

**Relationship between organizational health and organizational citizenship behavior
Among hospitals staff of Medical Sciences University in Kermanshah, 2013**

Arash Zia pour¹, Vahid Naraghi^{1,2}, Somayeh Haidari³, Neda Kianipour⁴

^{1,3,4}Kermanshah University of medical sciences, Kermanshah, Iran

²Department of Management, Sanandaj Branch, Islamic Azad University, Sanandaj, Iran.

arash.ziapour@kums.ac.ir, vahid_titan@yahoo.com

This article is the result of research projects under the above Act Kermanshah University of Medical Sciences in 2013 to 92308 codes which are supported by the Research Council of Kermanshah University of Medical Sciences has been implemented.

Abstract: The concept of organizational health is a unique concept that allows us to have the great picture of organization health. Staffs are dedicated, helpful and conscientious and have high performance and morale in healthy organizations. There is required to employees who have volunteer behavior for organization due to the hospitals changing conditions and need to their efficacy. So, the main purpose of this paper is study the relationship between organizational health and organizational citizenship behavior among hospitals staff of Medical Sciences University in Kermanshah. This is a descriptive – analytical study that was conducted sectional. The population is consisted of Kermanshah Medical Sciences University hospital staffs in 2013, samples are 280 N, who were selected using stratified sampling. Instruments for data collection were consisted of Organizational Health Questionnaire of Hoy and Feldman and organizational citizenship behavior Questionnaire. SPSS software was used to analysis the descriptive statistics (percentage, Out, the standard deviation and variance) and inferential statistics (Pierson correlation coefficient and regression). Results: there is a significant relationship between organizational health and the five dimensions of organizational citizenship behavior (conscientiousness, Respect, Altruism, Sportsmanship and civic virtue) ($p = 0/0001$). Conclusion: organizations can make improvements in employee behavior by coordination among members as well as continuous improvement considering the significance of relationship between organizational citizenship behavior and organization health.

[Arash Zia pour, Vahid Naraghi, Somayeh Haidari, Neda Kianipour. **Relationship between organizational health and organizational citizenship behavior Among hospitals staff of Medical Sciences University in Kermanshah, 2013.** *N Y Sci J* 2014;7(4):1-7]. (ISSN: 1554-0200). <http://www.sciencepub.net/newyork>. 1

Keywords: organizational health, organizational citizenship behavior, Hospital, Kermanshah

1. Introduction

It is necessary to create a healthy community to have a healthy organizations and the atmosphere of organization should be identified to establish the organization health. There is considerable scholarly effort has been made in recent decades to define, describe and assess the social atmosphere of organizations. One of the popular and useful theoretical frameworks in this case is "organizational health" (Jahed, 2005: 38). In other words, today, the organizations are considered as a living entity that has an independent identity from its members (Seyyed Javadiyan, 2005: 43), so that they can have affect on employee behavior by this new identity. This identity and personality can have "organizational health" or "organizational disease" (Saatchi, 2004: 21). Due to changing conditions governing on organizations there is need to a generation of valuable employees are more evident, especially hospitals and their effectiveness; a generation that called organization soldiers, and most of managers want the

employees who work more than their job duties (RaminMehri, 2010: 72).

These behaviors are called OCB together with some concepts such as pre social behaviors, over implications behavior, background performance, self enthusiasm behaviors that are an integral part of performance management (KakhakyHassani et al, 2008: 132).

In fact, the employee behavior can have a significant impact on customer perceptions of service quality, particularly voluntary behaviors at services giving time; OCB is defined as the person commitment at work and they are out of the scope of the individual tasks and are not directly recognized explicitly by the formal reward (Save et al, 2009: 79).

Therefore the term OCB was introduced by Batman and Organ previously (1983), but this concept arises from Bernard articles about willingness to commitment, and the studies of Katz and Kahn (1964, 1966) on spontaneous and over expectations behavior performance (Moorman, 1991: 851). Since attending to OCB is so important for

service companies and have a direct and positive impact on service quality and consequently the profitability of the organization, attending to such attitudes can be a way to increase the organization effectiveness and performance (Solaimani, 2010: 34).

In recent decades, such terms are used to define behaviors such as social behavior, over role and spontaneous behaviors and organizational performance. Although each of these concepts have a different origin, but generally refer to a same concept that are studied as organizational citizenship behavior in this research, and are intended to those individual behaviors which related to their involved roles in the organization that are done beyond the expectations of tasks and the job description; and although the formal reward system of organization does not recognize these behaviors, but affect the organization's performance (Barnard, 1938: 316). Organizational citizenship behaviors generally considered those behaviors that are done by employee and create benefit in light of them for organization despite the fact that they didn't mandated by the organization (Vants, 2003: The 168). Organ define the organizational citizenship behavior as the posses behavior of the individual, this group of behaviors are not directly attended by organization reward system, but caused to enhance the functions effectiveness (Moorman, 1995: 238).

OCB has different dimensions. SMITH, Organ and Meyer (1983) had pointed to two areas of altruism and public acceptance. Anderson and Garbing (1988) at the individual dimension (OCB-I) divided OCB into behavior oriented towards individuals, and at organization dimension (OCB-O) into behavior directed toward the organization. Organ (1988) has outlined the organizational citizenship behavior into five dimensions.

A - Altruism is the ongoing completely voluntary support that is done in order to help partners. Altruism is pointed to altruistic behavior, such as the creation of intimacy, empathy and compassion among partners, either directly or indirectly refers to help employees who have difficulties (Islami and Sayyar, 2007: 18).

B - Generosity: the staff will reduce complain, carp and cavil by their generously behavior and regulate most of their time to the organization's efforts and activities. Generosity or tolerance is the second dimension of citizenship behavior that is pointed to tolerance in desired conditions, without objection, dissatisfaction and complaints (Podsakof et al, 1991: 246).

C- Good nature: Behaviors that indicates active responsible and participation during individual tasks and enhance the organization good feature. Good nature is including participation in extracurricular

activities when it is not essential, support the development and change management services provided by the organization and desire to read books, magazines, and increased public awareness and importance posters and announcements to organizations to inform the others. Accordingly, organ (1988) believes that a good corporate citizen must not only be aware of the issues of the day, but also he can talk about them and involved in solving them actively.

D - Courtesy: including courteous behavior that prevents problem sat workplace. This aspect is expressing how this behavior will take place with colleagues, supervisors and organization audiences. People in the organization who are respect to the others will have a progressive citizenship behavior (Podsakof et al, 1991).

E -sense of duty: an attempt that is beyond the formal tasks. NeguyenansSyrez (quoting Zare2004) argue that conscientiousness will lead the employee behavior over the expected level. Studies indicate that sense of duty is including implementation of activities more than the task itself. Such behaviors will increase reliance among employee. Bali no et al (2002) argue that supporting and inspiring from leaders caused employee to work more than their formal job tasks. Organ (1988) also believes that people who have progressive citizenship behavior will continue to work even in the illness, the inability and worst conditions, that is reflected their high conscientiousness.

Organ (1988) believes that employee will correct their performance during tasks and activities of the organization and will play their role correctly if mentioned characteristics will be strengthened. Therefore, OCB has been studied in the perspective of Organ in present study that have dimensions such as conscientiousness, altruism, civic virtue, sportsmanship, respect and reverence (RaminMeh, 2010: 86).

Every organization must first and foremost be able to adjusted and adapted to the changing environment, the critical issues and confronting the problem, used its best resources and encounter with the threatening external forces successfully and lead them toward the main goal of organization, and always grow it along maintaining the ability to survive if want to be effective; in another word enhanced Organizational health (Solaimani, 2010: 43).

The concept of organizational health appeared in the literature at first for more than forty years ago and has been reviewed by leading researchers steadily (Makintush et al, 2007: 218). The term organizational health was used in expressing organization survival and continuity dimension. This concept were defined

based on the works of Parsons - Bilzand Silz by Hoy and Tarter, Hoy and Miskelas organization's ability to be adapted with their environment, creating harmony among members of the organization and achieve to its objectives (Zahid et al, 2009: 127). Lynden and Klingle, believe that the organizational health is a relatively new concept and includes the ability to perform their duties and improve the organization effectively. Healthy organization is a place where people want to stay and work there and they are useful and effective themselves (Jahed, 2005: 15). Inspectors will find Conscientiousness and committed employee in healthy organizations that have high performance and open communication (Lin Dunn et al, 2000). Miles Notes that the organizational health depends on surviving in their environment and adapting to it, and also upgrade and expand its ability to more adaption (jahed, 2005: 16). Accordingly, organizational health considered as a sign of managers success in accomplish their primary tasks (Ahanchian et al, 2004: 49).

Focus on organizational health means focusing on the organization's future success. Today, one of the organizations competitive factor is their ability to use the maximize brain power of staff for turning good ideas into customer friendly service and products (Naserinejad, 2004: 9). We can be aware of organizational health through organizational health audit (Ahanchian et al, 2004: 52). Studies show that the most effective behaviors that caused a healthy and creative work environment are include the ability and tendency to fairly meet the retaliation, providing work freedom for staff by providing ways, tools and clear information, enabling comprehensive direct feedback of performance, trust and willingness to support and respect to all people. Most of studies that were done in organizational health area show that there are two dependent sources of organizational health creation at work place. The most important source of organizational health is behavior and leadership style and the second one is organizational models that lead to creativity and initiative that may make things in a beyond general way (Nazareth, 2004: 13). Therefore, hospitals should create incentives background for health workers to increase their effectiveness.

Health issues and organizational citizenship behavior has been more studied in the education and used, and a little attended in health sector (Avzsakr et al, 2012: 8663; Lee, 2011: 12,082). There is just one study has been investigated this association in training scope in detail (Block, 2008: 592). Most of researches in the health sector examined just one of these two variables. For instance, Cohen and colleagues studied the relationship between skills and organizational citizenship behavior among nurses of

four general hospitals (Cohen, 2004 : 398). Researchers could not find any investigation about the relationship between OCB and organizational health either inside or outside of the country and this will appear the virginity and importance of this study. organization behavior is one of the most important sociological dimensions of organizational citizenship education including universities, as citizenship behavior is one of the important studied variables in investigation of organizational health and also the organization health is influence all sectors and aspects because it considered as the most important factor related to organizational citizenship behavior. Academic staff can play an important role in improving the quality of their universities, in another word the OCB is a factor that improve the employee performance and help the organization to achieve its objectives. Therefore the most important objectives of this research is including: 1- analysis and comparison of OCB in the hospital as the most health service providers, 2-study the relationship between organizational health and organizational citizenship behavior, it means that in which extent the performance of hospitals and health components of citizenship behavior in organizations can be influenced by each others.

2 - Material and Methods:

This is a descriptive – analytical study with random cross-sectional sampling that was done in 2012 over 280 workers in selected hospitals of Kermanshah University of Medical Sciences, including Imam Reza (AS), Imam Ali Hospital (AS), Imam Khomeini and Taleghani hospital. These hospitals were selected using Cochran sample size based on random selection of University of Medical Sciences hospitals of Kermanshah.

Data collection tools are including organization and OCB's Health Questionnaires. Questionnaire of Hoy and Feldman the Parsons Derivative pattern has been used to measure the organizational health (Hoy and Feldman, 1987: 26), but in some parts there has been a change in the questionnaire to be used in hospitals. The content validity of the instruments has been verified by taking experts and academics acceptance. The reliability of the questionnaire were calculated (0/95) using Cronbach's alpha coefficient. This value indicates the existence of a strong internal reliability consistency of questionnaire questions. OCB questionnaire were derived from the study of Yaqubi and colleagues (Yaqubi, 2009: 506) and has five aspects of conscientiousness, altruism, civic virtue, sportsmanship, respect and reverence. Yaqubi and associates in 2009 have been used the judgment of experts to confirming the tools validity after the construction of such a device. The reliability of the

questionnaire is estimated 0/93 using Cronbach's Alpha. The Questionnaire Was designed in five options (very low (1), low (2), somewhat (3), high (4), very high (5) using Likert steps. Demographic questionnaire experience has been used for variables of gender, age, education, profession and work. Data were collected and were analyzed using SPSS software (ver 16,) in two levels of descriptive statistics (frequency, frequency percentage) and inferential statistics (Pearson correlation test, and Kruskal-Wallis significance level).

3 - Results

According to the findings 77/1 percent (216) of participants were male and 22/9 percent (64)

were female. The age of 4/6 percent of participants were less than 30 years, 67/1 percent of participants aged 31-40 years, 21/4% of participants aged 41 to 50 years and 6/8% of patients age were above 50 years. The most frequent age range was 31-40 years. In terms of marital status, 12/5% of respondents were single, and about 87/5 percent are married. Educational level of 12/5 participants were Associates Degree, 64/6 percent BA, 22/9 BA or higher. In terms of service history, 10/4 percent of participants were under 5 years, 10/7% between 5 and 10 years, 38/2 percent between 10 and 15 years,

23/6% between 15 and 20 years and 17/1 of participants have a history of 20 years and more.

Table 1: The mean of organizational health comparing test of hospitals

Std. deviation	Mean	Hospital
72/0	51/3	Imam Reza Hospital
69/0	21/3	Imam Ali Hospital
64/0	18/3	Imam Khomeini Hospital
76/0	83/2	Taleghani Hospital

Results of Table 1 shows that Imam Reza (AS) hospital has the highest average of organizational health (51/3) and Taleghani has the lowest average of organizational health (83/2) among the other hospitals. Considering the Kruskal-Wallis test value is equal to 43/043 and the significant level is 0/0003, that represents there is significant difference among the four hospitals in terms of organizational health. There is significant difference (0/007) between hospitals of Imam Reza (AS) and Taleghani statistically. There is significant difference (0/015) between Imam Ali (AS) and Taleghani. There is significant difference (0/0002) between Imam Khomeini hospital and Taleghani. There is significant difference (0 / 017) between Imam Khomeini (RA) hospital and Imam Ali (AS) hospital.

Table 2. The mean of citizenship behavior test among hospital

Organizational Citizenship Behavior		Generosity		Altruism		Conscientiously		Civic Virtue in		Respect		Hospital
Std. deviation	Mean	Std. deviation	Mean	Std. deviation	Mean	Std. deviation	Mean	Std. deviation	Mean	Std. deviation	Mean	
77/0	82/3	93/0	32/3	78/0	5/3	76/0	4/3	89/0	2/3	93/0	6/3	Imam Reza Hospital
96/0	85/2	97/0	3	89/0	9/3	06/1	03/3	01/1	34/3	97/0	98/2	Taleghani Hospital
79/0	36/3	01/1	12/3	66/0	5/3	83/0	17/3	97/0	26/2	62/0	68/2	Imam Ali Hospital
87/0	15/3	86/0	36/3	92/0	36/3	09/1	4/3	91/0	5/3	98/0	28/3	Imam Khomeini Hospital

Results of Table 2 show that, the Imam Reza (AS) hospital with a mean of (Mean = 3/82) has the highest degree in each of the OCB dimensions. Among these hospitals, Taleghani with a mean of (Mean = 2/85) has the lowest scale in each of the OCB dimensions. So we can say that the Imam Reza (AS) hospital has the highest OCB and Taleghani hospital has the lowest OCB.

• Results of correlation test in Table 3 indicate the significant relationship between organizational health and conscientiously dimension in each of Kermanshah University of Medical Sciences hospitals. There is a direct correlation between

organizational health and conscientiously. Generally, there is a direct relationship between organizational health and conscientiously. Correlation between these two variables is (R =0/751).

• In investigating the relationship between organizational health and respect in each of the Kermanshah University of Medical Sciences hospitals, we found that there is a direct and moderate correlation between hospitals of Imam Reza (AS), Taleghani Hospital, Imam Ali (AS) and Imam Khomeini and organizational health and respect. In general, there is a direct relationship between

organizational health and respect. Correlation between these two variables is (R =0/698).

- In the field of altruism there is a relatively strong direct correlation between organizational health and altruism. In general, there is a direct relationship between organizational health and altruism. Correlation between these two variables is (R=0/728).

- There is a relatively modest direct correlation between organizational health and generosity in hospitals of Imam Reza (AS), Taleghani Hospital, Imam Ali (AS) and Imam Khomeini (RA) according to the mentioned table. Generally, there is a direct relationship between organizational health and

generosity. Correlation between these two variables is (R =0/730).

- There is a relatively strong correlation between organizational health and civic virtue in each of the hospitals. Generally, the relatively strong correlation between organizational health hospitals and civic virtue can be seen. The correlation between these two variables is(R =0/719).

- As the correlation coefficient is significant in studies hospitals, it can be said that there is a significant relationship between organizational health and organizational citizenship behavior in Kermanshah University of Medical Sciences hospitals generally.

Table 3. Correlation coefficient of organizational health and citizenship behavior dimensions among hospital

Organizational Citizenship Behavior		civic virtue in		generosity		respect		conscientiously		Altruism		Hospital
Sig	correlation coefficient	Sig	correlation coefficient	Sig	correlation coefficient	Sig	correlation coefficient	Sig	correlation coefficient	Sig	correlation coefficient	
000/0	846/0	000/0	632/0	001/0	612/0	001/0	470/0	000/0	712/0	001/0	675/0	Imam Reza Hospital
000/0	789/0	000/0	663/0	000/0	622/0	038/0	216/0	000/0	686/0	003/0	653/0	Taleghani Hospital
000/0	735/0	000/0	562/0	000/0	698/0	000/0	615/0	000/0	678/0	001/0	630/0	Imam Ali Hospital
000/0	918/0	000/0	743/0	000/0	813/0	000/0	684/0	000/0	848/0	000/0	852/0	Imam Khomeini Hospital
000/0	843/0	000/0	719/0	000/0	730/0	000/0	698/0	000/0	751/0	000/0	728/0	Total

** Correlation is significant at the 0.01 level (2-tailed).

4 –Discussion

- The aim of this study was investigating the relationship between organizational health and organizational citizenship behavior among the Kermanshah University of Medical Sciences hospitals staff. Findings show that Imam Reza (AS) hospital has the highest score of organizational health and Taleghani has the lowest score in this field. On the other hand, Imam Khomeini hospital has the highest scores in all aspects except friendship corporate behavior of citizenship and Taleghani Hospital has the lowest score in all aspects. Altruism as one of the OCB dimensions the most points in Imam Reza (AS) Hospital. Services of this hospital is including the fields of ear, nasal, guttural, eye and injuries therefore needs to more staff tolerance that reveal the altruism behavior. Generally, it can be said that there is a significant relationship between OCB different dimensions and organizational health in studied community. This relationship seems to be quite understandable by considering these two concepts elements. In other words, these correlations suggest that hospitals with higher organizational health have more conscientious, more altruism and more conscientiously.

- Since there is just one investigation that improved this relationship (blue:2008,589), so researches defined and analyzed some studies that use these two concepts (health and OCB) in health parts and study their relationship with the other parts. Chou et al, suggest that supervisor protection will affected the OCB indirectly. Thus we can say that the supervisor protection as one of the organizational health can be related to OCB, and comforted with this study finding. Also they found that family protection, role ambiguity and more working will affected the general health sector nurse's organizational citizenship behavior. (Chou et al:2006,502). cohnnet al, suggest that the basic and intermediate role of justice preview of staff in relation of OCB and skills, in another word, thought of relation in justice from the staff mind caused to staff commitment against leaders and totally lead to promote OCB (Cohen et al, 2004: 401). Patel can find a significant relationship between health and organization commitment, and he suggests that organizational health can caused to increase OCB among the staff (Patel, 1998: 65), that is correspondent with this research findings.

5 - Conclusion:

• It is essential to make some activities to improve citizenship behavior in order to improve organizational health among hospitals by considering the findings of this research that revealed a significant relationship between organizational health and OCB, because improving the hospital staff behavior can effectively improve the organization performance. Similarly, based on the results of this study it can also be argued that organizational health promotion will promote OCB. Dynamic healthy hospitals have a good interaction space and make the employee to be activated and this will improve the organization. In another hand, a healthy protector organization will cause to more loyalty and mentality. Therefore, on this basis, hospitals can improve them by finding where possible and less expensive components for initiating it. Organizational health auditing can help hospitals to define the work creativity parts that effectively improve the staff and their healthy, and also it can find the enforcement opportunities in work place.

• Considering that there isn't any similar research to this one, it can be a good start to an appropriate way for other studies in order to accept or decline its findings; therefore there were some limitations such as lack of any similar studies in health organization.

6 - Offers

• - Adequate classes and workshops in the field of organizational citizenship behavior among employees in order to boost morale among employees.

• - Using brochures, posters and images on the boosting of OCB and its components in hospitals.

• - Use the components of organizational citizenship behavior on evaluations staff performance....

This article is the result of research projects under the above Act Kermanshah University of Medical Sciences in **2013** to **92308** codes which are supported by the Research Council of Kermanshah University of Medical Sciences has been implemented.

Corresponding Author:

Arash Zia pour, Vahid Naraghi, Somayeh Haidari, Neda Kianipour

Kermanshah University of medical sciences, Kermanshah, Iran

²Department of Management, Sanandaj Branch, Islamic Azad University, Sanandaj, Iran.

arash.ziapour@kums.ac.ir, vahid_titan@yahoo.com

References

1. Anderson, J. C. Garbing, D. W. (1988). Structural equation modeling in practice: a review and recommended two – step approach, *Psychological Bulletin*, 103 (18). 411-423.
2. Ahanchian M & Manideri R. The relationship communication skills with organizational health managers. *Journal of Management Executive* 2004; 4(12): 41-60. [In Persian]
3. Barnard, C. I. (1938). *The functions of the executive*, Cambridge, MA: Harvard University Press.
4. Buluç B. The Correlation between Organizational Health and Organizational Citizenship Behaviors at High Schools. *J Turkish Educ Sci* 2008; 6(4): 571-602.
5. Cohen A & Kol Y. Professionalism and organizational citizenship behavior: An empirical examination among Israeli nurses. *Journal of Managerial Psychology* 2004; 19(4): 386-405.
6. Hoy WK & Feldman JA. Organizational health: The concept and its measure. *Journal of Research and Development in Education* 1987; 20(4): 30-7.
7. Chu CI, Lee MS & Hsu HM. The impact of social support and job stress on public health nurses' organizational citizenship behaviors in rural Taiwan. *Public Health Nursing* 2006; 23(6): 496-505.
8. Eslami, H, Sayyar, A (1997) «organizational citizenship behavior», *Journal of Tadbir*, 187, 25. [In Persian]
9. Hasani Kakhaki A & Gholipor A. Organizational citizenship behavior, a step to improve performance of organization. *Journal of Trade Studies* 2008; 12(45): 115-45. [In Persian]
10. Jahed H. organizational health. *Tadbir training scientific monthly* 2005; (159): 10-16. [in Persian].
11. Kwantes, C.T. (2003); "Organizational citizenship and withdrawal behaviors in USA. and India", *International Journal of Cross Cultural Management*, 3 (1), p. 5.
12. Lynden JA & Klingle WE. Supervising organizational health and student performance implication for school reform initiatives [Thesis]. The Pennsylvania State University; 2000.
13. Lee YJ. Research on school organizational change and its impact on organizational effectiveness with organizational citizenship behavior and organizational culture as mediators. *African Journal of Business Management* 2011; 5(30): 12076-85.

14. Moorman RH. Relationship between organizational justice and organizational citizenship behaviors: Do fairness perceptions influence employee citizenship. *Journal of Applied Psychology* 1991; 76(6): 845-55.
15. MacIntosh R, MacLean D & Burns H. Health in Organization: Towards a Process Based View. *Journal of Management Studies* 2007; 44(2): 206-21.
16. Moorman, R. H., and Blakely, G. L. (1995); "Individualism-Collectivism as an individual difference predictor of organizational citizenship behavior", *Journal of Organizational Behavior*, 16, pp. 127-142.
17. Nejat A, Kosarneshan M & Mirzadeh A. Effect organizational citizenship behavior on quality of services. *Commercial Survey* 2009; 7(35): 72-84. [In Persian]
18. Naseri A. Organizational Health Assessment. Available at: http://www.iransafety.Com/index.php?option=com_docman&task=doc_download&gid=4036+%Itemid=167%3E&lang=en. Jan, 2004.
19. Ozsaker M, Ozkutuk N & Orgun F. A study of the organizational citizenship behaviors and organizational communications of teachers: Case study of Aydin Province. *African Journal of Business Management* 2012; 6(29): 8659-66.
20. Organ, D. W. (1988) *Organizational citizenship behavior: the good soldier syndrome*, Leaxington, MA: Lexington Books.
21. Patel MK. A Study of Organizational Health and Organizational Commitment Among Industrial Employees. *Journal of the Indian Academy of Applied Psychology* 1998; 24(1-2): 63-7.
22. Podsakoff, P. M., Mackenzie, S., Moorman, R. & Fetter, R. (1990). Transformational leader behaviors and their effects on organizational behaviors, *The leadership Quarterly*, 1, 107-142.
23. Raminmehr H, Hadizadeh Moghadam A & Ahmadi I. Study the relationship between organizational justice perception and organizational citizenship behavior. *Journal of Management Development* 2010; 1(2): 65-89. [In Persian]
24. Seyed Javadian R. *The principle of organization and Management*. Tehran: Nagah Danesh; 2005; 39-46. [In Persian]
25. Saatchi M. *Work psychology: Application of psychology at work, organization and management*. Tehran: Virayesh; 2004; 14-29. [In Persian]
26. Smith, C. A., Organ, D. W., & Near, J. P. (1983). Organizational citizenship behavior, *Journal of Applied Psychology*, 68, 653-663.
27. Soleimani N. Evaluation of schools based on the pattern of Hoy & Fidelman organizational health. *Journal of New Approaches in Educational Administration* 2010; 1(4): 23-44. [In Persian]
28. Yaghoobi M, Yarmohammadian MH, Saghaiannezhad Esfahani S, Javadi M & Raeesi AR. The Study of Relationship between the Organizational Justice and Organizational Citizenship Behavior among Medical Records in Hospitals of Isfahan. *Health Information Management Journal* 2009; 7(1): 506-15. [In Persian]
29. Zare, H (1994). Role of organizational citizenship behavior in organization performance, management culture, 6:151-169. [In Persian]
30. Zahed Babolan A, Asgarian M, Behrangi MR & Naderi E. Examination of relationship between school organizational health & teacher organizational commitment in boys' schools of Ardabil. *Studies in Education and Psychology* 2009; 9(2): 127.[in Persian]