

Servant leadership, Organizational Health and Effectiveness in Ethiopian Teacher Training Colleges

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Abstract

The study was aimed to examine the practices and correlates among servant leadership, organizational health and effectiveness in Ethiopian Teacher Training Colleges. It was descriptive correctional survey which involved 160 participants (male=104; female=56). Samples were selected using stratified and simple random sampling methods. Frequency, Percentage, Mean, t-test, correlations and regressions were used to analyze data. The results were significant at $p < 0.05$. Hence, the practice of servant leadership was manifested 'sometimes'. The Pearson correlation coefficient analysis also indicated moderate positive relationships between servant leadership and organizational health ($r = 0.663$). The contribution of servant leadership to organizational health was also found to be $R^2 = 0.440$, $F = 123.924$, $P < 0.05$ indicating that 44% of the health of the organization was explained by servant leadership practices and behaviors exhibited by leaders and staff in their work units. Besides, Pearson correlation analysis was made between organizational health and effectiveness. As a result, it showed statistically significant and strong positive correlation ($r = 0.723$). About 52.27% of organization's effectiveness was also explained by healthy working environments created in each work unit. Moreover, the correlation between servant leadership and organizational effectiveness indicated statistically significant and moderate positive correlation ($r = 0.612$). Thus, among other factors, 37.45% of organization's effectiveness was determined by the practice of servant leadership principles and behaviors. Therefore, to have conducive and healthy working organizations with service-oriented mindsets that enhance employees' commitments for the job, leaders in sample colleges and others are advised to behave as servants for their constituents and apply servant leadership approach in their respective work contexts.

Keywords: Organizational Effectiveness, Organizational Health, Servant Leadership.

Introduction

Social organizations in due process of achieving pre-defined goals and missions are influenced by many factors which can have direct or indirect effect on them. For instance, the presence or absence of the required resources, the type of leadership style and leaders' behaviors, the nature of relationship between employees and leaders, and the ability of the organization(s) to thrive to change can have direct bearing on the success or failure of organizations' missions and goals (Douglas & Fredendall, 2004; Gupta et al., 2005; Chien, 2004). Above of all, the type of leadership style and leader's behavior have pivotal impacts in determining the destiny of social organizations (Kim, S., Kim, K., & Choi, Y., 2014; Sendjaya, 2015).

Studies also indicate that leadership approaches or styles and people's thinking towards leadership largely determine the healthiness or sickness of organizations; which is linked to their success or failure (Jenaabadi & Javan, 2014). Hence, according to Korkmaz (2007, p.5), organizational health refers to:

An organization which is trustworthy in information exchange, flexible and creative for making necessary changes based on the data obtained, has unity and commitment toward its goals;

and has internal support and free from any fear and threat since threat damages a good and healthy relationship, decreases flexibility and instead of interest in the whole system, stimulates self-protection.

Quick, Macik-Frey and Cooper (2007) place the type of leadership being applied and leaders' roles at the heart of every healthy organization and surpassed performances. As a result, the 21st century social organizations such as educational institutions need leaders with non-repressive mentality, absence of heroic thinking, and leaders not easily trapped by a rapid pace of environmental chaos and caught in a storm of stress. In this regard, Greenleaf (1997), Spears (2004), Goleman (1995), and Kountze & Posner (1987) have stressed that contemporary organizations need leaders with the ability to understand the nature of human dignity, foster a deep sense of community and inspire others through integrity, trust, and honesty to a higher vision of what it means to be human. Thus, this also implies that healthy organizational leadership practices do mean healthy organizations that lead to promising success and growth. In favor of this, Jenaabadi & Javan (2014, p.311) explained that educational institutions characterized by "healthy and supportive organizational climate leads to more trust of people; and high morale [that] naturally leads to increase in teachers' efficiency" and productivity. Therefore, for contemporary organizations to realize their vision, create healthy and productive as well as profitable institutions, scholars like Spears (2004) strongly recommend a shift towards a leadership model or approach of putting people first as a necessary step. Spears & Lawrence (2004) also capitalized that moving towards and implanting servant leadership model which is characterized by a more meaningful, ethical and moral leadership thinking in all social organizations is considered as a legitimate measure for creating a positive and productive work environment.

The concept of a leader as servant was primarily coined and philosophized by Greenleaf in 1970's (Greenleaf, 1977). It is a leadership theory guided by the principle of service prior to leadership practices. Servant leadership also gives special emphasis to personal and professional growth of followers, apply moral principles, "encourage self-actualization, positive job attitudes, high performance, and a stronger organizational focus and sustainability" (Dierendonck, 2011, P.13). Besides, it is a converse to traditional top-down, self-centered, and individualized forms of leadership where the interest of the followers and others are left behind to the interest of the leader and organizations.

The purpose of servant leadership approach is not merely serving in the sense of doing things for others and not to create non-thinking, obedient, controlled and reliant followers, but to make them bring their intellect and dynamism to the organization, and encourage self-learning, critical thinking and encourage a real two-way exchange of ideas for the leader to learn from followers (Western, 2013; Greenleaf, 1970). Thus, organizations with servant leaders and leadership cultures are healthy, efficient; and leader- employee relationships are smooth and synchronized (Doraiswamy, 2012; Korkmaz, 2007). Just like the health of human beings and other living creatures on earth, educational institutions can also be either healthy or sick. Healthy institutions are characterized by their ability to install an environment and working cultures conducive to and promote its continuity and make people exploit their full capacities for the betterment of the organization (Dooris et al. 2010). Whereas, leaders with excessive use of top-down processes or with authoritative/power-driven approaches characterized by officious, command and control leadership practices often create troubles and chaos in colleges which ultimately lead them to be unhealthy (sick) and weaken their ways to goal achievements (Alqarni, 2016; Korkmaz, 2007; Toprak, Inandi & Colak, 2015).

Statement of the Problem

Often, social organizations such as educational institutions become sick or unhealthy and perform less because of poor and unethical leadership practices characterized by enhanced self-importance, power-driven focus, officious and authoritative behaviors (Keith, 2013; Campbell, 2006; Muriisa, 2014). This is to say apart from many other factors, leadership failure amounts to the highest share of havoc and wild scenarios such as destructive and hostile students' behaviors, deteriorated quality of education, incompetent and unethical graduates in educational institutions (Russel & Stone, 2002; Sendjaya et al., 2008). In addition, sizeable number of educational institutions such as colleges are grappling from various types of leadership calamities and snags that have daunting effects on employees and customers and make them fail to meet their purposes-i.e., producing competent graduates with the required knowledge, skills and attitudes for middle level work force demands (Lerra, 2015).

In many instances, colleges and universities are engulfed with inefficient, authoritative and undemocratic leaders and leadership cultures that strive for fulfilling own needs over service recipients' and institutional needs. In line to this, Greenleaf (1977, p. 19) stated that "leadership in higher education is

ineffective, and embraces individual needs over those of the institutional whole". Likewise, in many tertiary education institutions of Ethiopia, leader-employee relationships are patriarchal, authoritative and undemocratic which rather promote employees' disengagement, aloofness and divorce from their tasks. According to studies conducted by Yalew (2004), and Lerra (2015), public higher education institutions are largely characterized by centralized command and control management and leadership practices whereby power is concentrated on few people at the top management echelon. On top of this, a study conducted by Frew, Mitiku and Mebratu (2016) indicated that most public higher education institutions in Ethiopia lack ethical and moral leaders and leadership cultures which have adverse effects on organizations' health and effectiveness.

Besides, it is unlikely to observe leaders in higher education who assume themselves as servants to their followers or who can take responsibilities for instructional failures in their respective colleges and for the whole education system. And yet, colleges and universities lack leaders who respond to followers' issues and challenges positively, value and validate their perspectives, and show genuine concerns for their needs, interests and abilities in their work contexts (Saint, 2004; Lerra, 2015; Zerihun & Tesfay, 2014; Kassahun, 2015). As a result, many higher education institutions are unhealthy and ineffective, followers are bored of and less dedicated to their profession, restrict/refrain themselves from innovation and change orientations as well as less motivated to come up with progressive ideas and insights that help improve the system.

Above all, leadership failures which make educational colleges unhealthy and weak in their performances are reflected in the form of poor governance such as corruption, importunate hunger for power and material benefits (World Bank, 2012). They are also witnessed in lack of leadership integrity and trust, subordination of organization's interest to self-interests, violation of professional code of ethics, belittling organization's missions and goals, and declined attentions to organizational growth and development (CIHE, 2003; Hellsten, 2006; ICBSS, 2008).

Thus, the purpose of the study was aimed at investigating the praxis, and relationships among servant leadership, organizational health and effectiveness in sample teacher training colleges. It was also guided by the following research questions:

- 1) To what extent are servant leadership behaviors being manifested in colleges understudy?
- 2) Is there any significant relationship between servant leadership and health of institutions?
- 3) Is there any significant relationship between servant leadership and college effectiveness?
- 4) Is there any significant relationship between institutional health and effectiveness?

Objectives of the Study

General Objective

As general objective, this study mainly focused on investigating servant leadership practice and the type of relationship that it has with organizational health and effectiveness in sample colleges.

Specific Objectives

The study attempted to address the following specific objectives:

- Investigating the extent of servant leadership practices in colleges understudy
- Examining the relationship between servant leadership and organizational health
- Examining the relationship between servant leadership and organizational effectiveness
- Examining the relationship between institutional health and effectiveness

Methods

This study employed quantitative approach of descriptive correlational survey design to deal with variables and establish the total pattern of relationships (Brown & Hedges, 2009). Such research design also helps to investigate the predictive power of an independent variable (servant leadership) upon dependent variables (organizational health and effectiveness). The participants involved in this study were academic and administrative staff, and students. Hence, 160 participants were involved in the study believing that samples are representative of the study population since in correlational research

design a sample size of no fewer than thirty may suffice the research work (Cohen et al., 2007). As a result, stratified and simple random sampling methods were employed to select study participants. Closed-ended questionnaires using a 5-point scales (1=Never; 2= Rarely; 3= Sometimes; 4=Often; and 5=Always) were employed to gather data from respondents. Besides, the questionnaires were adapted from Laub's (1999) 6-dimensional assessment model with 20 items and Cronbach alpha level between 0.90-0.93 to measure servant leadership; and Miles (1969) standardized questionnaires to measure organizational health with 20 items as well as Cameron's (1978) standardized questionnaires for organizational effectiveness. The data were analyzed using frequency, percentage, mean, t-test, Pearson's Correlation Coefficient, and linear regressions. The significant alpha level was set at $P < 0.05$.

Moreover, prior to dispatching of questionnaires, leaders and respondents in colleges understudy were informed about the very purpose of the study and confidentiality of the data provided. As a result, consensus was reached with study participants. They were also confirmed not to disclose their real identifications and maintain anonymity.

Results

For this research work, students, academic and administrative staffs were involved as data sources. Thus, a total of 160 participants of which 54 students, 52 academic and 54 administrative staffs were involved in this study. Closed ended questionnaires were also used to gather data from all respondents. With regard to the rate of return of questionnaire 54 (100%) students, 49(94.23%) academic staff, and 51(94.4%) administrative staff properly filled in and returned the questionnaires. As a result, the total response rate was 154 (96.25%).

Table 1: Status of SL, OH and OE in the study contexts

Variables	N	Mean	Sd. Deviation	t	df	Sig. (2-tailed)
Servant Leadership	160	3.0935	.46472	16.154	159	.000
Organizational Health	160	3.1400	.60217	13.444	159	.000
Organizational effectiveness	160	2.5682	.40488	2.132	159	.035

* SL=Servant Leadership; OH=Organizational Health; OE=Organizational Effectiveness

Table1 above shows that there was statistically significant practice of the variables (SL, OH & OE) in colleges understudy with mean values of 3.09, 3.14 and 2.56 respectively. And the mean value of each variable was above the test-value indicating that leaders in sample colleges exhibit servant leadership behaviors, 'sometimes'. In addition, the state of organizational health and effectiveness in colleges understudy were found to be at 'middling levels' indicating that on the average colleges were found to be healthy and effective in their performances.

The Pearson correlation coefficient in Table2 above shows that all dimensions used to measure servant leadership practices in colleges were positively correlated with dimensions used to measure organizations' health. Besides, strong correlations were observed between the following dimensions: valuing people in colleges with optimal power equalization, autonomy and colleges' problem solving capacity; developing college people with communication adequacy, optimal power equalization, cohesiveness and colleges' problem solving capacity; building college community with goal focus, communication adequacy and resource allocation; displaying authenticity with resource allocation, morale and adaptation; providing leadership in colleges with goal focus and morale; and sharing leadership to college community with morale, innovativeness and adaptation. The correlation between servant leadership practices in colleges and the health of their working environment showed statistically significant and moderate positive relationships ($r=0.663$). Besides, the regression analysis showed that the contribution of servant leadership to organizational health was found to be $R^2=0.440$, $F=123.924$, $P < 0.05$ indicating that there was statistically significant predictive power of the practice of servant leadership on the health of colleges. Thus, 44% of colleges' health was explained by servant leadership practices and behaviors exhibited by leaders and staffs in their respective colleges.



Table 2: Correlation between Servant Leadership and Organizational Health

Dimensions	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
1.Valuing People	1.00															
2.Developing people	.597*	1.00														
3.Building Community	.455*	.579*	1.00													
4.Displaying Authenticity	.459*	.515*	.505*	1.00												
5.Providing Leadership	.483*	.615*	.517*	.617*	1.00											
6.Sharing Leadership	.412*	.495*	.514*	.490*	.626*	1.00										
7. Goal Focus	.318*	.543*	.730*	.463*	.712*	.491*	1.00									
8. Communication Adequacy	.586*	.659*	.710*	.571*	.544*	.463*	.451*	1.00								
9. Optimal Power Equalization	.689*	.602*	.340*	.317*	.458*	.377*	.325*	.389*	1.00							
10.Resources Allocation	.488*	.581*	.793*	.699*	.556*	.511*	.549*	.587*	.338*	1.00						
11.Cohesiveness	.461*	.830*	.443*	.365*	.489*	.397*	.475*	.405*	.668*	.437*	1.00					
12.Morale	.433*	.481*	.449*	.727*	.797*	.651*	.508*	.508*	.374*	.489*	.373*	1.00				
13.Innovativeness	.343*	.502*	.447*	.466*	.579*	.715*	.414*	.427*	.319*	.460*	.406*	.446*	1.00			
14.Autonomy	.87*	.526*	.438*	.455*	.438*	.347*	.280*	.545*	.467*	.489*	.384*	.422*	.303*	1.00		
15.Adaptation	.465*	.529*	.521*	.716*	.558*	.709*	.456*	.516*	.362*	.566*	.388*	.494*	.450*	.405*	1.00	
16.Problem Solving capacity	.663*	.694*	.448*	.425*	.446*	.422*	.372*	.520*	.394*	.424*	.475*	.344*	.410*	.461*	.485*	1.00

*1-6=SL dimensions; 7-16=OH dimensions; Correlation is significant at $p < 0.05$

Table 3: Correlation between Servant Leadership and Organizational Effectiveness

Dimensions	1	2	3	4	5	6	7	8	9	10	11
1. Valuing People	1.00										
2. Developing People	.597*	1.00									
3. Building Community	.455*	.579*	1.00								
4. Displaying Authenticity	.459*	.515*	.505*	1.00							
5. Providing leadership	.483*	.615*	.517*	.617*	1.00						
6. Sharing leadership	.412*	.495*	.514*	.490*	.626*	1.00					
7. Student Career Development	.328*	.394*	.319*	.257*	.327*	.288*	1.00				
8. Ability to Attract Resources	.233*	.320*	.240*	.266*	.293*	.280*	.465*	1.00			
9. Student dissatisfaction	.126	.186*	.066	.135	.169*	.121	.329*	.386*	1.00		
10. System openness	.033	.234*	.181*	.185*	.201*	.247*	.287*	.321*	.398*	1.00	
11. Professional Development & Quality of college	.295*	.268*	.190*	.159*	.276*	.226*	.383*	.398*	.497*	.313*	1.00

*1-6=Servant Leadership dimensions; 7-11=Organizational Effectiveness dimensions; $p < 0.05$

In addition, the direct effect of each independent dimension of servant leadership on organizations' (colleges) health was also determined using Beta coefficients. Thus, the Beta coefficient values of all servant leadership dimensions showed statistically significant and positive effects on colleges' healthy working environment

The Pearson correlation coefficient in Table3 above illustrates that all dimensions used to measure servant leadership practices showed statistically significant and positive relationships with dimensions used to measure organization's (colleges') effectiveness in their performances. Besides, all servant leadership dimensions showed better rigor in their relationships with students' career development, colleges' ability to attract resources and their professional development as well as quality aspects. In addition, the Pearson correlation between servant leadership and organizational (college) effectiveness also indicated statistically significant positive correlations ($r= 0.296$). On top of this, the result of regression analysis indicated that the contribution of servant leadership to organizational effectiveness was found to be $R^2=0.088$, $F=5.993$, $P<0.05$ indicating statistically significant predictive power of the practice of servant leadership on organizational effectiveness. Thus, 8.8% of college effectiveness was explained by servant leadership practices and behaviors exhibited by leaders and staffs in colleges. The direct effect of each independent dimension of servant leadership on organizations' (colleges) effectiveness was also determined using Beta coefficients. Thus, the Beta coefficient values of all servant leadership dimensions showed statistically significant and positive effects on colleges' effectiveness.

As shown in Table4 above, the Pearson correlation coefficient indicated that organizations' (colleges') health and effectiveness indicated positive relationships for all dimensions except the negative correlation between organizations' optimal power equalization and system openness and community interaction ($r= -0.016$). Besides, the correlation was statistically significant for the relationships between all colleges' health dimensions and two of their effectiveness dimensions (i.e., student career development and professional development and quality of faculty). Moreover, the Pearson correlation coefficient between organizational (college) health and effectiveness also showed statistically significant and positive relationships ($r= 0.356$).

The result of multiple regression analysis indicated that the contribution of organizational health to organizational effectiveness was found to be $R^2=0.129$, $F=4.562$, $P<0.05$ indicating statistically significant predictive power of the independent variable (organizational health) on dependent variable (Organizational effectiveness). Thus, 12.9% of organizational effectiveness was explained by organizational health practices made by leaders and staffs in colleges. In addition, the direct effect of each independent dimensions of organizational health on organizations' (colleges) effectiveness was also determined using Beta coefficients. Thus, the Beta coefficient values of six organizational health dimensions showed positive effects of which four of them were observed as statistically significant positive effects on colleges' effectiveness. Whereas, the remaining four dimensions used to measure organizational health showed negative or reverse effects of which two of them were observed as statistically significant negative effects on organizations' (colleges') effectiveness.



Table 4: Correlation between Organizational Health and Effectiveness

Dimensions	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15
1	1.00														
2	.451*	1.00													
3	.325*	.389*	1.00												
4	.549*	.587*	.338*	1.00											
5	.475*	.405*	.668*	.437*	1.00										
6	.508*	.508*	.374*	.489*	.373*	1.00									
7	.414*	.427*	.319*	.460*	.406*	.446*	1.00								
8	.280*	.545*	.467*	.489*	.384*	.422*	.303*	1.00							
9	.456*	.516*	.362*	.566*	.388*	.494*	.450*	.405*	1.00						
10	.372*	.520*	.394*	.424*	.475*	.344*	.410*	.461*	.485*	1.00					
11	.226*	.261*	.258*	.278*	.309*	.265*	.310*	.289*	.312*	.375*	1.00				
12	.238*	.179*	.209*	.284*	.347*	.261*	.277*	.171*	.279*	.302*	.465*	1.00			
13	.097	.146	.107	.043	.227*	.158*	.043	.130	.207*	.151	.329*	.386*	1.00		
14	.192*	.149	-.016	.119	.185*	.189*	.269*	.071	.217*	.230*	.287*	.321*	.398*	1.00	
15	.164*	.255*	.230*	.132	.265*	.286*	.155*	.347*	.178*	.143	.383*	.398*	.497*	.313*	1.00

*1-10= OH; 11-15=OE; p<0.05

Discussions

As indicated in purpose statement and basic questions, this study was aimed at examining servant leadership practices in sample public colleges and its correlations with organizational health and effectiveness. The mean values for both study variables showed above the test values indicating that there were middling (or sometimes) practices observed in sample colleges. Another purpose of the study was to investigate the relationship that servant leadership has with organizational health and effectiveness. Thus, the Pearson correlation coefficient results concerning servant leadership and organizational health showed statistically significant and moderate positive correlations ($r=0.663$). Besides, the dimensions used to measure both servant leadership practices and organization health also indicated statistically significant and positive relationships (See Table 2). And it is true that organizations which give heightened values for employees, empower, and build strong sense of communities, display trust as well as promote integrity with shared decision-making cultures exhibit servant leadership practices and thereby able to create healthy and productive organizations. Such organizations are also characterized by harmonious and concord relationships between leaders and employees, and among employees themselves. In line to this, a study conducted by Ziapour et al. (2015) explained that colleges and universities with people-focused, collegial, and considerate leadership as well as respectful relationships than formal rules are healthy and characterized by better goal achievements, higher employee morale and commitment to work.

Moreover, as indicated in the result of multiple linear regression analysis, the health of an organization is largely determined or explained by servant leadership approach ($R^2= 0.440$, $F=123.924$, $P<0.05$). As a result, 44% of organizations' (colleges') health was explained by servant leadership practices exhibited by leaders and other members of the organization (colleges). Besides, because servant leadership showed a huge impact upon the health of organizations, there are numerous demands and interests arising from many social organizations to apply such leadership philosophy. Servant leadership is also practical and altruistic leadership that puts support, encouragement and services first and exercises leadership later with unique mindsets for the very purpose of leadership and leader's roles (Greenleaf, 1977; Spears, 2004; Laud, 1999).

Another important purpose of this study was examining the relationship between servant leadership and organizational (college) effectiveness. Thus, the Pearson correlation coefficient result showed that there were statistically significant and moderate positive relationships observed between the two variables ($r= 0.296$). The correlation among the dimensions used to measure servant leadership and organizational effectiveness were also found to be significant and positive (see Table3). In addition, servant leadership practices carried out in organizations (colleges) showed significant effect on organizations' (colleges') effectiveness ($R^2= 0.88$). Thus, 8.8% of organizations' effectiveness was determined by servant leadership practices exhibited by leaders and other staff members in organizations (colleges). In favor of this, a study by Parolini (2005) pointed out that servant leadership and leaders have paramount contributions for enhancing organizational performance and ensure effectiveness by prioritizing the needs and interests of staffs and service recipients or customers.

The study also aimed at examining the relationship between organizations' (colleges') health and effectiveness. As a result, Pearson's correlation coefficient analysis showed that there were statistically significant and moderate relationships between the two variables ($r= 0.356$). Besides, all dimensions except two (see Table4) that are used to measure organizations' (colleges') health showed significant and positive relationships with organizations' (colleges') effectiveness. Moreover, the result of simple linear regression analysis also indicated that 12.9% of organizations' (colleges') effectiveness was explained by organizations' (colleges') healthy working environments (or $R^2=0.129$, $F=4.562$, $P<0.05$). In this regard, a study conducted by Hoy and Hannum (1997, p.167) also emphasized that healthy educational institutions such as colleges and universities are characterized by "comparatively effective professional practices, better emphasis on students learning outcomes, and higher [staff] commitment" accompanied by overall effectiveness. Organizations (colleges) with comfortable and open working environments, that promote trust and cohesive relationships among employees as well as collaborative working cultures as credo and daily practices are healthy organizations. Such organizational practices are also precursors for overall organizations' goal achievements and effectiveness. However, this is impossible with the absence of leaders and leadership cultures installed in organizations which place and capitalize the good of followers over the self-interest of leaders, promote the valuing and

development of followers, the building of community, the practice of authenticity and provision of leadership as well as sharing of power and status for common good of each individual, the organization and people served by the organization (Greenleaf, 1977; Laub, 1999).

Conclusion

The result of this study showed that the type of leadership in organizations such as educational institutions play key roles in making them healthy and effective. The study also showed that in colleges understudy, leaders and staffs exhibit servant leadership practices at middling or moderate level which calls for better applications. It was also indicated that Pearson's correlation coefficient showed very strong relationships between servant leadership practices and organizational health. That is, healthy working environments accompanied by collaborative and enhanced employee job commitment, shared-decision making, and harmonious relationships among staffs are largely attributed to servant leadership approach. Besides, the result of this study indicated that 44% and 8.8% of organizations' health and effectiveness were accounted by servant leadership practices manifested by leaders and other staff members in colleges understudy. In addition, based on the results of Pearson correlation coefficient analysis, organizational health and effectiveness showed significant relationships ($r=0.356$). Above all, the results of the study showed that servant-led organizations are characterized by healthy working environments and effective performances.

Therefore, having learned from the contributions of servant leadership for healthy and effective organizations, college leaders are advised to create the necessary awareness about the practice and benefits of such leadership approach, make staffs and others play significant roles with the mindset of serving others as a top priority over self-interests. In addition, healthy institutions are foundations for positive and collaborative attitudes as well as collegial relationships among staffs. This will also serve as preconditions for enhanced performances and effectiveness. As a result, leaders in educational institutions are advised to model themselves in creating healthy institutions through open communications and discussions, promoting collaborations and cohesiveness among staffs, acculturating trust and taking care of employees' wellbeing and needs

References

- Alqarni, S. (2016). Linking organizational health in Jeddah secondary schools to students' academic achievement. *Academic Journals*, 11(7), 328-338.
- Chien, H. (2004). A study to improve organizational performance: A view from SHRM. *Journal of American Academy of Business*, 4(1/2), 289-291.
- Cameroon, K. (1978). Measuring organizational effectiveness in institutions of higher education. *Administrative Science Quarterly*, 23, 604-632.
- Council for Industry & Higher Education (CIHE) (2003). *Ethics matters: Managing issues in higher education*. London, UK: The Council for Industry & Higher Education Publications.
- Dierendonck, D. (2011). Servant Leadership: A review and synthesis. *Journal of Management*, 37(4), 1228-1261.
- Dooris, M., Cawood, J., Doherty, S., & Powell, S. (2010). *Healthy universities: Concept, model and framework for applying the healthy settings approach within higher education in England*. Final Project Report.
- Doraiswamy, I. (2012). Servant or leader? Who will stand up please? *International Journal of Business and Social Science*, 3(9), 178-182.
- Douglas, J. & Fredendall, L. (2004). Evaluating the Deming management model of total quality in services. *Decision Sciences*, 35(3), 393-422.
- Frew, A. Mitiku, B., & Mebratu, T. (2016). The ethical behaviors of educational leaders in Ethiopian public universities: The case of western cluster universities. *European Scientific Journal*, 12(13), 359-379.
- Greenleaf, R. (1970). *The servant as a leader*. Indianapolis: The Greenleaf Center.
- Greenleaf, R. (1977). *Servant leadership: A journey into the nature of legitimate power and greatness*. New York: Paulist Press.
- Gupta et al. (2005). Quality management in service firms: Sustaining structures of total quality service. *Managing Service Quality*, 15(4), 389-402.
- Hellsten, S. (2006). *Leadership ethics and the problem of dirty hands in the political economy of contemporary Africa*. Retrieved from <http://ethique-economique.net>.
- Hoy, K. & Hannum, J. (1977). Middle school climate: An empirical assessment of organizational health and student achievement. *Educational Administration Quarterly*, 33(3), 290-311.
- International Centre for Black Sea Studies (ICBSS) (2008). *Good governance and public administration reform in the Black Sea Economic Cooperation (BSEC) member states*. Xenophon Paper series. Retrieved from www.icbss.org.
- Jenaabadi, H. & Javan, Z. (2014). Study of the relationship between organizational health and establishment of school-based management in secondary schools of the city of chabahr city, Iran. *International Journal of Economy, Management and Social Sciences*, 3(6), 311-316.
- Kassahun, K. (2015). *Academic governance in public and private universities in Ethiopia: A comparative case study*. Unpublished PhD Dissertation, Addis Ababa, Ethiopia: Addis Ababa University.
- Kim, S., Kim, K. & Choi, Y. (2014). A literature review of servant leadership and criticism of advanced research. *International Journal of Social, Behavioral, Educational, Economic, Business and Industrial Engineering*, 8(4), 1154-1157.
- Korkmaz, M. (2007). The effects of leadership styles on organizational health. *Educational Research Quarterly*, 30(3), 23-55.
- Laub, A. (1999). *Development of the organizational leadership assessment (OLA) instrument* (Doctoral Dissertation). Retrieved from <http://www.olagroup.com/Images/mmDocument/Laub%20Dissertation%20brief.pdf>

- Lerra, M. D. (2015). Leadership challenges to transformative change for quality education in public universities: A case of Wolayta Sodo University. *African Education Research Journal*, 3(3), 170-183.
- Miles, B. (1969). Planned change and organizational health: Figure and ground. *Organizations and Human Behavior*, 375-391.
- Muriisa, R. (2014). Rethinking the role of universities in Africa: Leadership as a missing link in explaining university performance in Uganda. *JHEA/RESA*, 12(1), 69-92.
- Parolini, L. (2005). Investigating the relationships among emotional intelligence, servant leadership behaviors and servant leadership culture. Retrieved from http://www.regent.edu/acad/sls/publications/conference_proceedings/servant_leadership_roundtable/2005/pdf/parolini_invest.pdf
- Quick, J., Macik-Frey, M. & Cooper, C. (2007). Managerial dimensions of organizational health: The healthy leader at work. *Journal of Management Studies*, 44(2), 189-205.
- Russell, R. & Stone, A. (2002). A review of servant leadership attributes: Developing a practical model. *Leadership & Organization Development Journal*, 23(3), 145-157.
- Saint, W. (2004). Higher education in Ethiopia: The vision and its challenges. *Journal of Higher Education in Africa*, 2(3), 83-114.
- Sendjaya, S. (2005). Personal and organizational excellence through servant leadership: Learning to serve, serving to lead, leading to transform. Retrieved from <http://www.springer.com/978-3-319-16195-2>
- Sendjaya, S., Sarros, C. & Santora, C. (2008). Defining and measuring servant leadership behavior in organizations. *Journal of Management Studies*, 45(2), 402-424.
- Spears, L. & Lawrence, M. (2004). *Practicing servant-leadership: Succeeding through trust, bravery, and forgiveness*. Jossey-bass.
- Spears, L. (2005). *The understanding and practice of servant-leadership: Servant Leadership Roundtable*. The Greenleaf Center for Servant-Leadership, Regent University.
- Toprak, M., Inandi, B. & Colak, A. (2015). Do leadership styles influence organizational health? A study in educational organizations. *International Journal of Educational Methodology*, 1(1), 19-25. Doi: 10.12973/ijem.1.1.19
- Yalew Endawoke (2004). Teachers' beliefs, knowledge and practices of learner-centered approach in schools of Ethiopia. *The Ethiopian Journal of Education*, xxiv (2), 1-106.
- Ziapour, A. Sharafi, K., Kianipour, H., Kianipour, N., & Moradi, S. (2015). The study of organizational health and social factors among Kermanshah University Medical Sciences and Health Services Staff. *Technical Journal of Engineering and Applied Sciences*, 5(2), 43-52.
- Zerihun, D. & Tesfay, D. (2014). Leadership effectiveness in public service organizations of Ethiopia: Perceptions of leaders in public service organizations. *Journal of Law, Policy and Globalization*, 26, 115-129.