An Effect of Stress among Medical Representatives Working in Coimbatore City, Tamilnadu, India

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Abstract

The purpose of this study was to understand the impact of stress among medical representatives in Coimbatore. Pharmaceutical sales reps play a large role in helping an industry in a rapidly changing environment to achieve a new corporate vision and normally these medical representatives are in a highest stress position. Occupational stress index was given to assess the stress levels. The study found that organisation can reduce Role Conflict & Role Ambiguity by adopting a specific role strategy and the expectations of the MRs to be compared with their actual roles job profile and working hours need to be considered in the context of the well-being of the Medical representatives.

Keywords: Stress, Occupational Stress, Role Conflict, Role Ambiguity.

1. Introduction to the Study

Pharmaceutical Companies are a typical marketing industry dealing with mainly medical professionals, for marketing different pharmaceutical products companies require more and more skilled competent representatives to develop good rapport with their direct customer (doctor). Moreover representatives should have good product knowledge and Unique Selling Proposition (USP) of their products, to convince doctors and PULL the demand for their products. In this system doctors are the core customers and the major thrust is given to build and retain these customer because they are pulling the demand for products hence companies also give main emphasis in building and retaining these customers. The workplace for medical representatives has become a high stress environment in many organizations cutting across industries. Employees are experiencing high level of stress due to various factors such as high workload, tight deadlines, high targets, type of work, lack of job satisfaction, long working hours, pressure to perform, etc. Stress led to fatigue, irritability, poor communication, and quality problems/errors due to this they may feel frustrated or “burned out” when they are having problems with peers or customers. Members of the organization are showing to different kind of stressors like excessive work load, role conflicts, interpersonal conflicts with staff clients and the lack of progress or improvements exhibited by clients (Shinn et al, 1984). These kind of work related stressors results in bad performance. Hence it was felt pertinent to study the effect of stress among Medical Representatives in Coimbatore city.

1.1 Stress

Stress is defined by Bruno (1991)2 as the rate of wear and tear on an organism. Selye (1976)3 a Canadian physician, was an early explorer of the effects of stress on health. He defined stress as the...
sum of all nonspecific changes caused by function or damage. From his medical perspective, Selye suggested that the body responds to psychological changes related to “fight or flight” syndrome.

1.2 Occupational Stress

Occupational stress can be defined as the harmful physical and emotional responses that occur when the requirements of the job do not match the capabilities, resources, or needs of the worker. Job stress can lead to poor health and even injury. The concept of Occupational stress is often confused with challenge, but these concepts are not the same. Challenge energizes us psychologically and physically, and it motivates us to learn new skills and master our Occupations. When a challenge is met, we feel relaxed and satisfied (U.S NIOSH,1999).

1.3 Defining Occupational Stress

Okebukola and jedgede (1989), defined occupational stress as “a condition of mental and physical exertion brought about as a result of harassing events or dissatisfying elements or general features of the working environment.”

1.4 Causes of Occupational Stress

Nearly everyone agrees that Occupational stress results from the interaction of the worker and the conditions of work. Views differ, however, on the importance of worker characteristics versus working conditions as the primary cause of Occupational stress. These differing viewpoints are important because they suggest different ways to prevent stress at work.

1.5 Industry Profile

Over the past 40 years or so the Indian pharmaceutical sector witnessed rapid growth and transformation. From a mere volume of just Rs. 10 core in 1947, the industry registered a sales turnover of about US $ 5.5 billion in 2004 with an annual growth rate of about 17%. According to Department of pharmaceuticals, Ministry of Chemicals and Fertilizers, the total turnover of India's pharmaceuticals industry between 2008 and September 2009 was US$21.04 billion. According to Brand India Equity Foundation, the Indian pharmaceutical market is likely to grow at a compound annual growth rate (CAGR) of 14-17 per cent in between 2012-16. In 2013, there were 4,655 pharmaceutical manufacturing plants in all of India, employing over 345 thousand workers. The flexible provisions of the Patent Act of 1970 and other supportive policies of the Government of India played an instrumental role in the growth and development of this industry. India is now among the top five pharmaceutical emerging markets of the world.

1.5.1 The Evolution of the Indian Drug and Pharmaceutical Industry

The history of the evolution of the Indian pharmaceutical industry can be divided into four principal epochs. The first epoch is from 1850 to 1945. The second epoch spans from 1945 to the late 1970s. The third epoch for development is from the early 1980s to the early 1990s, and the fourth epoch spans from the early 1990s to the present time.

1.6 Objectives of the Study

1) To study the effect of stress on medical representatives
2) To analyse the stress in medical representatives and its impact on them.
3) To identify the level of occupational stress among the employees
4) To suggest suitable measures to overcome the drawbacks.
1.7 Limitations of the Study

1. The study is confined to the Medical Representatives working in and around Coimbatore City.
2. There may have been hesitancy by Participants to reveal personal information related to their Work Environment

2. Review of Literature

Laura C. Batista (2017) The purpose of this quantitative study was to explore the relationship between occupational stress and instigator workplace incivility, as moderated by personality, to select organizational outcomes (i.e., perceived physical health and intent to turnover). Data were collected from 206 fulltime working adults in the healthcare industry utilizing Amazon MTurk. The findings suggest that personality did play a role in the stress-incivility relationship. Conscientiousness and agreeableness dampened the relationship, while neuroticism and extraversion strengthened the relationship.

Anita Odigie (2016) The aim of this study is to explore issues on specific occupational stressors related to job performance, the role of healthcare in stress management and the effects of job resources on job demands, and also to create awareness for health care professional on how to manage stress. My result suggests that hospital managers should develop strategies to address and improve other quality of working conditions of healthcare professionals.

Muhamad Saiful Bahri Yusoff (2013) study evaluated the relationships of these variables with psychological health of first year medical students during stressful periods. The study was done with students accepted into the School of Medical Sciences, University Sains Malaysia. Stress, anxiety and depression were measured by the 21-item Depression Anxiety Stress Scale. At the less stressful period, stress level was associated with agreeableness and the final GPA. anxiety level was associated with emotional control and emotional conscientiousness and depression level was associated with the final GPA and extraversion. At the more stressful period, neuroticism associated with stress level.

Robert E. Pittman (2012) this study investigated the relationship of the EI of the principal to student performance. This quantitative correlation study examined if EI in principals of charter schools is a contributing factor to student performance in Texas open enrolment charter schools. Two chief conclusions from this study were reached: (a) Principals' EI was not related to student achievement and (b) Principals' gender and the number of students in the school did not predict principals' EI, but older principals had lower levels of EI on some of the EI components. Recommendations for future study include conducting similar research in more than one geographical location and comparing the relationship between principals' EI and student achievement in public schools versus charter schools.

Hassan Jorfi et al. (2011) significant contribution of this research is the discovery of stress management related to communication effectiveness. Results have shown there is a significant and positive relationship between independent variable stress management (i.e. stress tolerance and impulse control), and communication effectiveness with dependent variable (job satisfaction) in Agriculture Bank and Educational Administrations of Iran. From the results of the study, we can conclude that the Agriculture Bank and Educational Administrations of Iran should pay much attention to stress management, and communications effectiveness as they could lead to maintain job satisfaction.

Naoko Nishitani et al. (2010) present study examines the relation of insomnia with job stress factors, stress response, and social support. In the present study, insomnia was associated with psychological job stress factors of appropriateness of work and qualitative workload. Workers with poor sleep quality and insomnia reportedly have low interest or satisfaction in their work Another study indicated that poor sleepers had the feeling of higher job difficulty and lower achievement on the job. Thus, a close relation is shown between insomnia, job satisfaction and job difficulty, leading to impaired job performance.
3. Research Methodology

3.1 Area of Study

The researcher has chosen Coimbatore as an Area for Study. As Coimbatore is the Second biggest City of the Southern State of Tamil Nadu, The City is also called as the “Manchester of South India” with a salubrious climate. It is also well-known for the Health Care Sector with nearly 200 plus Hospitals.

3.2 Population

The Population comprised of Medical Representatives working in Coimbatore City.

3.3 Instrumentation

3.3.1 Occupation Stress Index

Occupational Stress Index developed by Srivastav and Singh (1981) was used to measure the Occupational Stress of the respondents. The scale consists of 12 factors having 46 items each rated on the five point scale.

3.4 Pilot study

Prior to conducting this proposed research study, a pilot study was undertaken for the assessment of the reliability of the instrument constructed and to find the time needed by the respondents to complete the questionnaire. The survey was conducted among 60 Medical Representatives representing the entire Population.

3.5 Content Validity and Reliability

In order to evaluate the reliability level of the data, Cronbach alpha test is conducted. Only elements with alpha value of 0.70 or above are considered (Nunnally, 1978). Stress alpha value is above 0.70 which shows the internal consistency of the scales (Cronbach, 1981).

<table>
<thead>
<tr>
<th>S.No</th>
<th>Variables</th>
<th>Alpha</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Occupation Stress Index</td>
<td>.844</td>
</tr>
</tbody>
</table>

3.7 Sampling Design

Similarly in case of Medical Representatives, Details and particulars regarding the number of Medical Representatives was obtained from the Area Managers. There were 1380 Medical Representatives at present. Researcher has adopted Systematic Simple Random Sampling Method for selecting the sample, the names of Medical Representatives were arranged in alphabetical order and from that list every 2\textsuperscript{nd} respondent of the population starting from random number two was chosen. At the end of the data collection there were 552 qualified filled in respondent.

3.8 Data Collection

The researcher personally administered the questionnaires for Managers and Medical Representatives. This helped to gain their confidence as some of them showed hesitation in assessing the competencies of their Medical Representatives.

The researcher relied on electronic data EBSCO, Doctoral Thesis, Academic Journals, Internet and Books. The gathered secondary data enabled the researcher to verify the findings based on the data. They would meet the need for additional empirical support.
4.0 Analysis and Interpretation

Table 4.1 showing the Demographic factors of the respondents

<table>
<thead>
<tr>
<th>S. No.</th>
<th>Factors</th>
<th>Particulars</th>
<th>No. of Respondents</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Gender</td>
<td>Male</td>
<td>520</td>
<td>94.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Female</td>
<td>32</td>
<td>6.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>552</td>
<td>100.0</td>
</tr>
<tr>
<td>2.</td>
<td>Age</td>
<td>21-30</td>
<td>339</td>
<td>61.4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>31-40</td>
<td>177</td>
<td>32.1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>41-50</td>
<td>19</td>
<td>3.4</td>
</tr>
<tr>
<td></td>
<td></td>
<td>51 &amp; above</td>
<td>17</td>
<td>3.1</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>552</td>
<td>100.0</td>
</tr>
<tr>
<td>3.</td>
<td>Marital Status</td>
<td>Married</td>
<td>313</td>
<td>57.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Un Married</td>
<td>233</td>
<td>43.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>552</td>
<td>100.0</td>
</tr>
<tr>
<td>4.</td>
<td>Educational Qualification</td>
<td>Graduates</td>
<td>426</td>
<td>77.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Post Graduates</td>
<td>126</td>
<td>23.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>552</td>
<td>100.0</td>
</tr>
<tr>
<td>5.</td>
<td>Years of Experience</td>
<td>1-5 yrs</td>
<td>165</td>
<td>30.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6-10 yrs</td>
<td>149</td>
<td>27.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>11-15 yrs</td>
<td>158</td>
<td>29.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>16-20 yrs</td>
<td>52</td>
<td>9.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>21 &amp; above</td>
<td>28</td>
<td>5.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>552</td>
<td>100.0</td>
</tr>
<tr>
<td>6.</td>
<td>Firm Type</td>
<td>Indian</td>
<td>304</td>
<td>55</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Multinational</td>
<td>248</td>
<td>45</td>
</tr>
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<td>Total</td>
<td>552</td>
<td>100.0</td>
</tr>
<tr>
<td>7.</td>
<td>Monthly Income</td>
<td>Below 10000</td>
<td>42</td>
<td>8.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10001-15000</td>
<td>120</td>
<td>22.0</td>
</tr>
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<td></td>
<td></td>
<td>15001-20000</td>
<td>130</td>
<td>24.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>20001-25000</td>
<td>168</td>
<td>30.0</td>
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<td></td>
<td></td>
<td>25001 &amp; above</td>
<td>92</td>
<td>16.0</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Total</td>
<td>552</td>
<td>100.0</td>
</tr>
</tbody>
</table>

Interpretation: The above table 4.2 indicates the demographic factors of the respondents.

**Gender**
Majority of the Medical Representatives were Male with (94%) and meagre (6 %) of the employees were Female.

**Age**
Most of the Medical Representatives were in the age group of (21-30) years with (61.4 %) and (32.1%) of the respondents were in the age group of (31-40) years (3.4 %) of the respondents were in the age group (41-50) and (3.1% ) of the respondents were in the age group of 51 & above.

**Marital Status**
Majority (57%) of the Medical Representatives are Married and (43%) of the representatives are Unmarried.

**Educational Qualification**
Majority (77%) of the Medical Representatives hold a Bachelor Degree and (23%) of them hold a Post Graduate Degree.

**Years of Experience**
Illustrates that (30%) of the representatives have a work experience of (1-5) years (27%) of them have a work experience (6-10 years), (29%) are in the age group of (11- 15 yrs.)

**Firm Type**
Illustrates that majority (55%) of the Medical Representatives are working in Indian Companies and( 45%) of them working in Multinational Companies.
Monthly Income
Explains that (30%) of the Representatives are drawing a salary in the range of Rs (20001 - 25000), (24%) of the Medical Representatives are drawing salary in the range of Rs(15,001-20,000).

4.2 Significant Difference in Years of Experience across Stress factors

An ANOVA model demonstrates a significant association between the Stress factors and Years of Experience of the respondents.

<table>
<thead>
<tr>
<th>Stress</th>
<th>Sources of Variations</th>
<th>Sum of Squares</th>
<th>Df</th>
<th>Mean Square</th>
<th>F</th>
<th>Sig.</th>
<th>Remark</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role Overload</td>
<td>Between Groups</td>
<td>5.201</td>
<td>4</td>
<td>1.300</td>
<td>10.760</td>
<td>.000</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>66.104</td>
<td>547</td>
<td>.121</td>
<td>24.214</td>
<td>.000</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>71.305</td>
<td>551</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Role Ambiguity</td>
<td>Between Groups</td>
<td>2.921</td>
<td>4</td>
<td>.730</td>
<td>1.481</td>
<td>.207</td>
<td>Not Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>269.694</td>
<td>547</td>
<td>.493</td>
<td></td>
<td></td>
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</tr>
<tr>
<td></td>
<td>Total</td>
<td>272.615</td>
<td>551</td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Role Conflict</td>
<td>Between Groups</td>
<td>12.635</td>
<td>4</td>
<td>3.159</td>
<td>5.715</td>
<td>.000</td>
<td>Significant</td>
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<tr>
<td></td>
<td>Within Groups</td>
<td>302.342</td>
<td>547</td>
<td>.553</td>
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<tr>
<td></td>
<td>Total</td>
<td>314.977</td>
<td>551</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Unreasonable group &amp; Political Pressure</td>
<td>Between Groups</td>
<td>1.826</td>
<td>4</td>
<td>.456</td>
<td>9.15</td>
<td>.455</td>
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<tr>
<td></td>
<td>Within Groups</td>
<td>272.798</td>
<td>547</td>
<td>.499</td>
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<tr>
<td></td>
<td>Total</td>
<td>274.624</td>
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<tr>
<td>Responsibility for Persons</td>
<td>Between Groups</td>
<td>3.667</td>
<td>4</td>
<td>.917</td>
<td>2.186</td>
<td>.069</td>
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<tr>
<td></td>
<td>Within Groups</td>
<td>229.386</td>
<td>547</td>
<td>.419</td>
<td></td>
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<tr>
<td></td>
<td>Total</td>
<td>233.052</td>
<td>551</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Under Participation</td>
<td>Between Groups</td>
<td>8.598</td>
<td>4</td>
<td>2.149</td>
<td>2.857</td>
<td>.023</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>411.507</td>
<td>547</td>
<td>.752</td>
<td></td>
<td></td>
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<tr>
<td></td>
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<td>420.105</td>
<td>551</td>
<td></td>
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<td></td>
<td></td>
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<tr>
<td>Powerlessness</td>
<td>Between Groups</td>
<td>3.859</td>
<td>4</td>
<td>.965</td>
<td>2.172</td>
<td>.071</td>
<td>Not Significant</td>
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<tr>
<td></td>
<td>Within Groups</td>
<td>242.982</td>
<td>547</td>
<td>.444</td>
<td></td>
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<tr>
<td></td>
<td>Total</td>
<td>246.841</td>
<td>551</td>
<td></td>
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<tr>
<td>Poor Peer Relations</td>
<td>Between Groups</td>
<td>8.103</td>
<td>4</td>
<td>2.026</td>
<td>3.099</td>
<td>.015</td>
<td>Significant</td>
</tr>
<tr>
<td></td>
<td>Within Groups</td>
<td>357.532</td>
<td>547</td>
<td>.654</td>
<td></td>
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<tr>
<td></td>
<td>Total</td>
<td>365.636</td>
<td>551</td>
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<tr>
<td>Intrinsic Impoverishment</td>
<td>Between Groups</td>
<td>5.461</td>
<td>4</td>
<td>1.365</td>
<td>3.062</td>
<td>.016</td>
<td>Significant</td>
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<tr>
<td></td>
<td>Within Groups</td>
<td>243.868</td>
<td>547</td>
<td>.446</td>
<td></td>
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<tr>
<td></td>
<td>Total</td>
<td>249.329</td>
<td>551</td>
<td></td>
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</tr>
<tr>
<td>Low Status</td>
<td>Between Groups</td>
<td>1.992</td>
<td>4</td>
<td>.498</td>
<td>1.198</td>
<td>.311</td>
<td>Not Significant</td>
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<tr>
<td></td>
<td>Within Groups</td>
<td>227.396</td>
<td>547</td>
<td>.416</td>
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<tr>
<td></td>
<td>Total</td>
<td>229.388</td>
<td>551</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Strenuous Working Condition</td>
<td>Between Groups</td>
<td>4.598</td>
<td>4</td>
<td>1.150</td>
<td>8.326</td>
<td>.000</td>
<td>Significant</td>
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<tr>
<td></td>
<td>Within Groups</td>
<td>75.523</td>
<td>547</td>
<td>.138</td>
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<td></td>
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<tr>
<td></td>
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<td>80.121</td>
<td>551</td>
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<td></td>
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<tr>
<td>Unprofitability</td>
<td>Between Groups</td>
<td>3.913</td>
<td>4</td>
<td>.978</td>
<td>7.021</td>
<td>.000</td>
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<tr>
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<td>Within Groups</td>
<td>76.221</td>
<td>547</td>
<td>.139</td>
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<tr>
<td></td>
<td>Total</td>
<td>80.135</td>
<td>551</td>
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</tr>
</tbody>
</table>

Interpretation: This study is to investigate the impact of Stress with Years of Experience. A significant difference was found among respondents namely Role Overload, Role Conflict, Under Participation, Poor Peer Relations, Intrinsic Impoverishment, Strenuous Working Condition, and Unprofitability. Post Hoc analysis was conducted to find out the difference.
### 4.3 Exploring Stress and Gender of the respondents

<table>
<thead>
<tr>
<th>Stress Factors</th>
<th>Gender</th>
<th>N</th>
<th>Mean</th>
<th>Std. Deviation</th>
<th>T value</th>
<th>DF</th>
<th>Sig</th>
<th>Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Role Overload</td>
<td>Male</td>
<td>520</td>
<td>1.9478</td>
<td>.34723</td>
<td>7.335</td>
<td>550</td>
<td>.000</td>
<td>Rejected</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>32</td>
<td>1.4888</td>
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**Interpretation:** The statistics for the test are in the following table. The t-Test score obtained is (1.760) and the significant values for the t test is .079 which is found to be greater than (0.05). Hence the null hypothesis is accepted for the constructs Low Status. Therefore it is inferred that there is no significant difference between Gender and Low Status. male representatives scored higher in all the factors compared to Female as they, are more often than females remain in majority when holding seniority positions in their respective organisations, so the Stress accountability is more. The Male respondents in the study demonstrate higher Stress than Females due to Intrinsic Impoverishment as they find their jobs unchallenging and monotonous.

### 4.4 Exploring the Stress and Marital Status of the respondents

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**Interpretation:** The statistics for the t-Test are in the following table. The t score obtained respectively for Role Overload (t=.798, p<.425) Role Ambiguity (t=.478, p<.633) Role Conflict (t=-1.315 p< .189) The significant value is greater than (0.05). Hence the null hypothesis is accepted for these Stress factors. Married respondents scored High on Poor Peer relations as they are more committed to their family and hence required to devote more time towards personal and family rather than social interactions with peers.

### 4.5 Exploring the impact of Type of the Firm of the respondents & Stress factors

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**Interpretation:** The statistics for the test are in the following table. The t-Test score obtained are Role Ambiguity (t=1.166, p< .244), Responsibility for Persons (t=1.511, p< .131) Under Participation (t=-.716, p<.474) Powerlessness (t=1.002, p<.317), Hence we can conclude that there is a significant difference between these Stress constructs and Type of Firm. MR of Indian companies has more Stress compared to Multinational Companies. It may be due to High sales targets or pressure...
from the managers to perform and many companies do not conduct any Stress related training program or counselling for Medical Representatives.

Table:4.6 Showing the Correlation between the Stress Factors

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** Correlation is significant at the 0.01 level (2-tailed). * Correlation is significant at the 0.05 level (2-tailed).

5.1 Suggestions

- An action-learning based program is another way of motivating employee competencies. Pharmaceutical companies can enhance this type of training programme.
- Policies regarding their travelling can be framed as they have to travel a lot which increase the accidental risk while travelling.
- Medical Representatives should concentrate on Personal development that will be of utmost use for him in his career. This can reduce potential threats to his future career prospects.
- As Medical Profession is highly competitive in the current marketing environment, Rewards are the best motivator for an employee in an organization.
- Development in the nature of job profile and working hours need to be considered in the context of the well-being of the Medical representatives.
- Medical Representatives are subject to continuous Stress on account of targets and planned deadlines. The management can explore the possibility of enhancing Emotional Intelligence level through specified planned intervention which can ensure robust and productive individuals within the organization.
- Organizations may need to redesign jobs and also do a proper job analysis to reduce Role Overload that is a potential Stressor.
- Meditation, Yoga, Therapy and counselling can be incorporated to reduce work related Stress.
- Management can reduce Role Conflict & Role Ambiguity by adopting a specific role strategy and the expectations of the MRs to be compared with their actual roles.
- Management need to provide requisite training to prevent ambiguity between Medical Representatives thereby making their jobs challenging and rewarding.
- To avoid under participation, to cope with group politics, an effective and open communication system to be incorporated.
- Development in the nature of job profile and working hours need to be considered in the context of the well-being of the Medical representatives who implement, and were affected by the changes.
- Organization can effectively incorporate Participative management to handle Stress Management.
- Stress audit to be undertaken to identify ‘stress areas’ in order to improve condition of job and alleviate job stress.
5.3 Conclusion

Today, Pharmaceutical companies are going global through exports, joint ventures, mergers and acquisitions, and out-licensing. Tasks cannot simply be accomplished individually or by working with others in fixed mundane or routine ways. Only those who can respond to the mounting challenges and be open to innovate can survive. The skills required to succeed at these jobs, not only require a high degree of intellectual ability but also an emotional frame of mind. Hence the organisations has to focus towards developing the behaviour of the employees, so that they can be competitive as it is very essential that Medical Representatives need diverse set of skills which can make business profitable. Which can make the Medical Representatives competent with the market and this in turn can help reduce stress. As Stress affects the employees’ performance that indirectly affects the organization survival. The organization should develop suitable strategies to reduce among Medical Representatives so that in the long run it will contribute towards organization’s success.

References