



## OCCUPATIONAL STRESS LEVEL AMONG DOCTORS IN PRIVATE AND GOVERNMENT HOSPITALS IN COIMBATORE CITY

S. Udhayakumar\*

Dr. V. Mohana Sundaram\*\*

\*Department of Management (Category B) Ph.D Scholar, Bharathiar University, Coimbatore.

\*\*Supervisor, Professor and Head, Department of Management Studies, Vivekanandha Institute of Engineering and Technology for Women, Tiruchengode.

### Abstract

Occupational stress is those overt and covert behavioral responses to external stimuli in the work environment which places excessive psychological and physical demand upon the person. **Occupational Stress** is stress related to one's job. Occupational stress often stems from unexpected responsibilities and pressures that do not align with a person's knowledge, skills, or expectations, inhibiting one's ability to cope. Occupational stress can increase when doctors do not feel supported by supervisors or colleagues, or feel as if they have little control over work processes. **Objective of the Study**, to analyse Occupational stress level among private and government hospital doctors in Coimbatore City. **Methodology of the study**, the researchers by making use of convenience sampling, respondents have been selected. The 200 respondents were selected for this study. The survey was carried out during the period from October 2016 to March 2017. The collected data were classified and assigned codes to transfer them into master sheets. **Findings of the study**, It has been divulged from 't' test that the p-value (.000) has been less than 0.01 and the result has significance at 1 per cent level. Hence, the null hypothesis ( $H_0$ ) has been rejected and the alternative hypothesis ( $H_1$ ) has been accepted. From the analysis it has been concluded **that there is a relationship between gender, marital status and family pattern, type of employee level of occupational stress among doctors in Coimbatore city**. **Suggestions of the study**, they are living different places, daily come by bus it is very difficult, one way is spent money for their travels and other way spent time. **Conclude this study**, the productivity of the work force is the most decisive factor as far as the success of an organization is concerned. The productivity is turn is dependent on the psychosocial well being of the doctors.

Occupational stress is those overt and covert behavioral responses to external stimuli in the work environment which places excessive psychological and physical demand upon the person. It is a subjective feeling or response as a result of the conflict between the demands of the job or characteristics of the workplace and the person's potentials and or capabilities. In that instance, the demands of the job tend to outweigh or under task the person's potentials and capabilities for meeting such demands. Stress agents that lead to manifestation of occupational stress are classified into the following categories: personal stress agents, cataclysmic events, and background agents. Personal stress agents or stimuli are those major events in one's life that can produce an immediate stress reaction when the individual cannot meet with the demands of the job.

Cataclysmic stress events are stress stimuli that occur suddenly and are usually devastating. This type of event affects many people simultaneously and can lead to Post-traumatic Stress Disorder (PTSD), a condition in which the victim re-experience in lucid flash back or dream the original event and the feelings associated with them. The September 11th 2001 terrorists attack on the world trade center in the USA is a typical example of a cataclysmic event. Background stress agents (Hassles and uplifts) are minor irritations that people experience daily in life. However, a single background stress agent is not enough to produce much stress except when it is cumulative. The manifestation of psychological symptoms such as depression and anxiety is highly correlated to the number of daily hassles that one experiences.

### Causes of Stress

The workplace is an important source of both demands and pressures causing stress, and structural and social resources to counteract stress.

The workplace factors that have been found to be associated with stress and health risks can be categorised as those to do with the content of work and those to do with the social and organisational context of work (fig 1). Those that are intrinsic to the job include long hours, work overload, time pressure, difficult or complex tasks, lack of breaks, lack of variety, and poor physical work conditions (for example, space, temperature, light).

Unclear work or conflicting roles and boundaries can cause stress, as can having responsibility for people. The possibilities for job development are important buffers against current stress, with under promotion, lack of training, and job insecurity being stressful. There are two other sources of stress, or buffers against stress: relationships at work, and the organisational culture. Managers who are critical, demanding, unsupportive or bullying create stress, whereas a positive social dimension of work and good team working reduces it.



An organisational culture of unpaid overtime or “presenteeism” causes stress. On the other hand, a culture of involving people in decisions, keeping them informed about what is happening in the organisation, and providing good amenities and recreation facilities reduce stress. Organisational change, especially when consultation has been inadequate, is a huge source of stress. Such changes include mergers, relocation, restructuring or “downsizing”, individual contracts, and redundancies within the organisation.

### Statement of the Problem

**Occupational stress** is stress related to one's job. Occupational stress often stems from unexpected responsibilities and pressures that do not align with a person's knowledge, skills, or expectations, inhibiting one's ability to cope. Occupational stress can increase when doctors do not feel supported by supervisors or colleagues, or feel as if they have little control over work processes. Job stress results from various interactions of the worker and the environment of the work they perform their duties. Location, gender, environment, and many other factors contribute to the buildup of stress. Job stress results from the interaction of the doctor and the conditions of work. Views differ on the importance of doctor characteristics versus working conditions as the primary cause of job stress. The differing viewpoints suggest different ways to prevent stress at work. Differences in individual characteristics such as personality and coping skills can be very important in predicting whether certain job conditions will result in stress. In other words, what is stressful for one person may not be a problem for someone else. This viewpoint underlies prevention strategies that focus on workers and ways to help them cope with demanding job conditions. In general, occupational stress is caused by a mismatch between perceived effort and perceived reward, and/or a sense of low control in a job with high demands. Low social support at work and job insecurity can also increase occupational stress. Psychosocial stressors are a major cause of occupational stress.

What is the Occupational stress level among doctors in Coimbatore City?

### Objectives of the Study

To analyse Occupational stress level among private and government hospital doctors in Coimbatore City.

### Methodology of the Study

It explains the basic elements of research methodology applied in this study. This includes research design, universe, sampling, methods of analysis and problem faced by the researcher. The present study is based on primary and secondary sources. Primary data were collected from the selected respondents of private and government hospital doctors at various level in Coimbatore in order to analyse technical efficiency of the doctors for this study, the researcher used self prepared questionnaire. Oral interaction was also conducted. The secondary data have been collected through the profile of the company, magazines, journals, periodicals, annual reports, website, etc. The researchers by making use of convenience sampling, respondents have been selected. The 200 respondents were selected for this study. The survey was carried out during the period from October 2016 to March 2017. The collected data were classified and assigned codes to transfer them into master sheets. After coding the data, it was tabulated, analysed and interpreted. The collected data have been analysed with the help of tools namely, ANOVA and “t” test.

### Analysis and Interpretation

#### Socio Demographic Variables – Percentage Analysis

S. No			Frequency	Percent
1	GENDER	MALE	120	60.
		FEMALE	80	40.
		Total	200	100
2	AGE	UP TO 30 YEARS	50	25
		31- 40 YEARS	60	30
		41- 50 YEARS	70	35
		ABOVE 50 YEARS	20	10
		Total	200	100
3	EDUCATIONAL QUALIFICATION	M.B.B.S	69	34.5
		M.S	45	22.5
		M.D	60	30.
		OTHERS	26	13
		Total	200	100



4	MONTHLY SALARY(IN Rs.)	BELOW RS.200,000	11	5.5
		Rs.2, 00,001 TO Rs.3,50,000	32	16
		Rs.3,00,001 to Rs.4,00,000	54	27.
		Above Rs.4,00,001	103	51.5
		Total	<b>200</b>	<b>100.</b>
5	TYPE OF EMPLOYEE	Government	55	27.5
		Private	82	41.
		BOTH	63	31.5
		Total	200	100.
6	MARITAL STATUS	Married	145	72.5
		Unmarried	55	27.5
		Total	<b>200</b>	<b>100.</b>
7	FAMILY PATTERN	Nuclear family	120	60
		Joint Family	80	40.
		Total	<b>200</b>	<b>100</b>
8	NUMBER OF DEPENDENTS	1-2	36	18
		3-4	73	36.5
		5-6	55	27.5
		7 and above	36	18.
		Total	<b>200</b>	<b>100</b>

Source: Primary data

From the above table It is clear that 60 percent of the respondents are male and 40 percent of the respondents are Female. The majority of the respondents are Male (60 percent). It is clear that the respondents belong to the age group of upto 30 years (25 percent), 31-years to 40 years (30 percent) 41 years to 50 years (35 percent) and above 50 years (10 percent). Maximum of the respondents belong to the age group of 41 to 50 years (30 percent). It is clear that 72.5 percent of the respondents are married and 27.5 percent of the respondents are unmarried. Majority of the respondents are married (72.5percent). It is clear that the educational level of the respondents is M.B.B.S (34.5 percent), M.S ( 22.5percent), M.D (30 percent), and others (26 percent). Majority of the respondents belong to the M.B.B.A (34.5 percent).It is clear that the respondent Occupational level of the respondents is government (27.5 percent), Private ( 41 percent), both(Government and Private) (31.5 percent). Maximum of the respondents belong to the occupational status of private (41.5percent). It is clear that the monthly income of the respondents is to less than Rs. 2, 00,000 (5.5 percent), Rs. 2, 00,001 to Rs. 3, 00,000 ( 16 per cent), Rs. 3,00,001 to Rs. 4, 00,000 (27 percent), and above Rs. 4, 00,001 (51.5 percent). Maximum of the respondent's monthly income is above 4,00,000 (51.5 percent).It is clear that 60 per cent of the respondents are nuclear family and 40 percent of the respondents are joint family. Majority of the respondents are nuclear family ( 60per cent).It is clear that 18 per cent of the respondents are one to two members, 36.5 per cent three to four members, 27.5 per cent of the respondents are five to six members and 18percent of the respondents are seven and above members in their family. Majority of the respondents are three to four number in their r family ( 36.5 per cent).

**Null Hypothesis: H<sub>0</sub>:** There is no significant relationship between Age and occupational stress level among doctors in Coimbatore city.

- There is no significant relationship between Educational qualification and occupational stress level among doctors in Coimbatore city.
- There is no significant relationship between Monthly salary and occupational stress level among doctors in Coimbatore city.
- There is no significant relationship between Type of employee and occupational stress level among doctors in Coimbatore city.
- There is no significant relationship between Number of dependents and occupational stress level among doctors in Coimbatore city



**ANOVA - test for comparing means of level of occupational stress with demographic variables**

		N	Mean	Std. Deviation	F Value	P Value	S/NS	Remarks
Age	1	97	2.4433	.98920	74.340	.000	S	Rejected
	2	103	2.1650	.90853				
	Total	200	2.3000	.95633				
Educational Qualification	1	97	2.2990	1.10080	13.434	.000	S	Rejected
	2	103	2.1359	1.01989				
	Total	200	2.2150	1.06038				
Monthly Salary (In Rs.)	1	97	3.2062	.92351	2.176	.142	NS	Accepted
	2	103	3.2816	.91198				
	Total	200	3.2450	.91606				
Type of Employee	1	97	2.1031	.75670	17.497	.000	S	Rejected
	2	103	1.9806	.77940				
	Total	200	2.0400	.76900				
Number of Dependents	1	97	2.5979	1.04742	75.617	.000	S	Rejected
	2	103	2.3204	.90979				
	Total	200	2.4550	.98633				

It has been divulged from the ANOVA test that the p-value (.000) has been less than 0.01 and the result has significance at 1 per cent level. Hence, the null hypothesis ( $H_0$ ) has been rejected and the alternative hypothesis ( $H_1$ ) has been accepted. From the analysis it has been concluded **that there is a relationship between age, educational qualification, type of employee and number of dependents and level of occupational stress among doctors in Coimbatore city.**

It has been divulged from the ANOVA test that the p-value (.000) has been more than 0.05 and the result has significance at 5 per cent level. Hence, the null hypothesis ( $H_0$ ) has been accepted and the alternative hypothesis ( $H_1$ ) has been rejected. From the analysis it has been concluded **that there is no relationship marital status and level of occupational stress among doctors in Coimbatore city.**

**Null Hypothesis**

- There is no significant relationship between gender and occupational stress level among doctors in Coimbatore city.
- There is no significant relationship between marital status and occupational stress level among doctors in Coimbatore city.
- There is no significant relationship between family pattern and occupational stress level among doctors in Coimbatore city.

**t- test for equality of means of occupational stress and demographic variable**

	Low High	N	Mean	Std. Deviation	T Value	P Value	S/NS	Remarks
Gender	1	97	1.3505	.47961	-6.149	0.000	S	Rejected
	2	103	1.4466	.49957				
Marital status	1	97	1.2577	.43966	-2.764	0.000	S	Rejected
	2	103	1.2913	.45657				
Family pattern	1	97	1.3918	.49068	-2.742	0.000	S	Rejected
	2	103	1.4078	.49382				

It has been divulged from 't' test that the p-value (.000) has been less than 0.01 and the result has significance at 1 per cent level. Hence, the null hypothesis ( $H_0$ ) has been rejected and the alternative hypothesis ( $H_1$ ) has been accepted. From the analysis it has been concluded **that there is a relationship between gender, marital status and family pattern, type of employee level of occupational stress among doctors in Coimbatore city.**



### **Suggestions of the Study**

The Management/government should provide opportunity in decision making process. Training programmes should be conducted such that the doctors may not depend much on their superiors.

To maintain the morale of the organizational culture both the management and doctors keep a trustful relationship. To communication between employers and doctors should be effective. Job related stresses should be reduced and should give importance to the work morale. . Effective and skill based training programmes should be conducted for the betterment of the doctors. The management should consider the feedback and suggestion of the doctors for the development of himself/herself (doctor) as well as the hospital/organisation.

Hospital Management/Government should take necessary steps create coordination among the doctors Coordination refers to organizing all the activities of their work and individuals doctors within the organization/hospitals in such a way that the reason for being there and an appropriate adaptation to the environment can be realized.

The need for coordination stems from the trend toward specialization, Which results in role differentiation. Such a trend is inherent in the development of organizations. Coordination is then about staying aware and taking care of the interconnectedness of all contributions, to optimally serve all stakeholders, especially customers. For the doctors good coordination means that they can work effectively and pleasantly, and changes be implemented smoothly.

Management/Government should take necessary steps to housing facilities to their doctors. They are living different places, daily come by bus it is very difficult, one way is spent money for their travels and other way spent time. It provide house facilities to their doctors they are enjoying and also save time and money. Every management/government should take necessary steps.

### **Conclusion**

Good organization culture lead to over all organization/hospital development through doctors commitment” it is wrong assumptions that once material well being is assured men would live happily even after. Since man is a psychological creature and a spiritual being his needs are unified to material well brings alone but include several other qualitative aspects which are discussed in the study. One of these functions is organization culture which as been used in this for analyzing various practices in the organization. From the study it could be found that the occupational stress prevailing this organization is good. It is very clear from the study that the management has taken more effective steps to improve the well being of the doctors by providing such type of improved culture. The productivity of the work force is the most decisive factor as fas as the success of an organization is concerned. The productivity is turn is dependent on the psychosocial well being of the doctors. In an age highly dynamic and competitive world, man is exposed to all kinds of employees/doctors that can affect him on all realms of life. The growing importance of interventional strategies is felt more at organizational level. This particular research was intended to study the occupational stress on work environmental on private and government hospitals doctors.

Although, certain limitations were met with the study, every effort has been made to make it much comprehensive. Employees/doctors attitude is a positive concept in good human resource management. It is based on the belief that an investment in human beings is necessary and will invariably bring in substantial benefits to the hospital in the long run. It aims at overall development of human resources in order to contribute to the well being of the doctors, organization/hospital and the society at large. The loss incurred to organizations will ultimately reflect in nation .The Investigator expects to draw attention from policy makers and men of eminence in the related fields to resume further research.

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