parallel with Akbaba's (1999) and Attala's (2006) findings. The fact that perceptions of basic and secondary teachers and administrators about organizational health of schools have not significantly differed implies that respondents do not observe individual characteristics of school levels or individual differences at schools. This reflects the nature of Palestinian school system which is centralized and dogmatic.

Conclusions and Implications

In this study, it has been shown that school principals and vice-principals as well as teachers have adequate education levels. However, it is advantageous that the Ministry of Education and other educational governing bodies reach a legislation entailing that having a university educational preparation is a requirement prior to getting in the occupation. Also in this study, school principals', vice-principals' as well as teachers' perceptions about organizational health of schools have been investigated. The used organizational health instrument, i.e., OHI-Arabic version is an accurate tool that can be used to provide base-line data on leadership, structure, relationships, and effectiveness of the school as well as diagnose discrepancies and

problems embodied at the school, and thus determine the scope and depth of school change and reform to improve the quality of schooling.

Principals and administrators at upper levels are expected to continuously evaluate the effectiveness and health of the schools. While doing so, they may compare principals' and administrators' perceptions with teachers' perceptions, so that they gain better insight of the well-being of the school and get clues where the problems are in order to launch further change and improvement. The efforts to improve teaching and learning, that is, the pursuit of quality of education, will not yield without the provision of healthy environments.

School administrators should pay more attention to academic emphasis which is a means of quality and excellence in education. They should meet and exceed high academic expectations and standards, involve actively in development of instruction, have confidence in students' ability to succeed, and encourage students to work hard and respect those who do well academically. Palestinian reform efforts should focus on the provision of resourceful, confident, and change-oriented principals, because it is this sort of principals who can empower teachers and students and environment creativity and improvement of teaching and learning. The Palestinian Ministry of Education is advised to reconsider its work burdens and responsibilities policies so as to allow better space for academic emphasis and observe more functional organizational health at its schools.

In brief, Palestinian government schools are characterized by challenging environments. They do not have immunity against organizational deficiencies. The findings of this research, should pave the way to reform in Palestinian educational system. Furthermore, further research may investigate relationship between organizational health and student and teacher motivation, student achievement, and student alienation. Also, further research may be conducted to investigate relationship between organizational health and principals' dedication and loyalty to the educational career.

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