Relationship between Self-awareness with the quality of work life and organizational health of high school administrators of Zahedan

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Abstract: Background: This study investigated the relationship between self-awareness and the quality of work life and organizational health of high school administrators was conducted in Zahedan. Methods: research method in this descriptive study was correlative and statistical population includes schools principals in Zahedan academic year 2011-2012 with the number of 92 persons. To analysis data, Pearson's correlation coefficient, regression is used. Findings: Our findings suggest that there is a significant relationship between the self-awareness and quality of work life and organizational health. Also, there is a significant relationship between quality of work life and organizational health, also in the predictive variable of quality of work life, it was observed that confidence, being sociable, fitness and sexual health has the most prediction in the quality of work life. In the respect of predictor variables of the organizational health was observed that the sense of shame and guilt, and the ability and present, past and future had highest predicators for organizational health. Conclusion: Managers who have high self-awareness, as the knowledge to self-increase, their quality of life work and organization health will be effective. Also the quality of working life, include emotional factors, such as interest and devotion to the work, as well as a sense of loyalty to organization and responsibility which is closely related to organizational health. In other words, with the increase the qualities of life work of managers we will observe increase their organizational health.

Keywords: self-awareness, organizational health, quality of work life

Introduction
Organizational success depends on allocation and application of appropriate tools, equipment, money, raw materials and human resources of the Organization in its programs, and this will be possible in the event that these organizations can use skills and abilities and characteristics of individual and staff in line with the objectives of the organization. Hence, it can be said, organization is regular order for people to achieve the determined objectives (Yavari et al., 2009).

Self-awareness is a method in which the person find self, this will to be fitted in the category of personal self-awareness (realities or their personal theories about self) social awareness (personal understanding about how other may look to him,) and personal aspirations (what self-love to be). In fact, self-awareness is a set of thoughts and emotions that can cause a person's awareness of existence (Shoari, 2006: 158).

Since foundation of any move towards organizational growth and development and improve the process of work is recognition of the status in the precise, diagnosis of organizational strengths and weaknesses, and then measured programs for the reform of the current scheme, and on the other hand correct behavior of managers in organization depends on their understanding of self and ways of staff perception that it influenced by their characteristics, schools as organization will not be exceptions as a educational organization (Farzami Khah et. al, 2007). Today, any nation want to create a society that while growth and development in all aspects of economic, social, cultural, political be able to be active between the new structures and have a high efficiency and effective strategy and coordinate the culture and traditions of their community, for creating such a community, there is the necessity of healthy organizations. The healthy organization can provide healthy communities. They can guide communities to enjoying and exploiting natural resources, better than human resources, national capital and technical knowledge and in addition to achieving success for the community to become a successful agent of communities (Alaghe band, 1999: 14).

Organizational health is the ability of the Organization for its survival and organization that is healthy deal with the destructive foreign forces successfully and will guide its resources effectively to the Organization's main goals and objectives and in a long term show symptoms of organizational health, organization health indicate to the situation beyond the short-term effectiveness of the Organization, indicate to the persistence of organization
characteristics. A healthy organization is meant not only to stay in its environment sustainable, but in the long run is able to accommodate with its environment, create sufficient required ability for continuous development for its survival and expands (Sharifi and Aghasi, 2010). Based on opinion of Luthans. A. & Klinge (2000), organizational health is almost a new concept; it means the ability of the Organization to carry out its tasks effectively that cause the growth and improvement of the organization. A healthy organization is where people want to stay in and work and its people want to be effective and beneficial (Saedi et al., 2010).

Healthy Organizations are those that have ability to evaluate and always try to diagnosis conflict in existing social system and to lift an effective step for these conflicts. Healthy organizations always try with self-modernization reach to characteristics such as capability of adaptability, flexibility and increasing productivity (Farzami Khah et al., 2007).

Quality of life is a process which all the members of the Organization with all the way open and built for this purpose, has taken part in the decision of which fitted on their jobs and especially has overall effect on their environment, and has the intervention; as a result job satisfaction and cooperation increase and decrease neural pressure induced of their work, nowadays, improvement of quality of work life is one of the most important goals of the Organization and the people who work for the Organization. If a person feels that the quality of life work has improved, this point give staff more power in order to conduct job. The result of this process is the creation of life force and active within the group or organization that increase the productivity of interest beyond the expected results with respect to the standard of the technologic or equipment and this cause more motivation to better work and cause better life work quality (Khadivi and Ali, 2007). The philosophy of quality of working life is on the grounds that the Organization should meet the needs of both technical and social needs. Namely the organization technically should be entitled with such performance so be able to continue life and playing task. At the same time, organizations of social opinion should be effective so that fulfill the various needs of employees to diversity, learning, feedback, and independence (Conningham, 2001). In General, the quality of working life as a philosophy means quality and content of the relationship between man, his job duties and job types. This is different from the viewpoint of human-like relations, organization, community, job design, work organization, job requirements and the fundamental concepts of the individual and social values can be considered. (Shirzad kebria and Bordbar, 2010). In fact, the quality of work life is an important source of organizational development that the organizational development is the development composition of the science and art, which is also the field of social professional practice area of scientific investigations, improve the quality of life means each levels in the organization to increase the effectiveness of the organization through the promotion of staff and growth of human dignity and it will be a process that through interested parties of the organization, i.e., management, workers unions and staff, learn how they work with each other, and determine what actions, changes and progress are desirable and effective and they must be done to reach organizational goals and quality of life for all members of the organization improve (Ahmadi et al, 2003).

In the context of the relationship between the self awareness with the health of organization and quality of work life of managers in particular, no research has done, so the present research attempts to answer the question, whether there is a relationship between self awareness with organizational health and the quality of working life.

In relation to the axiom has been raised, no research has been done so far, but the researches that has been done on the subject presented, these results achieved. Mohammadi (1999) in the research to the relationship between the quality of work life and organizational health of high schools in Kurdistan province, survey research on samples of 410 people and using Pearson statistical analysis, indicated that between the quality of work life and organization health there is significant and direct relationship. Also, the results showed that there is a significant difference between the organizational health and gender but between the quality of working life and gender, there is no significant difference and the quality of working life as 71 percent predicate changes in organizational health.

In other research Farzami Khah (2007) examined the relationship between self-awareness of managers and organization health in Bojnord city in high schools and came to the conclusion that between self-awareness of managers and organizational health, there is a significant relationship. Other research, Saedi et al. (2010) entitled as the relationship between the quality of work life and organization health with the job satisfaction concluded that between quality of work life and organizational health with job satisfaction, there is significant direct relationship. Zahed Bablan et al. (2006) in the research entitled "the relationship between the school organizational health and organizational commitment of boys high school teachers in Ardehili province" found that
organizational health and the seven dimensions of it with organizational commitment and its branches with the three types of it has significant correlation and high school that have high organizational health have more organizational commitment.

Predakhtchi, and Ahmadi and arzomndi (2006) " in the study of the relationship between the quality of work life and job Burnout of teachers and school administrators in the Takestan" concluded that between quality of work life and job Burnout of teachers and administrators there is a significant relationship and between components of quality of work life for a fair payment, social order, overall situation has the greatest influence on job burnout. Barnes (2004), in a study entitled "organizational health of high schools, trust and participation in decision-making," in University of New Jersey explained result of his research: organizational health of high schools has a positive relationship with the trust of educational training board to manager and the trust of Board to partners. Organizational health as well by the lack of the presence of the Board of education in decision making of the classroom and the decisions of the Director has reverse relation. Williams (2004), in a study entitled "perceived value of ethics and organizational situation» state results of his research as follow: between employee perceptions of ethical style of the manager and the organization situation there is significant satisfactory relationship. Managers with productive ethic style and unethical are known with unhealthy organizations situations. When the data in terms of gender, age, work experience were separated, more male teachers, had correlation with very moral productive style with healthier environment, and more female teachers had correlation with unhealthy situation with this style. In addition, younger teachers had more correlation with a healthy organization situation with managers with moral style of productive manner and the correlation among the old teachers with this style of moral with unhealthy thought. The parameter of consideration had highest dimension of recounts with health of organization with ethical style of manager. The data suggest that, ethics, when used as a management tool, affected the shape of the health of the Organization. The overall goal of this study was to study the relationship between self awareness and the quality of life work and organizational health of high school managers in Zahedan. The main research question is whether between self awareness with the quality of life work and organizational health of high school managers in Zahedan there are relationship? To respond to the main research question, the following questions will be studied:

- Is there a relationship between self-awareness and its dimensions with the amount of quality of work life?
- Is there a relationship between self-awareness and its dimensions with the amount of quality of organizational health of managers?
- Is there relationship between the quality of work life and managers organizational health?
- Can the dimensions of self-awareness predict quality of work life of managers?
- Can the dimensions of self-awareness predict organizational health of managers?

Research methodology

Descriptive research methods of correlation have been used. The statistical population of the research consists of all the managers of high school in Zahedan. In this study, due to the small nature of the statistical society, sampling method was used that total of statistical community (N = 92) were chosen as a sample. After data collection, information analysis was conducted based on 92 questionnaires relating to the 45 male and 47 female managers.

Methods and tools for data collection

Method of gathering data was conducted through questionnaires. In order to collect information related to the research from self-awareness questionnaire (Rastogi, 1970) 51 question of 5 option Likert was used with little summarization that options are in order, fully agree, agree, no idea, disagree or completely disagree, and to assess the quality of the work life and organizational health assessment, questionnaire s of Research Institute for Sinai has been used and in order has 24 and 23 questions. Validity in this study is the type of content and for the calculation of the reliability of the questionnaire; the questionnaire between 30 people distributed and then was collected. The following table shows the Alpha coefficient values of each of the questionnaires.

<table>
<thead>
<tr>
<th>alpha</th>
<th>Number of questions</th>
<th>variables</th>
<th>Row</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.92</td>
<td>21</td>
<td>self-awareness</td>
<td>1</td>
</tr>
<tr>
<td>0.81</td>
<td>30</td>
<td>organizational health</td>
<td>2</td>
</tr>
<tr>
<td>0.76</td>
<td>15</td>
<td>quality of work life</td>
<td>3</td>
</tr>
</tbody>
</table>
In this study to analyze the research questions (concerning self-awareness with the amount of quality of work life and organizational health of administrators of high school in Zahedan) of Pearson coefficient, the regression was used. It must be mentioned that all statistical calculations with SPSS software, version 18 was carried out.

The first question: Is there a relationship between self-awareness and its dimensions with the amount of quality of work life?

Results of Correlation coefficient with self-awareness and its dimension with quality of work life

<table>
<thead>
<tr>
<th></th>
<th>Be emotional</th>
<th>Be sociable</th>
<th>Feelings of shame and guilt</th>
<th>Fault and beliefs</th>
<th>Present, future and past</th>
<th>valuable</th>
<th>Self acceptance</th>
<th>Self confidence</th>
<th>abilities</th>
<th>Fitness and gender health</th>
<th>Self awareness</th>
<th>Variables</th>
</tr>
</thead>
<tbody>
<tr>
<td>R</td>
<td>0.30</td>
<td>0.27</td>
<td>0.006</td>
<td>0.03</td>
<td>-0.06</td>
<td>0.03</td>
<td>0.04</td>
<td>0.35</td>
<td>0.17</td>
<td>-0.15</td>
<td></td>
<td>0.027</td>
</tr>
<tr>
<td>Sig</td>
<td>0.000</td>
<td>0.00</td>
<td>0.95</td>
<td>0.77</td>
<td>0.56</td>
<td>0.74</td>
<td>0.67</td>
<td>0.000</td>
<td>0.94</td>
<td>0.132</td>
<td>0.000</td>
<td>Sig</td>
</tr>
</tbody>
</table>

Findings of table show the correlation coefficient of self-awareness and the quality of working life is equal to \( r = 0.27 \) that is a significant relationship in the confidence level in 99% \( (p < 0.01) \). Therefore, in terms of statistical between two variables self-awareness and quality of working life, there is significant direct relationship. Also the dimensions of self-confidence \( (r = 0.36) \), being social \( (r = 0.27) \) and being emotional \( (r = 0.30) \) with the quality of work life at the level of 99% have significant direct relationship \( (p < 0.01) \). As well the table indicates that between gender health and fitness \( (r= 0.15) \), abilities \( (r = 0.17) \), acceptance \( (r = 0.04) \), valuable \( (r = 0.03) \), faults and belief \( (r = 0.03) \), feeling of shame and guilt \( (r = 0.006) \) and present, the future and the past \( (r = -0.6) \) and the quality of working life at the level of 95%, there is no significant relationship \( (p > 0.05) \).

Second question: Is there a relationship between self awareness and its dimensions with the amount of quality of organizational health of managers?

Findings of table show the correlation coefficient of self-awareness and organizational health is equal to \( r = 0.61 \) where the confidence level is 99% has a significant relationship \( (p<0.01) \). Therefore, statistically between the two variables of self awareness and organizational health there is a direct significant relationship. As well, between the dimensions of the ability \( (r = 0.49) \), confidence \( (r = 0.49) \), acceptance \( (r = 0.45) \), present, future and past \( (r = -0.37) \), feeling shame and guilt \( (r = 0.53) \) and being emotional \( (r = 0.45) \) with organizational health at the level of 99%, there is a significant relationship \( (p <0.01) \). And between the Fitness and gender health \( (r = 0.21) \) and fault and belief \( (r = 0.11) \) and organizational health at the level of 95 percent, there is a direct significant relationship \( (p < 0.05) \). Also between gender health and fitness \( (r = -0.17) \), and being social \( (r = 0.11) \) at the level of 95 percent, there is no significant relationship \( (p >0.05) \).

Third question: Is there relationship between the quality of work life and managers organizational health?

Table of results of correlation coefficient of self awareness with quality of working life

<table>
<thead>
<tr>
<th>Sig</th>
<th>r</th>
<th>Standard deviation</th>
<th>mean</th>
<th>number</th>
<th>variables</th>
</tr>
</thead>
<tbody>
<tr>
<td>0.000</td>
<td>0.21</td>
<td>10.11</td>
<td>91.21</td>
<td>92</td>
<td>Quality of work life</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4.91</td>
<td>57.79</td>
<td>92</td>
<td>organizational health</td>
</tr>
</tbody>
</table>

The finding of table shows that the average quality of work life of managers is (91.21) and SD (10.11) and also in the field of organizational health has a mean (57.79) and SD (4.91), respectively. The table shows that the correlation of quality of work life and organizational health is equal to \( r =0.23 \) which is statistically significant at the 95% confidence level \( (P<0.01). \) So there is statistically significant direct relationship between two variables quality of work life and organizational health.

The fourth question: Do self - awareness dimensions can predict the quality of working life of managers?

Stepwise regression was used in studying the predictor variables of health organizational management from Zahedan which results are showed in the table:
Summary table of regression model of self-awareness dimensions to predict the quality of work life of managers.

<table>
<thead>
<tr>
<th>step</th>
<th>variable</th>
<th>R</th>
<th>R²</th>
<th>F</th>
<th>β</th>
<th>t</th>
<th>sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Confidence</td>
<td>0.34</td>
<td>0.11</td>
<td>12.23</td>
<td>0.346</td>
<td>3.49</td>
<td>**</td>
</tr>
<tr>
<td>2</td>
<td>+Confidence Sociability</td>
<td>0.43</td>
<td>0.17</td>
<td>12.23</td>
<td>0.346</td>
<td>3.49</td>
<td>**</td>
</tr>
<tr>
<td>3</td>
<td>Confidence+ Sociability Sexual and Health Fitness</td>
<td>0.50</td>
<td>0.23</td>
<td>12.23</td>
<td>0.346</td>
<td>3.49</td>
<td>**</td>
</tr>
</tbody>
</table>

The table shows that in the first step confidence has the most prediction in studying priorities of the predictor variables on the quality of work life of managers, that this variable could predict 11% of the variation in the quality of working life. In the second step of the sociability also is aspect of prediction model, these two variables together have been able to predict 17% variation in quality of working life, it means that the variables of the sociability could add 6 percent to last prediction variable. In the third step the range of sexual and health fitness has been added in prediction model of quality of work life and these three variables could predict 23 percent of variation in quality of working life. It means that 6% has added to the last predicted variables. Standardized beta coefficient indicates that the confidence variable in the regression equation has 0.42 beta coefficient and sociability has 0.25 beta coefficient, and sexual and health fitness variable has 0.26 beta coefficient.

The fifth question: do the self-awareness dimensions can predict health organizational of managers?

Stepwise regression was used in studying the predictor variables of health organizational managers from Zahedan which results are showed in the table:

Summary table of regression model of self-awareness dimensions to predict the health organizational of managers:

<table>
<thead>
<tr>
<th>step</th>
<th>variable</th>
<th>R</th>
<th>R²</th>
<th>F</th>
<th>β</th>
<th>t</th>
<th>sig</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Feelings of shame and guilt</td>
<td>0.53</td>
<td>0.27</td>
<td>35.77</td>
<td>0.533</td>
<td>5.98</td>
<td>**</td>
</tr>
<tr>
<td>2</td>
<td>Feelings of shame and guilt+ Abilities</td>
<td>0.44</td>
<td>0.41</td>
<td>35.77</td>
<td>0.393</td>
<td>4.79</td>
<td>**</td>
</tr>
<tr>
<td>3</td>
<td>Feelings of shame and guilt+ Abilities+ present, future, past</td>
<td>0.43</td>
<td>0.43</td>
<td>35.77</td>
<td>0.393</td>
<td>4.79</td>
<td>**</td>
</tr>
</tbody>
</table>

The table indicates that in studying the predictor variables of health organizational, sense of shame and guilt in the first step had the most prediction, which this variable could predict 27% variation of health organizational and in the second step abilities dimension has added to prediction model. These two variables together have been able to predict 41% variations in health organizational. It means that abilities variable could add 14 percent to the last prediction variable. In the third step, the present, future and past, have been added in prediction model which these three variables together have been able to predict 43% of the changes in health organizational. It means that the present, past and future variable could add 2% to the last prediction variables. Standardized beta coefficient indicates that in the regression equation shame and guilt has 0/43 beta coefficient and abilities variable has 0/32 beta coefficient and the future, present and past variable has-0/17 beta coefficient.

Discussion

The first question: Are there any relationship between self-awareness and its dimension with the quality of work life of managers in secondary schools of Zahedan?

Results indicate that there is direct relationship between self-awareness and the quality of work life. This finding fits well with the findings, but above findings has not been confirmed by research. Also the findings showed that there is significant positive relationship between the dimensions of the self-awareness means confidence, sociability, and emotionality with quality of work life of managers, but sexual and health fitness, abilities, self-acceptance, esteem, guilt and beliefs, feelings of shame and guilt, the past, present and future have not a significant direct relationship with the quality of work life.
Second question: Is there any relationship between self-awareness and health organizational of managers in secondary schools of Zahedan?

Results indicate that there is direct and significant relationship between self-awareness and health organizational. This finding fits with research results of Farzami et al. (2007). The findings show that there is significant relationship between the self-awareness means abilities, self-confidence, self-acceptance, present, future and past, and emotional feelings of shame and guilt, and valuable and beliefs dimensions with health organizational. But there isn’t significant relationship between Sexual and health and fitness and social dimensions.

Third question: Is there any relationship between the quality of work life and health organizational of managers in secondary school of Zahedan?

Results suggest that there is significant and direct relationship between two variables, quality of work life and health organizational. This finding fits with, Mohammadi (1999), Saedi et al (2010) findings, which showed there is a significant relationship between quality of work life and health organizational.

The fourth question: can self-awareness dimension predict to the quality of work life of managers?

Regression analysis showed that the quality of work life of managers in the first step of confidence had the most prediction in studying the predictors' dimension this variable was able to predict 11% of the variation in the quality of working life lonely. In the second step the sociability has been added in prediction pattern, these two variables together have been able to predict 17% of the quality of work life. It means that sociability could 6% to the last predicted variable. In the third step, the sexual and health fitness has been added to the predictions model of quality of work life, and these three variables together have predicted 23% the quality of work life. It means that the range of sexual and health fitness could add 6% to the last predicted variables.

The fifth question: the dimensions of organizational health himself, could have predicted?

Regression analysis indicated that the sense of shame and guilt in the first step has the most predictions in study of health organizational; this variable alone was able to predict 27% variation of health organizational. And in the second step abilities dimension has been added into the prediction pattern, these two variables together have been able to predict 41% health organizational of variation it means that abilities variable could add 14 percent to the last predicted variable. In the third step, the past, present and future variable also has been added into prediction pattern, these three variables together have been able to predict 43% of health organizational variation.

In connection with these results, it is worth mentioning that there is significant and direct relationship between self-awareness and the quality of working life and health organizational. It means that the managers who have high self-awareness and knowledge about themselves it is more effective on quality of work life and health organizational. Also the results also showed that the relationship between quality of work life and health organizational are significant, these findings were not unexpected, because the quality of working life include emotional factors, such as interest and attachment to, as well as the a sense of loyalty and accountability is closely related to health organizational. In other words, with increasing quality of work life of mangers we can see health organizational will be increase too. The results also showed that among self-awareness dimension, the self-confidence, sociability and sexual and health fitness together are able to predict the quality of working life of managers and feelings of shame and guilt, and abilities and the present, future and past are able to predict changes in health organizational.

Self-awareness, quality of work life and organizational health are present variables, which can be affected by many factors, in this study tried to examine some variables such as gender, education, and Managers work experience. Results showed that self-awareness, quality of work life and health organizational are identical in male and female managers.

According to managers degree there is significant differences between of self-awareness variables. But the quality of work life and health organizational have the same degree. The results showed that there is significant relationship between the self-awareness and health organizational of managers according the service history, but there is no significant difference between qualities of work life, based on years of service.

Suggestions

According to the relationship which there is between self-awareness with quality of work life and health organizational of managers and education authorities, we suggest to pay attention more about the selection and appointment of directors. Managers should be selected whose characters are balanced cool, mature and with high confident.

According to that self-awareness is related to health organizational. So the manager's awareness
and understanding of his become rise it is more effective on organizational.

Promotion and assignment carried out according to the merits and fairness and equity payments must be met.

Meritocracy system implemented in the post and responsibilities of the education system to increase efficiency and ultimately leads to increased job satisfaction and organizational commitment.

Discrimination and inappropriate relationships in the workplace will be deleted. According to the work and work environment variables and With respect to organizational changes in job satisfaction and commitment organizational we suggest in order to increase, job satisfaction and commitment organizational of teachers pay attention more about working conditions, features, and the Social work, decency and justice.

References