

## FACTORS DRIVING OCCUPATIONAL STRESS OF THE EMPLOYEES WORKING IN HOSPITALS IN DEHRADUN: AN EMPIRICAL STUDY

N.Muthukrishnan\*

Saji Mon M.R\*\*

Dr. D.S. Chaubey\*\*\*

---

### ABSTRACT

*Modern life is full of stress. It can be both pleasant and unpleasant. It could be deleterious for an individual or for other a mare hassles of life. Broadly speaking when the word modernization is been spoken, the word stress gives a 'Stress' in itself. Research has suggested that Physicians' jobs are more stressful than many other types of work, but sources of job stress for physicians have rarely been measured systematically. Interview data from 103 Hospital employees of different categories like doctors, nurses, technicians of both male and female were used to check the level of occupational stress and different factors promoting occupational stress. Study indicates lack of communication, Organisation ability to optimize human resources, Work overload, Leadership crisis, Lack of training, Enhancing of responsibility & Task diversity among the employees are some of the sources promoting occupational stress among the hospital employees of all cadre.*

**Keywords:** Occupational Stress, Job Stress Physician – gender

---

\*Research Scholar, Singhanian University, Pachari Bari, Jhunjhunu, Rajasthan

\*\*Research Scholar, Uttarakhand Technical University, Dehradun

\*\*\*Director, Uttaranchal institute of Business Studies, Dehradun, Uttarakhand

## INTRODUCTION

Modern life is full of stress. It can be both pleasant and unpleasant. It could be deleterious for an individual or for other a mere hassles of life. Broadly speaking when the word modernization is been spoken, the word stress gives a 'Stress' in itself. Today, in every face of life it has become an inevitable human progress. In general, every transactional activity gives some amount of stress in one's life in a small or a big form. From organizational point of view it is yet another difficult aspect to overcome stress in every area of functioning i.e. routine work, team work, project work, group etc. everywhere there is stress. Doctors especially house officers are under a great deal of stress related to a variety of occupational stressors. Occupational stressors contribute to organizational inefficiency, high staff turnover, absenteeism due to sickness, decreased quality, quantity of practice, increased costs of health care and decreased job satisfaction. One of the organizational outcomes that affected by occupational stress is job performance. The current turbulent environment in the health care field requires doctors and organizations to re-examine their practices. Medicine is an inherently stressful profession with long working hours, ethical dilemmas, difficult patients and conflicting demands. Professionally, in true sense the doctors are on 24 hour duty. Many physicians and surgeons work long, irregular hours. A recent survey showed that 70-90% of physicians and surgeons feel stressed at work and outside.

**Occupational Stress** is stress at work. Stress is defined in terms of its physical and physiological effects on a person (or thing). Stress is mental, physical or emotional strain or tension or it is a situation or factor that can cause this. Occupational stress occurs when there is a discrepancy between the demands of the environment/workplace and an individual's ability to carry out and complete these demands. Often a stressor can lead the body to have a physiological reaction which can strain a person physically as well as mentally. One of the main causes of occupational stress is work overload. Occupational stress is often caused by an increased workload without the addition of employees to take on that additional work. Instead the increased amount of work is given to the current employees to finish in the same time span that they would be asked to finish their regular or standard workload.

## REVIEW OF LITERATURE

Stress has been defined in different ways over the years. Originally, it was conceived as pressure from the environment, then as strain within the person. Generally accepted definition today is one of the interactions between the situation and the individual. It is the psychological and physical state that results when the resources of the individual are not sufficient to cope up with the demands and pressures of the situation. Thus, stress is more likely in some situations than others

and in some individuals than others. Stress is involved in an environmental situation that perceived as presenting demand which threatens to exceed the person's capabilities and resources for meeting it, under conditions where he or she expects a substantial differential in the rewards and costs from meeting the demand versus not meeting it (Mc Grath, 1976). From the documented evidence, it is clear that as far as work life is concerned extreme stress is so aversive to employees that they will try to avoid it by withdrawing either psychologically (through disinterest or lack of involvement in the job etc.) Physically (frequent late coming, absenteeism, lethargy etc.) or by leaving the job entirely (Beehr and Newman, 1978). It predisposes the individual to develop several psychosomatic illness, in contrast, the absence of extreme stress would result in more satisfied, happy, healthy and effective employees. However, the stress one experiences in the job vary from mild to severe depending one's physiological, psychological and social make up (French and Caplan, 1970, Margolis et al., 1974., Miller 1960 and Wardwell et al., 1964). The primary sources of stress cited by respondents included juggling multiple roles, having young children, time issues (too much work, too little time) changing practice patterns. Job performance is the result of three factors working together: skill, effort and the nature of work conditions. Skills include knowledge, abilities and competencies the employee brings to the job; effort is the degree of motivation of the employee puts forth toward getting the job done; and the nature of work conditions is the degree of accommodation of these conditions in facilitating the employee's productivity. The documented consequences of stress on medical trainees include: alcohol and drug abuse, interpersonal relationship difficulties, depression, anxiety and suicide. Other studies have also shown stress can be detrimental to the medical trainees' or professional's academic achievement, effectiveness in delivering health services by decreasing attention span, concentration, decision-making skills and ability to establish physician-patient relationships. In addition to affecting psychological and emotional well being, stress can also result in a decrease in physical health, such as the development of hypertension, heart disease, and immune deficiency disorders. Quality health care is an important goal of the health care system and practitioners performance has been shown to be closely related to the quality of health care patients receive.

Work stress is increasingly recognized as one of the most serious occupational health hazards reducing workers satisfaction productivity, increasing absenteeism and turnover (Gianakos, 2001). Hospital staff in particular is subject to work related stress simply because they are severely challenged by their rapidly changing environment. (Al-Aameri, 2005). Previous studies have revealed positive association between work stress and the number of errors. (Perry et al, 2000). In UK more GPs experienced poorer mental health, more dissatisfaction and higher stress level in 1993 than 1987 (Kirwan and Armstrong 1995; Rout and Rout, 1994). 25 % to 50 % of the

British National Health Service's staff reported distress suffering (Weinberg and Creek, 2000). Therefore, many reports suggested that stress among physicians, nurses and other health professionals is high (Caplan, 1994; Graham et al, 1996; Al-Aameri and Al-Fawzan, 1998). Some scholars note that an increase in workload, a hostile work environment, downsizing and shift work can result in occupational stress. (Brynien, Igoe 2006) Often workloads remain immense although and employee does his or her best to complete them. The management and reduction of occupational stress are recognized as key factors in promoting employee well-being. Nursing is one of the many disciplines contributing to a huge body of research into the causes and effect of the ill-defined phenomenon of occupational stress. J Nurse Manag in her study on occupational stress in nursing a review of the literature considers the ontological contribution of a number of disciplines to a growing body of knowledge on the subject of stress. Researcher examines the complex issue of stress management, highlighting the impact of organizational culture and transformational leadership style on staff satisfaction levels. If there is not an increase in the hiring of employees to help with increased workloads, stress may be felt.

Physical symptoms that may occur because of occupational stress include fatigue, headache, stomach problems, muscles aches, pains, chronic mild illness, sleep disturbances and eating disorders. Psychological and behavioural problems that may develop include anxiety, irritability, alcohol and drug use, feeling powerless and low morale (Brynien, Igoe 2006). If exposure to stressors in the workplace is prolonged then chronic health problems can occur including stroke. Studies among the Japanese population specifically showed a more than 2 fold increase in the risk of total stroke among men with job strain (combination of high job demand and low job control). Along with the risk of stroke comes high blood pressure and immune system dysfunction. Prolonged occupational stress can lead to occupational burnout. Stress is not always negative or harmful and indeed that the absence of stress is death. Stress is the non-specific response of the body to any demand, positive or negative made upon it. He indicated that health sector is one of the most stressful professions and pointed out the necessity of considering and investigating occupational stress, since performance declines under stressful situations. Nowadays, quality productivity is very essential for organizational survival. Therefore, stress at workplace becomes a concern to organization administrators. Several authors attributed the lack of progress in the area of stress research in organizations to the fact that stress seemed to be related to such a large number of conditions which prevented a systematic focus. Beehr used a very general definition in which 'anything about an organizational role that produces adverse consequences for the individual' was called role stress. They proceeded to the conclusion that a condition termed role overload was viable and this correlated positively with job stress. **Rubina kazmi, Shehla Amjad,**

**Dilawar khan** in their study on “**Occupational Stress and its Effect on Job Performance A Case Study of Medical House Officers of District**” investigated the effect of job stress on job performance. The analysis showed strong support for the hypothesis that there is an inverse relationship between job stress and job performance indicating that there is high job stress in the house officers, resulting in low job performance. On the basis of the review of literature we are of the opinion that stress always affects the efficiency and performance of the doctors working in hospitals. Academicians, researchers, administrators and consultants have identified a number of factors responsible for role stress among doctors. In addition, we believe that providing attractive working conditions may be used for minimizing the stress level among the doctors so that their efficiency may be increased.

This investigation aims to study the factors causing stress among doctors in and hospital employees in the various hospital located in Dehradun District of Utrakhand State.

### **OBJECTIVES OF THE STUDY**

1. To determine the factors causing occupational stress among doctors and support staff working in various hospitals of Dehradun District (Utrakhand).
2. To examine the stress levels among male and female doctors and support staff working in the hospitals of Dehradun district.
3. To assess the impact of stress on the doctors and measure they takes to reduce the occupation stress.

In the present study the population consisted of doctors and supporting staff working in all of the units/wards/departments at some Hospital. The respondents were scattered in all units/wards/departments already stated at various hospitals. Because the nature of work of the doctors it made difficult to conduct face interviews and a questionnaire was ideal as the respondents used their own time and pace to complete the questionnaire. Judgment sampling was used for the selection of the doctors and supporting staff which was found to be a convenient and economical method. One hundred and Fifty (150) questionnaires were distributed to the respondents and one hundred and three (103) questionnaires (duly completed) were received back from the respondents. This means that about 69% of the questionnaires (duly completed) were returned.

**Table 1: Demographic Profile of the Respondents**

Category	Characteristics	No of Respon-dents	%
<b>Total Number of Respondents</b>		<b>103</b>	<b>100</b>
Age	Upto 25 years	11	10.7
	25 – 35 Years	28	27.2
	Upto 35 to 50 Years	27	26.2
	More than 50 Years	37	35.9
Gender	Male	71	68.9
	Female	32	31.1
Marital Status	Married	87	84.5
	Unmarried	16	15.5
Profession	Dental Surgeon	5	4.9
	Nurses	29	28.2
	Neurologist	5	4.9
	Physicians	34	33.0
	Pharmacists	10	9.7
	Surgeon	5	4.9
	Technical	15	14.6
Annual Income	Upto Rs 10000	15	14.6
	Rs 10001 - 25000	36	35.0
	Rs 25001 - 40000	10	9.7
	Rs 40001 & Above	42	40.8
Specialisation	Medical	70	68.0
	Technical	19	18.4
	Others	14	13.6

This section analyses demographic profile of hospital employees. Demographic profile of the hospital employees has been studied based on their age, gender category, marital status, income, profession and specialisation. **Table I** shows that sample is dominated by those respondent (53.4%) who are in the age group of 25-50 years, showing that middle and younger age group people are more in the sample. Majority of the employees are belongs to male category and married. Almost half of the sample belongs to doctors including surgeon, physician, and dentist and Neurologist. Almost 15% are technical staff and remaining respondents belong to nurses and support staff. Sample is dominated by the income group ranging from Rs. 25000 - 40000 and above.

**Table 2 : Period of Association**

Ser No	Service in Years	No of Respondent	%
(a)	Upto 03 Years	9	8.7
(b)	04-05 Years	17	16.5
(c)	06-10 Years	16	15.5
(d)	More than 10 Years	61	59.2
<b>Total</b>		<b>103</b>	<b>100</b>

Data presented in the above table indicates that 8.7%, respondents belongs to those categories who are associated with their present organisation from 0 to 3 years only. 16.5% respondent are associated from 4 to 5 year. 15.5% are associated from 6 to 10 years and only 59.2% respondents are such who were associated more than 10 year from their present organisation. Thus sample indicates that most of the respondent are having long term association from their present organisation as it was indicated by almost 59.2% respondents in the sample.

**Table 3: Nature of Present Job**

Ser No	Classification of Job	No of Respondents	%
(a)	Challenging in nature	29	28.2
(b)	Routine in nature	34	33.0
(c)	Risky in nature	26	25.2
(d)	Normal and enjoyable	14	13.6
<b>Total</b>		103	100.0

Factors making hospital employees more vulnerable to stress can be analyzed from individual perception about his nature of job in the organization. Analysis of the data indicates that 28.2% respondents in the sample indicates that their job is challenging in nature. 33% indicated that their job is of routine in nature. 25.2 % feel that it is tedious and risky in nature and only 13.6% feels that their job is normal and enjoyable. Thus sample is dominated by those respondents who feels that their job is more challenging and risky in nature.

**Table No 4 : Duty Hours in the Present Organisation**

Ser No	Duty Hours in a Day	No of Respondents	%
(a)	06 – 08 hours	74	71.8
(b)	09 – 10 hours	8	7.8
(c)	11 – 12 hours	4	3.9
(d)	More than 12 hrs in a day	17	16.5
<b>Total</b>		103	100

Work stress is increasingly recognized as one of the most serious occupational health hazards reducing workers satisfaction, productivity and increasing absenteeism as well as turnover. Analysis projects that 71.8 % respondents in the sample are from those category who works 6-8 hours in a day. 7.8 % respondents works 8-10 hours in a day. 3.9 % respondents indicated that they work 10-12 hrs in a day and remaining 16.5% respondent indicated that they works more than 12 hours in a day. Thus sample is dominated by those respondents who work more than 6-8 hours in a day.

**Table No 5 : Extent to which Professional Problems could be discussed with Seniors?**

Ser No	Classification of Job	No of Respondents	%
(a)	To a great extent	35	34.0
(b)	To some extent	60	58.3
(c)	To a little extent	8	7.8
(d)	Not at all	00	00
<b>Total</b>		103	100

Empirical evidences and various research on the topics indicates that stress of the employees can be reduced to a great extent if they are free to discuss their personal as well as professional problem with their seniors and colleagues in the organisation. Keeping this into consideration an attempt was made to know that how for employees are free to discuss their problems with their seniors. In this respondents are asked as to what extent they are free to discuss their professional problems with their seniors. It was found that more than one third (34%) in the sample feels that they are free to a great extent to discuss their professional problems with their senior. 58.3% feels that they are free to some extent in discussing their problem with senior. 7.8% respondents indicated that they are free to a little extent in discussing their problem. Thus analysis indicates that there is mixed response in this case.

**Table No 6 : Employees Preference to discuss the Professional Problems in the Organisation?**

Ser No	Category	No of Respondents	%
(a)	With Seniors	45	43.7
(b)	With Juniors	13	12.6
(c)	With Colleagues	23	22.3
(d)	All of Above	22	21.4
<b>Total</b>		103	100

The analysis indicates that most of the employees prefers to discuss their professional problems with their colleagues as it was indicated by 22.3% respondent in the sample. 43.7% indicated that they discuss with their seniors and 12.6% employees in the sample indicated that they use to discuss their professional problems with their juniors. Only 21.4 % respondent indicated that they use to discuss with all the employees irrespective of their rank in the organisation.

**Table No 7 : Feeling of Stress while performing Job**

Ser No	Feeling of Stress at Job	No of Respondents	%
(a)	Yes	23	22.3
(b)	No	22	21.4
(c)	Some times	58	56.3
<b>Total</b>		103	100

Occupational stress is caused by workplace, individual and social factors, and it is recognised as one of the most pervasive and potent health hazards in the work environment. This is true in many workplaces, particularly the health care industry. Analysis indicates that 22.3 % respondent in the sample indicated that they feel stress while at job. 21.4% indicated that they do not feel stress at work where as 56.3% employees reveals that sometimes they feel occupational stress at work.

**Table No 8 : Reason of Professional Stress**

Ser No	Reasons	No of Respondents	%
(a)	Professional Incompetence	2	1.9
(b)	Lack of Training	30	29.1
(c)	Lack of Proper support of Seniors	15	14.6
(d)	Lack of Proper support of Juniors	2	1.9
(e)	Work over Load	51	49.5
(f)	Professional Problems	3	2.9
<b>Total</b>		103	100.0

Healthcare workers suffer from work-related or occupational stress often resulting from high expectations coupled with insufficient time, skills and/or social support at work. This can be lead to severe distress, burnout or physical illness, and finally decrease in quality of life and service provision. The cost of stress and burnout are high due to increased absenteeism and turnover. Analysis indicates that 1.9 % respondent feels stress because of their professional incompetence. 29.1% respondents feels that they feels stress due to lack of training. 14.6 % respondents indicated that they feels stress because of lack of support of their seniors. 1.9% respondents indicated that they feels stress due to non cooperation of their juniors. 2.9% respondent indicated professional problem as one of the important reason of their stress.

**Table No 9 : Impact of Stress**

Ser No	Outcome	No of Respondents	%
(a)	Low Job Performance	25	24.3
(b)	Frustration	71	68.9
(c)	High Turnover of Job	4	3.9
(d)	Others	3	2.9
<b>Total</b>		103	100

Stress produces a range of undesirable, expensive and debilitating consequences. The productivity of the doctors is the most decisive factor as far as the success of the organization is concerned. The employees stress affect his productivity in many ways. Analysis indicates that almost one fourth (23.87%) respondents in the sample feels physical disorder in case they feel stress. 31.61 % feels psychological disorder in case they feels stress. 29.68 % feels behavioural disorder when they feels stress. 14 .84 % respondents indicated other unspecified symptoms of feeling when they feel stress while at job.

**Table No 10 : Symptoms of feeling while at Stress**

Ser No	Outcome	No of Respondents	%
(a)	Physical disorder	31	30.1
(b)	Psychological Disorder	15	14.6
(c)	Behavioural Disorder	57	55.3
<b>Total</b>		103	100

Stress, in general, and occupational stress, in particular, is a fact of modern day life that seems to have been on an increase. It is a mental and physical condition which affects an individual's productivity, effectiveness, personal health and quality of work. The analysis indicates that almost one third 30.1% employees indicates physical disorder due to increase in occupational stress. 55.3% feels behavioural disorder due to stress and remaining 14.6% says that they feel psychological disturbances due to increase in occupational stress.

**Table No 11 : Measure taken to Reduce Stress**

Ser No	Description	No of Respondents	%
(a)	Passing time with Friends	39	37.9
(b)	Passing time with Children	59	57.3
(c)	Others Measures	5	4.9
<b>Total</b>		103	100

The harmful and costly consequences of stress demonstrate the need for strategies to limit stressors within the organization. keeping this into consideration an attempt was made to know the measure taken by the employees to reduce the stress. Analysis presented in the table indicates that 37.9 % respondent pass their time with their friends in case they feel stress. 57.2 % indicated that they pass their time with their children in case they are in stress. 4.9 % respondents has given other means of passing their time in case they feels stress.

## FACTOR ANALYSIS

Factor analysis is a method of data reduction. It does this by seeking underlying unobservable (latent) variables that are reflected in the observed variables. The purpose of factor analysis is to discover simple pattern of relationships among the variables. In particular, it seeks to discover if the observed variables can be explained largely or entirely in terms of a much smaller number of variables called factors. We could usefully ask about the number of dimensions on which the ratings differ

**Table No 11 : Reliability Statistics**

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items	In order to accurately capture the respondent's perception reliability analysis is carried out. So first reliability analysis was carried out with the help of Reliability Test Here, the reliability is shown to be good using all 19 items because alpha is .674 (Note that a reliability coefficient of .60 or higher is considered "acceptable" in most social science research situations.
.670	.674	19	

**Table No 12 : Descriptive Statistics**

Factors	Mean	Standard Deviation
At work I am expected to do too many different tasks in too little time.	2.4757	.96857
I feel that my job responsibilities are increasing.	2.0291	.93364
I am expected to perform tasks for which I have never been trained.	2.7670	.79464
I have to take work home with me.	2.8932	.79104
I have the resources I need to get my job done.	1.8835	1.11409
I work under tight deadlines.	2.3398	.98572
My job requires me to work in several equally important areas at once.	2.1262	1.02593
I am expected to do more work than is reasonable.	2.2427	1.07981
My job fits my skills and interest.	1.5922	1.07043
High level of supervision is increase my occupational stress.	2.7087	1.30332
Leadership crisis of the organization enhance my occupational stress.	2.6990	1.17018
I always do a routine job.	1.7670	1.04978
I feel I have enough responsibility on my job.	1.5437	.72459
My talents are being used on my job.	1.8350	1.04878
I am able to satisfy my needs for success and recognition in my job.	2.0680	1.20670
I worry about whether the people who work for/with me will get things done properly.	2.0485	1.02305
My job requires me to make important decisions.	2.0194	1.09348
I always fear about future uncertainty of my job.	2.9223	.65214
I feel anxious and my heart beat speed up whenever I am overloaded	2.0194	1.12877

The mean and standard deviation of different variable promoting occupational stress among the hospital employees as presented in the above table indicates that future uncertainty lack of training of employees has scored highest mean. Whereas employees view on the factor close supervision, recognition of job and work overload is diverse as it scored highest standard deviation.

Understanding the factors promoting occupational stress has been of a major interest for academia, researchers and many more. The empirical study indicates that there are many sources of occupation stress like poor physical working conditions, Work overload, Time pressures, Physical danger etc. Employees role in organization, opportunity for career development, peer relationship at work, organization structure and climate.

For this respondent were asked to rate their views on the following statement such as My talents are being used on my job., My job requires me to make important decisions., My job fits my skills and interest., I feel I have enough responsibility on my job., I am able to satisfy my needs for success and recognition in my job., I always fear about future uncertainty of my job., High level of supervision increase my occupational stress., I feel anxious and my heart beat speed up whenever I am overloaded with work., I have the resources I need to get my job done., I always do a routine job., Leadership crisis of the organization enhance my occupational stress. I am expected to perform tasks for which I have never been trained., I work under tight deadlines., I have to take work home with me., I am expected to do more work than is reasonable. My job requires me to work in several equally important areas at once., I feel that my job responsibilities are increasing., At work I am expected to do too many different tasks in too little time., I worry about whether the people who work for/with me will get things done properly. For this purpose, respondents were asked to rate the various statement on a scale of 1 to 5 in order of their preference. The exploratory factor analysis was used in order to identify the various factors promoting stress. Principal Component analysis was employed for extracting factors and orthogonal rotation with Varimax was applied. As latent root criterion was used for extraction of factors, only the factors having latent roots or Eigen values greater than one were considered significant; all other factors with latent roots less than one were considered insignificant and disregarded. The extracted factors along with their Eigen values are shown in table 6. The factors have been given appropriate names on the basis of variables represented in each case. The names of the factors, the statements, the labels and factor loading have been summarized in Tables 13. There are seven factors each having Eigen value exceeding one for occupational stress factors. Eigen values for seven factors are 4.686, 3.247, 2.195, 1.992, 1.657, 1.539, and 1.009 respectively. The index for the present solution accounts for 85.91% of the total variations for the

factor promoting stress. It is a pretty good extraction because we are able to economise on the number of choice factors (from 19 to 7 underlying factors), we lost 14.09 % of information content for choice of variables. The percentages of variance explained by factors one to seven are 24.665, 17.090, 11.550, 10.482, 8.721, 8.099, and 5.312 , respectively. Large communalities indicate that a large number of variance has been accounted for by the factor solutions. Varimax rotated factor analysis results for motivational factors are shown in table 13 which indicates that after 7 factors are extracted and retained the communality is .795 for variable1, .948 for variable 2, 0.929 for variable 3 and so on. It means that approximately 85.91 % of the variance of variable1 is being captured by extracted factors together. The proportion of the variance in any one of the original variable which is being captured by the extracted factors is known as communality (Nargundkar, 2002).

**Table 13 : Principal Component analysis with Rotated Component**

Factors	Component							Communalities
	1	2	3	4	5	6	7	
My talents are being used on my job.	.864							.795
My job requires me to make important decisions.	.805							.948
My job fits my skills and interest.	.803							.929
I feel I have enough responsibility on my job.	.774							.885
I am able to satisfy my needs for success and recognition in my job.	.716							.649
I always fear about future uncertainty of my job.	-.685							.808
High level of supervision increase my occupational stress.	.606							.735
I feel anxious and my heart beat speed up whenever I am overloaded with work.		.898						.920
I have the resources I need to get my job done.		.847						.880
I always do a routine job.			.844					.847
Leadership crisis of the organization enhance my occupational stress			-.769					.823
I am expected to perform tasks for which I have never been trained.				.870				.979
I work under tight deadlines.				-.750				.868
I have to take work home with me.					.890			.924
I am expected to do more work than is reasonable.					.863			.851
My job requires me to work in several equally important areas at once.						.858		.842
I feel that my job responsibilities are increasing.						.701		.949
At work I am expected to do too many different tasks in too little time.							.824	.792

I worry about whether the people who work for/with me will get things done properly.							.762	.902
Initial Eigen values	4.686	3.247	2.195	1.992	1.657	1.539	1.009	
% of Variance	24.665	17.090	11.550	10.482	8.721	8.099	5.312	
Cumulative %	24.665	41.755	53.305	63.787	72.508	80.608	85.919	

Extraction Method : Principal Component Analysis.

Rotation Method : Varimax with Kaiser Normalization.

A Rotation converged in 11 iterations.

**Table 14: Principle components and associate variable**

Factor	Name of Dimension	Statement	Factor Loading
F1	Organisational ability to optimise Human Resources	My talents are being used on my job.	.795
		My job requires me to make important decisions.	.948
		My job fits my skills and interest.	.929
		I feel I have enough responsibility on my job.	.885
		I am able to satisfy my needs for success and recognition in my job.	.649
		I always fear about future uncertainty of my job.	.808
		High level of supervision increase my occupational stress.	.735
F2	Work anxiety and Lack of Resources	I feel anxious and my heart beat sanity to peep up whenever I am overloaded with work.	.920
		I have the resources I need to get my job done.	.880
F3	Leadership Crisis and Job Monotony	I always do a routine job.	.847
		Leadership crisis of the organization enhance my occupational stress	.823
F4	Lack of Training and Time Deadlines	I am expected to perform tasks for which I have never been trained.	.979
		I work under tight deadlines.	.868
F5	Work Overload	I have to take work home with me.	.924
		I am expected to do more work than is reasonable.	.851
F6	Enhance Job Responsibility	My job requires me to work in several equally important areas at once.	.842
		I feel that my job responsibilities are increasing.	.949
F7	Task diversity and fear of completing colleagues	At work I am expected to do too many different tasks in too little time.	.792
		I worry about whether the people who work for/with me will get things done properly.	.902

Principal components & associated Variables indicates that first factor (Organisation ability to optimise human resources factor) indicating the organisations ability to use its talent, skill and this is the combination of variable like my talents are being used on my job. My job requires me to make important decisions. My job fits my skills and interest. I feel I have enough responsibility on my job. I am able to satisfy my needs for success and recognition in my job. I always fear about future uncertainty of my job. High level of supervision increase my occupational stress and accounting 24.665% variance of the total variances. The second factor is the work overload and

lack of resources factor which is the combination of the variable like I feel anxious and my heart beat sanity to peep up whenever I am overloaded with work. I have the resources I need to get my job done and accounts 17.090% variance of total variance. Third factor is the leadership crisis and job monotony which is the combination I always do a routine job and leadership crisis of the organization enhance my occupational stress and it account 11.550% variance of the total variances. Fourth factor is the riding comfort and service delivery factor which include the variable like enhance riding comforts leads my satisfaction level to the minimum waiting time and optimum time in delivering the services to enhance my satisfaction the cost of spare part affect my satisfaction and it accounts 10.482% of total variance. Fifth factor is lack of training and time deadlines factor which is the combination of variable like I have to take work home with me. I am expected to do more work than is reasonable and account 8.721% of total variance. Sixth factor is enhance job responsibility which is the combination of factor like my job requires me to work in several equally important areas at once and I feel that my job responsibilities are increasing and it account to 8.099% of total variance. Seventh factor promoting occupational stress is the task diversity and fear of completing colleagues expectation which is a combination of at work I am expected to do too many different tasks in too little time, I worry about whether the people who work for/with me will get things done properly and it accounts to 5.312% of total variance.

**Table 15 : Mean of Different Factor promoting Occupation Stress across Employees of Different Profession**

Profession	Organisation Ability To Optimize Human Resources	Work Anxiety and Lack of Resources	Leadership Crisis	Lack of Training	Work Over Load	Enhance Job Responsibility	Task Diversity
Dental Surgeon	1.7143	1.5000	1.0000	3.0000	3.0000	3.0000	3.0000
Nurses	1.2808	1.2759	1.9655	2.9138	2.3276	1.2586	1.9655
Neurologist	1.8571	2.0000	2.5000	2.5000	3.0000	2.5000	3.0000
Physician	2.1134	1.9265	2.4853	2.1912	2.6176	2.2500	2.0000
Surgeon	1.8571	2.0000	2.0000	2.5000	3.0000	2.5000	3.0000
Pharmacist	2.0857	2.4000	2.7000	2.3000	2.7000	2.1000	2.1000
Technical	2.1429	3.1333	2.2667	2.7333	2.4000	2.6667	2.8000
Total	1.8363	1.9515	2.2330	2.5534	2.5680	2.0777	2.2621

As is evident from the mean ratings of various factors promoting occupational stress across different professional categories of hospital employees Organisation ability to optimize human resources have found highest mean score among physician. Work overload seems to be the most important reason of occupational stress among the technical staff working in different hospital of Dehradun area.

## DISCUSSION

The principle purpose of the study was to investigate the level of occupational stress and various factor promoting occupational stress among different employees of health care services in different hospitals of Dehradun area of Uttarakhand State. The literature reinforced the need for the present study by indicating that medicine is one of the highest stressful professions and by showing the lack of consistency of findings regarding the impact of occupational stress on job performance. The major stress factors Organisation ability to optimize human resources, Work overload, Leadership crisis, Lack of training, Enhance job responsibility, task diversity among the employees, so the support from supervisor and colleagues is the major factor to reduce the stress level and make an individual to perform at his/her best. A possible explanation is that employees usually look up to their supervisors and if they do receive their support they might feel that their work is appreciated and become more secure in regard to their job which might decrease their stress level.

## CONCLUSION

Stress is normal. Everyone feels stress related to work, family, decisions, their future and more. Stress is both physical and mental it is caused by major life events such as illness, the death of a loved one, a change in responsibilities or expectations at work, job promotions, loss, or changes. Correct stress management should start from improved health and good intrapersonal relationships. As is evident from the mean ratings of various factors promoting occupational stress across different professional categories of hospital employees Organisation ability to optimize human resources have found highest mean score among physician. This calls due consideration in order to meet the expectations of the future generation. The prevention and management of workplace stress requires organizational level interventions because it is the organization that creates the stress. Success in managing and preventing stress will depend on the culture in the organization. A culture of openness and understanding, rather than of criticism, is essential. Based on the major findings, the following recommendations are provided. Lack of resources includes inadequate staff, lack of equipment/machinery and medicines. So it must be advocated by the head of the unit, not only for the benefit of doctors but their patients as well.

## REFERENCES

1. Mcgrath, J.E. : Stress and behavior in organizations. In M.D. Dunnette (Ed), 1976 Handbook of Industrial and Organizational Psychology. Palo alto, C. A. Counselling psychological stress Nurse Manag. 2001 Mar;9 (2):101-6. Bradford Community Health NHS Trust, Bradford, UK.<http://www.ayubmed.edu.pk/JAMC/PAST/20-3/Rubina.pdf> 135

2. Niaz U, Sehar H, Ali S. Stress in women physicians in Pakistan. *Pak J Med Sci* 2003;19(2): 89–94
3. Michie S. Causes and management of stress at work. *Occup Environ Med* 2002;59: 67–72.
4. Selye H. *The Stress of life*. New York: McGraw-Hill 1976.4. Deckard GJ, Rountree BH, Hicks LL. *Nursing Productivity : A qualitative view of performance*. *Nurse Economics* 1988;6:184–8.
5. Beehr TA, Newman J. Job stress, employee health and organizational effectiveness: A facet analysis, model and literature review. *Personal Psychol* 1978;31:665–9.
6. Beehr TA. Perceived situational moderators of the relationship between subjective role ambiguity and role strain *J Appl Psychol* 1976;61:35–40.
7. Cooper C, Marshal J. *Understanding Executive Stress*. New York : Petrocelli; 1977.
8. Schuler RS. Definition and conceptualization of stress in organizations. *Organizational Behavior and Human Performance* 1980;25:184–215.
9. Peters LH, O'Connor EJ. Situational constraints and workout comes: The influences of a frequently overlooked construct. *Acad Management Review* 2002;5:391–7.
10. Levey RE. Sources of stress for residents and recommendations for programs to assist them. *Acad Med* 2001;76:142–50.
11. Shapiro SL, Schwartz. Stress management in medical education : A review of the literature. *Acad Med* 2000;75:748–59.
12. Michie S, Williams S. Reducing psychological ill health and associated sickness absence: A systematic literature review. *Occup Environ Med* 2003;60:3–9.
13. Stewart W, Barling J. Daily work stress, mood and interpersonal job performance: A mediational model. *Workers* 1996;10:336–51.
14. Lee J, Graham AV. (2001) Students' perception of medical school stress and their evaluation of a wellness elective. *Med Edu* 200;35:652–9.