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The role of strategic leadership in occupational health and safety with total quality management as a mediator in higher education institutions for law

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ABSTRACT

Occupational Health and Safety is an important component of higher education governance, as workplace risks include physical, administrative, psychosocial, ergonomic, and environmental risks. This study aimed to examine the relationship between Strategic Leadership and OHS, directly and through TQM as a mediating variable at STIH Adhyaksa. A quantitative cross-sectional study was conducted among 79 lecturers, administrative staff, and institutional leaders using total sampling. Data were collected through a structured questionnaire and analyzed using PLS-SEM with SmartPLS 4. Path coefficients, p-values, R^2, and indirect effects were assessed. Strategic Leadership was positively and significantly associated with OHS ($\beta = 0.797$; $p < 0.001$) and TQM ($\beta = 0.933$; $p < 0.001$). TQM was positively but not significantly associated with OHS ($\beta = 0.072$; $p = 0.773$). The model explained 87.0% of TQM variance ($R^2 = 0.870$) and 74.8% of OHS variance ($R^2 = 0.748$). The indirect relationship between Strategic Leadership and OHS through TQM was not significant ($\beta = 0.067$; $p = 0.775$). Strategic Leadership was positively associated with OHS, while TQM was not significantly associated with OHS and did not mediate the relationship. Research findings indicate that strengthening OHS at STIH Adhyaksa requires prioritization through strategic leadership, specifically regarding policy formulation, resource allocation, oversight, and the reinforcement of a safety culture. TQM needs to be more specifically integrated with the OHS system through risk identification and control, training, incident reporting, and continuous safety evaluation and improvement. The study contributes empirical evidence on the integration of leadership, quality management, and OHS in a legal higher education institution.

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INTRODUCTION

Occupational health and safety (OHS) is an essential component of organizational governance because it involves the systematic prevention and control of risks that may affect workers' health, safety, and organizational continuity. In higher education, OHS risks extend beyond physical hazards to include psychosocial, ergonomic, administrative, and environmental risks arising from academic, administrative, and digital work activities. Therefore, OHS requires an integrated management approach involving organizational policies, planning, implementation, monitoring, and continuous improvement. The World Health Organization emphasizes that strengthening OHS systems is a critical priority for addressing changing work patterns, increasing workloads, and increasingly diverse psychosocial risks (Kresentia, 2025). This aligns with the view that effective occupational safety management requires a systematic approach to hazard identification, risk assessment, and control measures (Marhavilas et al., 2022).

The urgency of implementing Occupational Health and Safety (OHS) is increasingly evident, as workplace risks that go unrecognized and uncontrolled from the outset can escalate into health issues, reduced productivity, emotional exhaustion, role conflict, and disruptions to the continuity of organizational services (Alhmoud, 2025). OHS extends beyond mere accident prevention; it encompasses an organization's capacity to foster a work environment that supports the physical and mental health, safety, and performance of its members (Mixafenti et al., 2025). Noor et al. (2024) said that higher education institutions serve as a particularly relevant context for examining this urgency; as knowledge based organizations, they are characterized by complex work dynamics involving faculty, administrative staff, leadership, students, and various support units. The execution of the "Tridharma" (Three Pillars of Higher Education) activities, demands for academic performance, administrative workloads, the use of digital tools, and the intensity of interactions among organizational members all contribute to a diverse risk profile (Pichainarongk & Bidaisee, 2022).

Mtikitiki et al. (2025) argued that sensitivity to organizational structure is particularly relevant given that the challenges of implementing OHS tend to be greater for higher education institutions still in the stage of institutional development. Management attention is typically focused on strengthening curricula, meeting accreditation standards, developing organizational structures, and enhancing academic performance, often leaving OHS without a place as an integrated priority in strategic planning (Alanazi, 2020). Research by Fadhel & Alqurs (2025) demonstrates a positive relationship between strategic leadership and occupational health and safety (OHS). However, their study was limited to the higher education sector, specifically legal higher education institution which possess distinct organizational characteristics and multidimensional psychosocial, ergonomic, administrative, and environmental risks. Furthermore, it remains unclear whether Total Quality Management (TQM) consistently serves as a mechanism linking strategic leadership with OHS in this context. This trend is evident at STIH Adhyaksa, a relatively new legal higher education institution that is currently strengthening its management systems. Documented OHS policies, standardized occupational health and safety procedures, and mechanisms for risk identification and control are not yet explicitly or cohesively established within the institution.

Based on the preceding discussion, there is a gap between the normative requirement for higher education institutions to implement sustainable governance and quality assurance, and the empirical reality where Occupational Health and Safety (OHS) is not yet fully integrated into institutional management systems. This gap indicates that OHS issues at STIH Adhyaksa are not merely a matter of facility availability but also involve the quality of leadership, the consistency of quality processes, and the organization's capacity for continuous improvement. OHS is a relevant variable for study as it reflects both the quality of the work environment and the maturity of institutional governance. The novelty of this study lies in three aspects. First, from a contextual perspective, this study examines the Strategic Leadership to OHS relationship in a law higher

education institution, specifically STIH Adhyaksa, a relatively new institution that is still strengthening its organizational governance. Second, from a model perspective, this study simultaneously examines the direct effect of Strategic Leadership on OHS and the indirect effect through TQM as a mediating variable. This approach enables the study to assess whether quality management functions as an organizational mechanism through which strategic leadership is translated into OHS practices. Third, from an empirical perspective, the findings provide evidence that TQM does not significantly mediate the Strategic Leadership to OHS relationship in this context. This finding indicates that the presence of a quality management system alone is insufficient to strengthen OHS unless quality processes are explicitly integrated with hazard identification, risk control, safety training, incident reporting, and continuous safety improvement. Therefore, this study contributes contextual empirical evidence that the Strategic Leadership to OHS relationship may operate directly rather than through TQM in a developing legal higher education institution. Accordingly, this study aims to examine the relationship between strategic leadership and OHS, both directly and through TQM as a mediating variable, in a legal higher education institution, specifically STIH Adhyaksa. By testing these relationships within a legal higher education context, the study seeks to clarify whether TQM functions as the organizational mechanism through which strategic leadership is translated into OHS practices and to contribute contextual evidence to the literature on leadership, quality management, and occupational health and safety.

RESEARCH METHOD

This study employs a quantitative approach with an explanatory cross-sectional research design. The explanatory design was selected because the study aims not merely to identify patterns of relationships between variables but specifically to test relationships formulated based on a theoretical framework and research hypotheses (Casula et al., 2021). The analysis utilizes Partial Least Squares–Structural Equation Modeling (PLS-SEM) with SmartPLS 4 software (Hirose & Creswell, 2023). PLS-SEM was chosen because the research model involves latent constructs measured by multiple indicators and allows for the simultaneous testing of direct and indirect relationships within a single structural model. The selection of PLS-SEM is based on the characteristics of the research model and the need to evaluate both the measurement model and the structural model (Kupers et al., 2023).

The total of 79 respondents represents the entire accessible population, rather than a sample size determined solely by rules of thumb. The population comprises 20 lecturers, 54 educational support staff members, and 5 members of the leadership team, resulting in a total population of 79 individuals. Given the relatively small population size and the accessibility of all members, the study employs a total sampling technique. Consequently, the sample size of 79 was not established based on the "10-times rule" or merely to meet a minimum respondent threshold; rather, it reflects the use of a census covering the entire target population. The research model features one predictor for the mediator construct (strategic leadership → total quality management) and two predictors for the endogenous construct (strategic leadership and total quality management → occupational health and safety). The results indicate that the model can be estimated using 79 observations, yielding R^2 values of 0.870 for total quality management and 0.748 for occupational health and safety.

The study was conducted at the Adhyaksa College of Law (STIH Adhyaksa) in South Jakarta. STIH Adhyaksa was selected due to its suitability regarding the research focus on strategic leadership, total quality management, and occupational health and safety within a higher education institution specializing in law. The study was carried out from January to March 2026, encompassing the stages of instrument preparation, data collection, data processing, analysis, and report compilation. The study employs three primary variables: Strategic Leadership (X) as the exogenous variable, Total Quality Management (Z) as the mediating variable, and Occupational Health and Safety (Y) as the endogenous variable. These three constructs were measured using a

closed-ended questionnaire with a five-point Likert scale. The research instrument is based on the constructs and indicators proposed by Fadhel & Alqurs (2025), which were subsequently adapted to the context of Indonesian higher education institutions specializing in law. Secondary sources were used only to support the theoretical framework, hypothesis development, and interpretation of findings. These sources consisted of academic journal articles, books, previous research reports, and relevant scientific publications. No secondary organizational data were entered into the PLS-SEM model, the empirical analysis was based on primary questionnaire data.

Table 1. Operational Definition of Variables

Variable	Operational Definition	Dimensions	Indicators	Scale
Strategic Leadership (X)	Strategic leadership is leadership at the strategic level that focuses on determining the organization's direction and making long-term strategic decisions.	6 Dimensions : Strategic Direction Determining, Core Competencies Exploiting, Human Capital Development, Organizational Culture Enhancing, Ethical Practices, Organizational Control	12 Indicators	Ordinal
Total Quality Management (Z)	Total Quality Management is a comprehensive management approach oriented towards the integrated and continuous management of quality across the entire organizational system.	4 Dimensions : Top Management Commitment, Employee Involvement, Customer Focus, Continuous Improvement	8 Indicators	Ordinal
Occupational Health and Safety (Y)	Occupational Health and Safety refers to the protection of health and safety at work through a planned, integrated, and sustainable management system.	4 Dimensions : Organizational Context, Planning, Processes, Performance Assessment	8 Indicators	Ordinal

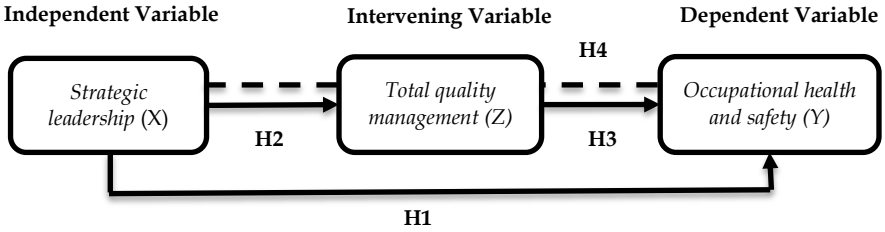


Figure 1. Conceptual Framework

RESULTS AND DISCUSSIONS

The characteristics of the participants in this study are presented to provide a general understanding of the individuals involved. A total of 79 participants were analyzed, comprising 20 lecturers (25.32%), 54 educational support staff (68.35%), and 5 members of the leadership (6.33%). Consequently, the educational support staff group constituted the largest proportion of the research sample. he diversity of respondent roles is an important factor to consider when interpreting the research findings. Lecturers, educational support staff, and leadership members have distinct functions and responsibilities, as well as potentially varying levels of understanding and awareness regarding Occupational Health and Safety (OHS).

Descriptive analysis was conducted to summarize respondents' responses to each indicator of Strategic Leadership, Total Quality Management, and Occupational Health and Safety (OHS). Table 2 reports the minimum, maximum, mean, and complete standard deviation values for all 28 indicators. Mean scores were generally high, ranging from 3.899 to 4.228 on the five-point Likert scale. However, these descriptive results represent respondents' perceptions of the current

organizational conditions and should not be interpreted as evidence that the institutional OHS system is fully established or free from deficiencies. The thesis background and pre-survey identified several gaps at STIH Adhyaksa, including the absence of an explicitly integrated OHS policy and standard procedures, incomplete risk-identification and control mechanisms, high workload, communication outside working hours, limited health facilities and safety training, inadequate lighting, and ergonomic concerns. Thus, the relatively high survey scores should be interpreted as favorable perceived conditions on the measured indicators, while the documented institutional gaps indicate that formalization, integration, and consistency of the OHS management system still require strengthening.

Table 2. Reports the Minimum, Maximum, Mean, and Complete Standard Deviation Values

Variable Strategic Leadership (X)												
Indicator	X1	X2	X3	X4	X5	X6	X7	X8	X9	X10	X11	X12
Min	1	1	1	1	1	1	1	1	1	1	1	1
Max	5	5	5	5	5	5	5	5	5	5	5	5
Mean	4.215	4.215	3.899	4.165	4.190	4.139	4.101	4.013	4.076	4.139	4.190	4.127
Std. Dev.	0.937	0.937	1.154	0.934	0.887	1.003	0.976	1.073	1.100	0.964	0.901	1.023
Variable Total Quality Management (Z)												
Indicator	Z1	Z2	Z3	Z4	Z5	Z6	Z7	Z8				
Min	1	1	1	1	1	1	1	1				
Max	5	5	5	5	5	5	5	5				
Mean	4.076	4.000	4.025	4.051	4.127	4.114	4.203	4.139				
Std. Dev.	0.978	1.102	0.968	1.005	1.011	1.067	0.973	1.028				
Variable Occupational Health and Safety (Y)												
Indicator	Y1	Y2	Y3	Y4	Y5	Y6	Y7	Y8				
Min	1	1	1	1	1	1	1	1				
Max	5	5	5	5	5	5	5	5				
Mean	4.228	4.152	4.139	4.215	4.165	4.114	3.987	4.101				
Std. Dev.	0.927	0.982	0.964	0.867	0.986	0.941	1.012	0.988				

The measurement model was then evaluated using outer loadings, Average Variance Extracted (AVE), internal consistency reliability, and discriminant validity. All indicator loadings were above 0.70, and AVE values were 0.727 for Strategic Leadership, 0.718 for Occupational Health and Safety, and 0.728 for Total Quality Management, supporting convergent validity. Internal consistency was also satisfactory: Cronbach's Alpha values were 0.966, 0.944, and 0.947, while Composite Reliability values were 0.970, 0.953, and 0.955 for Strategic Leadership, Occupational Health and Safety, and Total Quality Management, respectively (Table 3).

Table 3. Reports the Cronbach's Alpha, Composite Reliability, and AVE

Construct	Cronbach's Alpha	Composite Reliability	AVE	Interpretation
Strategic Leadership (X)	0.966	0.970	0.727	Reliable; convergent validity supported
Occupational Health and Safety (Y)	0.944	0.953	0.718	Reliable; convergent validity supported
Total Quality Management (Z)	0.947	0.955	0.728	Reliable; convergent validity supported

Discriminant validity was assessed using the cross-loading criterion. An indicator should load more strongly on its intended construct than on the other constructs. As shown in Table 4, most indicators had their highest loading on the construct they were designed to measure. One exception was X6: its loading on Strategic Leadership was 0.857, whereas its loading on Total Quality Management was 0.880. Therefore, X6 indicates potential empirical overlap between the Strategic Leadership and Total Quality Management constructs. The finding does not invalidate the entire measurement model, because the remaining indicators predominantly followed the

expected pattern, but it should be acknowledged as a measurement model limitation. A further discriminant-validity assessment such as HTMT should be included in a subsequent analysis if the corresponding SmartPLS output is available; no HTMT result is present in the thesis output used for this manuscript.

Table 4. Reports the Highest Loading

Indicator	X1	X2	X3	X4	X5	X6	X7	X8	X9	X10	X11	X12
Strategic Leadership (X)	0.859	0.825	0.896	0.923	0.856	0.857	0.897	0.847	0.880	0.827	0.801	0.748
Occupational Health and Safety (Y)	0.646	0.745	0.768	0.800	0.799	0.796	0.730	0.706	0.742	0.721	0.711	0.655
Total Quality Management (Z)	0.760	0.778	0.798	0.861	0.825	0.880	0.833	0.788	0.841	0.769	0.727	0.650
Highest Loading	X	X	X	X	X	Z (Potential Overlap)	X	X	X	X	X	X
Indicator	Z1	Z2	Z3	Z4	Z5	Z6	Z7	Z8				
Strategic Leadership (X)	0.774	0.798	0.679	0.779	0.746	0.859	0.839	0.875				
Occupational Health and Safety (Y)	0.659	0.596	0.651	0.715	0.672	0.772	0.695	0.789				
Total Quality Management (Z)	0.856	0.833	0.789	0.850	0.831	0.882	0.877	0.904				
Highest Loading	Z	Z	Z	Z	Z	Z	Z	Z				
Indicator	Y1	Y2	Y3	Y4	Y5	Y6	Y7	Y8				
Strategic Leadership (X)	0.578	0.642	0.797	0.755	0.710	0.683	0.798	0.842				
Occupational Health and Safety (Y)	0.794	0.789	0.906	0.868	0.827	0.828	0.898	0.863				
Total Quality Management (Z)	0.569	0.611	0.768	0.701	0.636	0.653	0.754	0.791				
Highest Loading	Y	Y	Y	Y	Y	Y	Y	Y				

The structural model was evaluated separately from the measurement model. The evaluation included the coefficient of determination (R^2), predictive relevance (Q^2), effect size (f^2), and bootstrapped hypothesis testing. R^2 values were 0.870 for Total Quality Management and 0.748 for Occupational Health and Safety, indicating that Strategic Leadership explained 87.0% of the variance in TQM, while Strategic Leadership and TQM together explained 74.8% of the variance in OHS. Q^2 values were 0.615 for TQM and 0.504 for OHS; both were above zero, indicating predictive relevance for the endogenous constructs. Effect-size results showed $f^2 = 6.700$ for Strategic Leadership → TQM, $f^2 = 0.327$ for Strategic Leadership → OHS, and $f^2 = 0.003$ for TQM → OHS. These structural-model results should not be described as measurement-model evaluation because R^2, Q^2, and f^2 concern the endogenous/structural relationships and predictive performance of the model.

Table 5. Reports the Endogenous Construct

Endogenous Construct/Relationship	Statistic	Value
Total Quality Management (Z)	R^2	0.870

Occupational Health and Safety (Y)	R^2	0.748
Total Quality Management (Z)	Q^2	0.615
Occupational Health and Safety (Y)	Q^2	0.504
Strategic Leadership → Total Quality Management	f^2	6.700
Strategic Leadership → Occupational Health and Safety	f^2	0.327
Total Quality Management → Occupational Health and Safety	f^2	0.003

Table 6. Hypothesis Testing Results for Direct Effects

Hypothesis	Relationships Between Variables	*Path Coefficient*	*T-Statistic*	*P-Value*	Decision
H1	*Strategic Leadership → Occupational Health and Safety*	0.797	3.512	0.000	Hypothesis Accepted
H2	*Strategic Leadership → Total Quality Management*	0.933	50.248	0.000	Hypothesis Accepted
H3	*Total Quality Management → Occupational Health and Safety*	0.072	0.288	0.773	Hypothesis Rejected

Table 7. Results of Indirect Effect Testing

Hypothesis	Relationships Between Variables	*Indirect Effect*	*T-Statistic*	*P-Value*	Decision
H4	*Strategic Leadership → Total Quality Management → Occupational Health and Safety*	0.067	0.286	0.775	Hypothesis Rejected

The Role of Strategic Leadership in Occupational Health and Safety at the STIH Adhyaksa Higher Education Institution for Law

Testing H1 yielded a path coefficient of 0.797, t-statistic of 3.512, and p-value < 0.001, indicating a positive and statistically significant association between Strategic Leadership and Occupational Health and Safety. The result indicates that stronger perceptions of strategic direction, organizational control, human-capital development, ethical practices, and organizational culture are associated with more favorable perceptions of OHS implementation at STIH Adhyaksa.

Policy direction, leadership commitment, resource management, and consistent supervision also play crucial roles. Koia (2024) asserts that through Strategic Leadership, leaders can position occupational health and safety within institutional priorities and ensure that these policies are implemented across all organizational activities. Within the study's theoretical framework, Strategic Leadership encompasses a leader's ability to formulate organizational direction, make strategic decisions, develop human resources, strengthen organizational culture, implement ethical practices, and exercise organizational control.

The finding is in line with Fadhel & Alqurs (2025), who reported a positive relationship between strategic leadership and OHS. In the present context, the result supports the interpretation that leadership can place OHS within institutional priorities through policy direction, resource allocation, supervision, and organizational culture. However, the high descriptive OHS means should be interpreted together with the documented institutional gaps: the questionnaire captures respondents' perceptions of the measured indicators, whereas the background assessment concerns the formalization and integration of the OHS management system. These are related but not identical aspects of institutional performance.

Based on statistical results, the theoretical framework, and prior research, Strategic Leadership can be understood as a primary foundation for strengthening Occupational Health and Safety in higher education institutions for law. These results also indicate that efforts to improve Occupational Health and Safety must begin with leadership commitment, targeted policies, consistent supervision, and the strengthening of a workplace safety culture. Furthermore, the findings reinforce the perspective that occupational health and safety is the outcome of a strategic managerial system, rather than merely the result of technical procedures.

The Role of Strategic Leadership in Total Quality Management at the STIH Adhyaksa Higher Education Institution for Law

Testing H2 yielded a path coefficient of 0.933, t-statistic of 50.248, and p-value < 0.001, indicating a positive and statistically significant association between Strategic Leadership and Total Quality Management. The magnitude of the coefficient shows a strong empirical relationship within this sample, although it should be interpreted as an association from a cross-sectional design rather than as proof of temporal causation.

The finding is theoretically consistent with the role of Strategic Leadership in setting organizational direction, strengthening control, developing people, and shaping organizational culture. These functions can support the TQM dimensions measured in this study, namely top management commitment, employee involvement, customer focus, and continuous improvement. The finding is also consistent with previous studies cited in the thesis, including Ahmed & Sajid (2023); Dwiputri et al. (2025); Hasim et al. (2022); Mohssen et al. (2021); and Singh et al. (2023), which reported relationships between leadership and quality-management practices in different organizational settings.

At STIH Adhyaksa, the result indicates that respondents' perceptions of TQM are closely associated with their perceptions of Strategic Leadership. The finding provides empirical support for maintaining leadership involvement in quality planning, employee participation, stakeholder orientation, and continuous improvement. It does not, by itself, demonstrate that the existing quality system is sufficiently integrated with OHS.

The Role of Total Quality Management in Occupational Health and Safety at the STIH Adhyaksa Higher Education Institution for Law

Testing H3 yielded a path coefficient of 0.072, t-statistic of 0.288, and p-value = 0.773. The association between TQM and OHS was therefore not statistically significant in this model. This result means that higher perceived TQM scores were not accompanied by a statistically detectable increase in perceived OHS after accounting for Strategic Leadership.

The descriptive findings help explain why the non-significant structural relationship should not be interpreted as a contradiction of the generally favorable TQM and OHS scores (Zafar et al., 2025). Mean scores describe respondents' perceptions, whereas the structural test evaluates the unique relationship between constructs. In addition, the thesis documents that the institution was still developing formal OHS policies, procedures, risk-identification and control mechanisms, safety training, reporting, and evaluation. General quality-management practices may therefore coexist with OHS gaps when safety-specific processes have not been explicitly incorporated into the quality system.

This interpretation is consistent with Akbar et al. (2023); and Mohammadi et al. (2025), which, in the contexts examined by those studies, indicate that quality-management approaches do not automatically produce stronger OHS performance unless they are connected with working-environment conditions, risk controls, and safety evaluation. Conversely, Aichouni et al. (2023); Al-Maaitah & Aljbour (2022); and Heronasia & Zuraida (2025) reported beneficial relationships when quality-management systems were integrated with safety procedures, training, audits, or risk controls. The differing findings support a context-sensitive interpretation: TQM may contribute to OHS when safety is an explicit component of the quality system, but its general presence is not sufficient on its own.

The results therefore indicate that TQM was not a statistically significant direct mechanism for OHS in this study. The practical implication is not to reduce the role of quality management, but to connect its existing continuous-improvement processes with hazard identification, risk assessment and control, safety training, incident reporting, and OHS performance evaluation.

The Role of Total Quality Management in Mediating the Influence of Strategic Leadership on Occupational Health and Safety at the STIH Adhyaksa Higher Education Institution for Law

The indirect effect of Strategic Leadership → TQM → OHS was 0.067, with a t-statistic of 0.286 and p-value = 0.775. Because the indirect effect was not statistically significant, the study did not establish a mediating role for TQM in the relationship between Strategic Leadership and OHS. The direct Strategic Leadership → OHS relationship remained statistically significant, while the TQM → OHS path was not significant.

These findings can be understood through a theoretical framework that positions Total Quality Management as a managerial system for translating the direction set by Strategic Leadership into quality policies, work standards, process controls, evaluations, and continuous improvement. In this context, Total Quality Management could function as a mediator if quality practices were tangibly linked to the Occupational Health and Safety system. Such integration would encompass hazard identification, risk assessment and control, safety training, incident reporting, and the evaluation of safety performance. However, the research results indicate that while Strategic Leadership exerts a significant direct influence on Occupational Health and Safety, Total Quality Management has not demonstrated a significant direct contribution to it. Consequently, a significant mediation path via Total Quality Management has not been established.

In the context of STIH Adhyaksa, these findings suggest that the implementation of Total Quality Management remains focused primarily on academic quality, services, and institutional administration, while occupational health and safety elements have not yet been fully incorporated into systematically managed quality indicators. This aligns with pre-survey results indicating that the implementation of the quality system lacks full structure, evaluations are inconsistent, and employee participation is suboptimal. Thus, although leadership has provided strategic direction, existing quality mechanisms lack the specificity required to translate that commitment into hazard identification, risk assessment, risk control, incident reporting, and safety performance evaluation (Ali & Anwar, 2021).

This aligns with the findings of Akbar et al. (2023), which showed that Total Quality Management does not exert a significant direct influence on the implementation of Occupational Health and Safety (OHS). In that study, the contribution of Total Quality Management to OHS became significant only when mediated by the quality of the work environment. This pattern suggests that the relationship between quality systems and occupational safety may involve other mechanisms more closely aligned with actual working conditions. These findings different from those of Fadhel & Alqurs (2025), who demonstrated that Total Quality Management mediates the impact of strategic leadership on occupational health and safety in Yemeni hospitals. Mohssen et al. (2021) also found that strategic leadership influences Total Quality Management, while Aichouni et al. (2023) showed that Total Quality Management contributes to occupational health and safety. Such discrepancies indicate that the success of mediation is determined not only by theoretical relationships between variables but also by the level of integration between quality systems and occupational safety, the maturity of management implementation, and the specific risk characteristics of each organization.

The lack of a significant mediating role for Total Quality Management also points to the possibility of other implementation mechanisms more directly linked to occupational health and safety practices, such as risk management or risk mitigation. In the practice of occupational health and safety, strategic policies must be translated into action through hazard identification, risk assessment, priority setting, and control or mitigation measures. Consequently, strategic leadership can influence occupational health and safety through leadership decisions regarding safety priorities, resource allocation, the assignment of responsibilities, and risk control, without necessarily relying on Total Quality Management as the mediating mechanism. This reinforces the

importance of risk management as an integral part of occupational health and safety implementation and offers a potential direction for model development in future research.

Based on statistical results, the theoretical framework, and prior research, Total Quality Management has not been proven to serve as an effective mediating mechanism between Strategic Leadership and Occupational Health and Safety at STIH Adhyaksa. These findings indicate that the mere existence of a quality system is insufficient if Total Quality Management principles are not explicitly integrated with hazard identification, risk control, incident reporting, safety evaluation, and continuous improvement within the realm of Occupational Health and Safety. Therefore, leadership needs to steer the implementation of Total Quality Management so that it is not solely oriented toward academic and administrative quality but is also linked to risk management and the continuous improvement of occupational health and safety.

CONCLUSION

The findings show that Strategic Leadership was positively and significantly associated with Occupational Health and Safety ($\beta = 0.797$; $p < 0.001$) and Total Quality Management ($\beta = 0.933$; $p < 0.001$). However, Total Quality Management was not significantly associated with Occupational Health and Safety ($\beta = 0.072$; $p = 0.773$) and did not significantly mediate the relationship between Strategic Leadership and Occupational Health and Safety ($\beta = 0.067$; $p = 0.775$).

Theoretically, these findings indicate that, in the context of a legal higher education institution, the relationship between Strategic Leadership and OHS is more evident through a direct pathway than through TQM as a mediator. This finding adds contextual empirical evidence to the integration of leadership, quality management, and occupational health and safety and suggests that the effectiveness of TQM for OHS may depend on its explicit integration with safety-related processes. Practically, strengthening OHS at STIH Adhyaksa should prioritize strategic leadership through clear OHS policies, adequate resource allocation, consistent supervision, and reinforcement of a safety culture. TQM should be explicitly linked to hazard identification and risk control, safety training, incident reporting, safety performance evaluation, and continuous improvement.

This study has several limitations. First, the cross-sectional design captures the variables at one point in time and therefore cannot establish temporal or causal relationships. Second, the study was conducted at a single institution, STIH Adhyaksa, which limits the transferability of the findings to other higher education institutions. Third, the study involved only 79 respondents, representing the accessible population at the institution, which may limit statistical generalizability despite the use of total sampling. Fourth, the use of a self-reported questionnaire may introduce response and social desirability bias. Finally, because the predictor, mediator, and outcome variables were collected using the same self-reported method, the findings may be subject to common method bias. Future studies should consider longitudinal or mixed-methods designs, multiple institutions and larger samples, and data from multiple sources or objective indicators to strengthen causal inference and reduce common method bias.

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