

## **Study of Factors that Influence Organisational Health in Indian companies**

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### **Abstract**

*The purpose of this article is to understand and develop a construct of organisational health (OH) derived from factors identified from the literature review. 40 experts and organisational development consultants have responded to this construct to test the internal consistency, confirm the factor structure and assess convergent and divergent validity of the construct. Post factor analyses of certain factors with load less than 0.5 were removed, and the rest were retained. The research provides the details of the influence of these factors on organisational health. This study aims at establishing factors influencing organisational health, consequently leading to an integrated organisational health model. Very few firms have understood the significance of organisational health; they do not know what to measure due to the absence of understanding of what constitutes factors of organisational health.*

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### **I. Introduction**

Bennis (1962) defined the concept of organisational health for the first time in his research showing his concern regarding the treatment of employees at work. Organisational health does not mean ensuring that 'people are happy'. Nor is it about corporate culture. The underlying concept is that performance and organisational health are inextricably linked. There is no lasting performance without real organisational health (Tavis, 2015). The term organisational health has been in and out over many years and has had many different incarnations. There was a time when it was addressed as human system health, and later, performance and effectiveness were at the forefront (Jamieson, 2014).

Singh and Jha (2017) developed a theoretical model to study organisational health in one research and development firm by using seven latent variables and their impact on the dependent variable (organisational health). Nair (2014) developed constructs and factors impacting organisational health within the context of system theory. However, this study was limited to companies in Malaysia. Singh (2015) derived three constructs attributed to anatomy, physiology and psychology to define the concept of organisational health. This study was limited to pharmaceutical companies in India.

Organisations contribute to the development of social and economic well-being. The pressure is not only to meet but to consistently deliver better performance on a long-term basis. The modern corporation is the backbone of a nation's economic development. Some corporations are even bigger than certain countries' GDP. There is no doubt that organisations around us shape our lives and have become a critical part of our life span. The limited liability corporation is the greatest single discovery of modern times (Elembilassery, 2016).

Scapaputra's (2015) description of a healthy organisation is meant as a metaphor and draws the link between people and performance. There are four building blocks to the healthy organisation: positive culture, inclusive leadership, vibrant workplace and inspired employees. Neilson et al. (2005) define a healthy organisation by its ability to turn important decisions into actions. Healthy organisations are good at execution – they get things done. By contrast, unhealthy organisations stumble and eventually stagnate – they cannot execute. Brian (2011) defines a healthy organisation as one that meets its mission and simultaneously enables individuals to learn, grow and develop.

The health of an organisation is based on the ability to align around a clear vision, strategy and culture, to execute with excellence, and to renew the organisation's focus over time by responding to market trends. Health is defined as the capacity to deliver over the long term with superior financial and operating performance. When an organisation manages with an equal eye on performance and health, it more than doubles its profitability by outperforming its competitors. This is based on the research of more than 800 companies around the world (De Smet et al., 2014).

Health is the ability of an organisation to align, execute and renew itself faster than the competition to sustain exceptional performance over time. It comprises of core skills and capabilities, such as leadership, coordination or external orientation, that traditional metrics do not capture (Minter, 2011). Very few researchers

have developed a model of organisational health.

## II. Research Objective & Questions

The objective is to identify and build a conceptual model of organisational health by studying the independent variables and their impact on organisational health.

1. What is the hypothetical model for organisational health?
2. What are the main factors contributing to organisational health?
3. How do these independent variables differ in their respective impacts on organisational health?

The scope of this research is confined to factors influencing organisational health in Indian companies only. The companies in question are the ones that are listed in the Bombay Stock Exchange (BSE) that have completed more than 25 years and have been showing CAGR (Compound annual growth rate) of double digits.

## III. Literature Review

There is relevant research material on organisational health. Various scholars have taken different independent variables over time for their organisational health constructs (Table 3.1). The independent variables for the construct in this research are external drivers, organisational competence, work culture, strategy, communication, systems and processes, leadership, structure and innovation and technology.

**Table 3.1:** Different independent variables used for organization health construct.

table 3.1		
Sr No	Reference	Independent variables
1	Miles, M. B. (1969). Planned change and organizational health: Figure and ground. In E. A. Carver & T. J. Sergiovanni (Eds.), <i>Organizations and human behaviour</i> (pp. 375–391). McGraw-Hill.	Resource utilisation, cohesiveness, morale, goal focus, communication adequacy, optimal power, autonomy, adaptation, innovation and problem solving adequacy.
2	Sayed, O. B. (1991). Internal assessment of organizational health and effectiveness: An empirical study. <i>Indian Journal of Industrial Relations</i> , 26 (3), 227–243.	Managerial efficiency, problem solving, organisational adequacy, amiable power relations, HRD orientation, team orientation and values.
3	Rudzki, R. (2007). Avoiding Illness. <i>Leadership Excellence</i> , 24 (9), 14–15. <a href="https://search-proquest-com.spjain.idm.oclc.org/docview/204514415?accountid=162730">https://search-proquest-com.spjain.idm.oclc.org/docview/204514415?accountid=162730</a>	True purpose, core values, future focus, strategies, business model, alignment, energy, focus, execution and self assessment.
4	Lyden, J. A., & Klingele, W. E. (2012). <i>Supervising organizational health. Supervision</i> , 73(8), 12–14. Retrieved from <a href="http://search.ebscohost.com.spjain.idm.oclc.org/login.aspx?direct=true&amp;db=bth&amp;AN=77882283&amp;site=ehost-live">http://search.ebscohost.com.spjain.idm.oclc.org/login.aspx?direct=true&amp;db=bth&amp;AN=77882283&amp;site=ehost-live</a>	Communication, participation, commitment, morale, institution reputation, ethics, performance recognition, goal alignment, leadership, development and resource utilisation.
5	Khan, M. M. S. (2015). The longevity of large enterprises: A study of factors that sustain enterprises over an extended period of time. <i>The Journal of Developing Areas</i> , 49 (5), 41–52. <a href="https://search-proquest-com.spjain.idm.oclc.org/docview/1707487550?accountid=162730">https://search-proquest-com.spjain.idm.oclc.org/docview/1707487550?accountid=162730</a>	Resources, innovation, strategy, culture and systems.
6	Galadanchi, A. (2018). The Longevity of Businesses Enterprises: A Study of The Factors That Support Longevity of Business Enterprises Over Long Period. <i>IOSR Journal of Business and Management</i> , 20 (1), pp. 53–59.	Strategy, culture, resources, organisational systems and innovative capability.
7	Singh, A. K., & Burhan, M. (2015). Factors influencing organizational change and health - Evidences from the Indian pharmaceutical sector. <i>Journal of Business Chemistry</i> , 12 (3), 69–84. <a href="http://search.ebscohost.com.spjain.idm.oclc.org/login.aspx?direct=true&amp;db=bth&amp;AN=110556202&amp;site=ehost-live">http://search.ebscohost.com.spjain.idm.oclc.org/login.aspx?direct=true&amp;db=bth&amp;AN=110556202&amp;site=ehost-live</a>	Managerial efficiency, problem solving, organisational adequacy, amiable power relations, team orientation, values, innovation and morale.
8	Gagnon, C., John, E., & Theunissen, R. (2017). Organizational health: A fast track to performance improvement. <i>McKinsey Quarterly</i> , 4, 76–87. <a href="http://search.ebscohost.com.spjain.idm.oclc.org/login.aspx?direct=true&amp;db=bth&amp;AN=126997803&amp;site=ehost-live">http://search.ebscohost.com.spjain.idm.oclc.org/login.aspx?direct=true&amp;db=bth&amp;AN=126997803&amp;site=ehost-live</a>	Leadership, coordination, direction, accountability, motivation, innovation & learning, capabilities, culture & climate and external orientation.

### 3.1 External Drivers (ED)

The external business environment has an important role in business operations. The external business environment is one factor that attempts to understand the outside forces of the organisational boundaries. The external environment can provide both facilitating and inhibiting influences on organisational performance (Ajayi et al., 2016). The totality of factors outside an organisation that are taken into consideration for organisational decision making is called the external business environment (Ajayi, 2016; Beard & Dess, 1984; Duncan, 1972). The external environment variables dynamism and munificence have been recognised in the literature as playing a profound role in influencing organisational performance. Dynamism can provide more

opportunities to pursue innovation, whereas hostile conditions can provide opportunities to pursue innovation to build competitive advantage. External environment munificence reflects the richness of opportunities for renewal in the industry (Kearney et al, 2013).

### **3.2 Leadership (LD)**

Leadership is present at all levels. High potential leaders are set free to deliver results and are held accountable. Developing and deploying strong leaders at all levels increases the likelihood of top-quartile health according to the survey by McKinsey (Gagnon, John, & Theunissen, 2017). Leaders can connect daily work to grander goals. Leaders set direction which gives a clear sense of where an organisation is heading. This is a critical element of organisational health. Leaders create a meaningful environment, which contributes to the health of the organisation (Palmer & Schaninger, 2018). Korkmaz (2007) has derived a co-relationship between leadership and organisational health. Transformational leadership affects health. Leadership is a process whereby an individual influences a group of individuals to achieve a common goal (Cohen, 2009).

Organisational leadership can be compared to the trunk of a tree. A healthy tree provides nutrients to the leaf and fruits bearing parts of the tree and can withhold the tree during winds. Successful organisations strive for the impact created by current and past leaders. Leaders exist at formal and informal levels in an organisational system. Successful organisational leaders have a high level of ability to monitor their own and the organisation's behaviour. They scan the environment regularly and make proactive changes that are aligned and consistent with the vision, mission and values (Brubaker & Zimmerman, 2019). In the survey by Korn Ferry, amongst 391 executives, 77% of them agreed to the full extent that purpose-driven leadership drives long-term financial results (2019)

### **3.3 Strategy (SR)**

Watkins (2007) describes strategy as a set of guiding principles that, when communicated and adopted in the organization, generates a desired pattern of decision making. A good strategy provides a clear road map in which people need to take actions and prioritise things to achieve a business goal.

Strategy is also defined as a set of offensive or defensive actions to create a defensible position in an industry, to cope successfully with competitive forces and thus get a high return of investment. The strategy is a set of plans from top management to achieve business results consistent with organization mission and objectives (Porter., 1983)

Mainardes et al. (2014) have compiled their definition after referring to around 50 articles as 'Strategy is set of decisions taken by senior company management that leads to the development of internal practice, action plans, policies and guidelines, which aim to improve an organisation's relationship with its external environment, geared to market'. This results in the acquisition and retention of the customer leading to organisational success. Mankins (2017) conducted a study in collaboration with the Economist Intelligence Unit of over 300 top-quartile companies globally and discovered that 50% less time is wasted by top-quartile companies in ineffective unnecessary collaboration than in the rest of the other companies. This has to do with the company's operating model that encompasses ways of working, accountabilities, governance and structure. There are several nodes to execute a critical decision. Where there are more nodes, there is a collaboration overload. It is important to align the business operating model to organisational strategy. A simplified and built-for-purpose operating model reduces complexity, accelerates decision making and reduces cost.

### **3.4 Organisational Competencies (OC)**

OCs enable the operationalisation of organisational capabilities. Competence is knowledge, skills, mindsets and thought patterns that, when used singularly or in various combinations, result in successful performance. In short, competence equals worthy performance that leads directly to the most efficient accomplishment of organisational goals. Organisational competence is what the organisation can demonstrate in its ability to successfully deliver quality outcomes (Dubious, 1998; Teodorescu, 2008). Competence is defined as 'the ability to apply knowledge, understanding, and practical and thinking skills to achieve effective performance to the standard required in employment. This includes solving the problem and being sufficiently flexible to meet challenging demands' (NCVQ, 1997, as cited in Riitta et al., 2017, p. 94). High employee competence covering cognitive, behavioural, functional and ethical competence delivers high performance (Riitta et al., 2017).

### **3.5 Work Culture (WC)**

WC refers to assumptions, values and expectations that describe an organisation (Aliyuhmza, 2018; Hogan & Coote, 2014). A leader can derail the organisational health agenda if they resist change or do not drive change and communicate intervention inadequately (Karanika- Murray & Biron, 2015).

Seventy per cent of agile companies are in the top quartile of organisational health as per a study conducted on 161 companies. A culture of operational discipline and internal competitiveness is key to healthy

companies (Bazigos et al., 2015). A positive culture is one of the building blocks to organisational health. Leaders should closely look at values and pull them to centre stage (Scappatura, 2011). Khan (2015) studied the importance of organisational culture on organisational longevity. There are two dimensions of organisational culture: 1) Democratic culture; 2) Employee values.

### **3.6 Organisation Structure (ST)**

ST can be a critical source of organisational conflict; leaders in the organisation should understand and have the ability to manage this critical organisational health variable. Apart from an organisation structure that encourages coordination and connection between the members, there is a need to establish a connection across departments where physical interactions do not generally occur. Unclear job descriptions and overlapping authorities can create conflicting priorities in an organisational system (Brubaker & Zimmerman, 2019). According to Marrasi (2019), 'organization structure is the distinctive traits an organization possesses through the division of elements and responsibilities and their association to each other'. Organisation structure consists of two sub-constructs: participation in decision making and the hierarchy of authority. Marrasi (2019) demonstrates that an organisation's structural components, such as centralisation and formalisation, can have a significant impact on organisational deviance. 'Organization structure is the sum of total ways in which [the organization] divides its labor into distinct tasks and then achieves coordination among them' (Mintzberg, 1979, as cited in Jaakkola & Hallin, 2018, p. 282).

### **3.7 Communication (CM)**

CM is a formal and informal information exchange process between individuals at the personal, group or organisational level. This process is effective when performed timely, accurately and properly. Effective communication helps in resolving disputes and confusion and creates healthy and constructive discussion. Some of the characteristics of effective communication are specified as bi-directional, formal or informal, meaningful and regular (Adiguzel, 2019). Leaders and followers create dynamic and continuous interaction amongst themselves and stakeholders at a personal and virtual level. The quality and effectiveness of communication results in the effective engagement of stakeholders in a fair process leadership. Effective communication requires deep and authentic engagement (Woodward, 2016). The flow of information in an organisation is crucial. This dimension of organisational health needs distortion-free communication horizontally and vertically (Miles, 1969).

### **3.8 Innovation & Technology (IT)**

Digital technology enables, and also potentially threatens, the viability of the business model. Digital technologies create significant avenues and opportunities for business model evolution (Sako, 2018). Innovation in a business model is core to sustainable business. With the disruptive technological advance of the internet, there was an evident change in business models to capture value from it. For a sustainable business, the firm must pair technological innovation to a business model that facilitates commercialisation, adoption and scaling of these technologies. 'A business model describes the rationale of how an organization creates, delivers, and captures value' (Kaplan, 2012, as cited in Girotra & Sarguie, 2018, p. 1). Top-down innovation and capturing external ideas are two critical factors for innovation in healthy companies (Bazigos et al., 2015). The firms that repeatedly introduce innovation will exhibit sustained profitability (Chun, 2017; Roberts, 1999).

A business model can be defined as the company's operating model of product or service delivery systems. Firms like Dell, Amazon and Zara innovated business models through the introduction of new technologies (Girotra & Sarguie, 2018).

If an organisation wants to survive in the knowledge economy, then continuous improvement and innovation of the organisation's products, services and processes are essential. Innovation helps find new solutions to current issues and helps to build a sustainable business (Doveleac, 2015). Companies need to manage their cost structures and keep them as low as possible, and then use the saved money for driving innovation. Funds need to go into innovation and disruptive business models. Firms should not use technology as one more IT project; they should ask how technology could disrupt their own, or a competitor's, business model. Disruptors that use technology to fuel innovation will drive others out of business (Forrest & Sprague, 2013).

According to the study conducted by Harjanti and Gustamo (2017), Organization Health Index and Agility Maturity Model have a strong correlation. However, the limitations of this study were that it was only conducted on one organisation.

#### IV. Research Methodology & Framework

There is a growing consensus that quantitative research performs a critical role when it comes to justification of research, while qualitative research is good for discovery (Park, 2019). The approach of this paper is mainly quantitative with few qualitative questions used in the validity and reliability study of the proposed model.

The tool partial least squares structural equation modelling (PLS-SEM) was used to check the validity and reliability of the structural model. PLS-SEM is used for a small sample size and limited available theories. In this model predictive accuracy is paramount and empirical research type with convenient sampling with sample size around 40 is best suited. PLS is best used for analysis of data due to resampling by bootstrapping. The respondents were senior leaders who have worked in organisations existing for more than 25 years, delivered double digit CAGR for the past 10 years and increased their market capitalisation 10-fold and more in the past 15 years. Data was collected through structured questionnaires.

Descriptive analysis: The brief demographic characteristics of respondents are male and female, experienced, consultants and working professionals. All respondents were working professionals with more than 10 years' experience and more than three years in selected organisations that were in the BSE 100 with more than 25 years of existence, CARG of double digits for the past 10 years and an increase in market capitalisation of more than 10-fold in the past 15 years.

The exogenous latent variables (independent variables) in this structural model are strategy (ST), leadership (LD), work culture (WC), organisational competence (OC), structure (ST), communication (CM) and systems and process (SP), and the endogenous latent variable (dependent variable) is organisational health (OH). It has constructs (variables) and works on the relationship between the independent and dependent variable. Each variable influences the dependent variable, organisational health, as represented in Table 4.1. All these influences are mapped in the conceptual model in Figure 4.1.

**Table 4.1: Conceptual model for Organization Health**

<i>Independent variable</i>	<i>Indicators</i>
Strategy (ST)	Long term (ST1), alignment (ST2), business operating model (ST3), strategic planning (ST4 – dropped)
Leadership (LD)	Sense of urgency (LD1), translate vision (LD2 – dropped), future ready (LD3), instil passion for purpose (LD4)
Work culture (WC)	Agility (WC1), ethics (WC2 – dropped), continuous improvement (WC3), performance differentiation (WC4)
Innovation & technology (IT)	Anticipate new technology (IT1), manage innovation cycles (IT2), idea generation (IT3), technology adaption (IT4)
Organisation competence (OC)	Competency renewal (OC1), Coordination (OC2), capabilities (OC3), motivation (OC4), Execution (OC5)
Structure (ST)	Accountability (SR1), role (SR2), restructure (SR3), collaboration (SR4 – dropped)
Communication (CM)	Top-down (CM1), bottom-up (CM2), vision (CM3), share open feedback (CM4)
External drivers (ED)	Community relations (ED1), customer needs (ED2), competition (ED3), business partner (ED4), external opportunities (ED5)
Systems & processes (SP)	Compliance (SP1), simplification (SP2), control systems (SP3)
ST4 was dropped because long-term strategy in today's world of uncertainties is not making clear sense. LD2 was dropped due to repetition with LD4. SR4 was dropped due to repetition with OC2. SR1, SR2 and SR3 were moved to work culture as we had better load factor.	

Each indicator was one question with response measured on a 5-point Likert scale. There was a total of 39 survey questions with 40 respondents.

#### V. Findings & Discussion

The aim of this research is to identify a model on which hypotheses are framed based on literature and a conceptual framework. Based on the highest loading, the indicators with loading below 0.5 were either reclassified to see if the loading improved, or they were removed if they remained below 0.5 (Table 5.1).

The coefficient of determination,  $R^2$ , is 0.832 for the organisational health endogenous latent variable. Examination of the constructs' predictive power demonstrates that the organisational health output, which is the primary outcome of the model, has a substantial  $R^2$  value of 0.823. This means that the eight latent variables substantially explain 83.2% variance of organisational health.

**Table 5.1**

Construct	Coefficient of determination ( $R^2$ )	Adjusted $R^2$
OH	0.8238	0.7784

The inner model suggests that Strategy (ST) has the strongest impact on organisational health, followed by organisational competence (OC) and external drivers (ED).

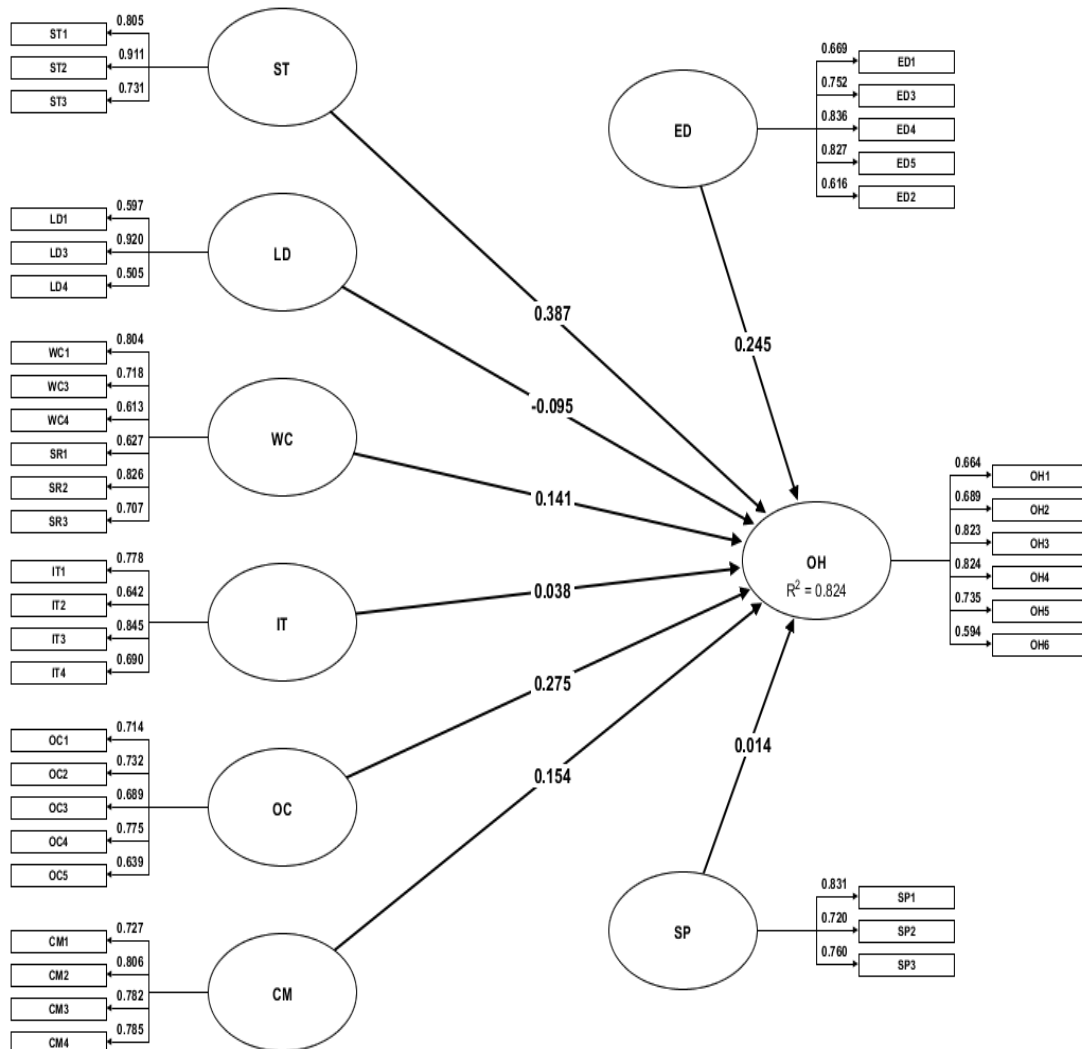
**Reliability & Validity**

Construct reliability and indicator reliability are well within the limits for exploratory research. Convergent validity values are all 0.5 and above (see Table 5.2).

**Table 5.2: Construct validity**

Construct	Dijkstra-Henseler's rho ( $\rho_A$ )	Jöreskog's rho ( $\rho_C$ )	Cronbach's alpha( $\alpha$ )
ST	0.7982	0.8585	0.7525
LD	0.7972	0.7264	0.5335
WC	0.8252	0.8646	0.8126
IT	0.7783	0.8298	0.7428
OC	0.7569	0.8359	0.7547
CM	0.7785	0.8578	0.7792
ED	0.8057	0.8603	0.7941
SP	0.6838	0.8149	0.6631
OH	0.8224	0.8684	0.8166

**Figure 5.1: Factor loading**



**Table 5.3:** Convergent validity

Construct	Average variance extracted (AVE)
ST	0.6709
LD	0.4863
WC	0.5186
IT	0.5522
OC	0.5057
CM	0.6015
ED	0.5552
SP	0.5955
OH	0.5271

**Table 5.4:** Significance

Effect	Beta	Indirect effects	Total effect	Cohen's $f^2$
ST → OH	0.3866		0.3866	0.5624
LD → OH	-0.0946		-0.0946	0.0284
WC → OH	0.1412		0.1412	0.0440
IT → OH	0.0384		0.0384	0.0032
OC → OH	0.2748		0.2748	0.1573
CM → OH	0.1540		0.1540	0.0758
ED → OH	0.2445		0.2445	0.1541
SP → OH	0.0144		0.0144	0.0008

## VI. Limitations & Scope Of Future Research

There are many studies in the literature which were executed to explore the factors that directly influence organisational health. However, limited literature is available in the context of India. This study contributes to the existing literature. The study has a limitation in terms of the number of pilot respondents although it was appropriate for running the SEM tool. The limitation was due to the limited pool of respondents who have the necessary experience and are in leadership roles.

For future research, scholars can use mediating variables to understand the relationship. Research can also be done with limiting the number of independent variables. The respondents of this survey are leaders and consultants who have work experience with the listed companies in the BSE, 50 of them having good records of growth and sustenance over last 25 years. Thus, the research is limited to healthy Indian companies. Future research can be done outside India, and more can be learnt from private limited companies that are not listed.

## VII. Conclusion

Leaders of organisations can understand the structural relationship between eight exogenous latent variables and the endogenous variable that is organisational health. Strategy (0.387), organisation competence (0.275) and external drivers (0.245) are found to be relatively critical variables in the current context. There exists scope for further investigation by adding some meaningful concepts or mediating variables and testing the viability of new models. This organisational health model will help the practicing leaders and board members as a reference point for constituting their plans on building a sustainable organisation with a focus on organisational health.

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