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).

S.No	Variables	Alpha
1.	Occupation Stress Index	.844

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 2nd 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

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

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.

Stress	Sources of Variations	Sum of Squares	Df	Mean Square	F	Sig.	Remark
Role Overload	Between Groups	5.201	4	1.300	10.760	.000	
	Within Groups	66.104	547	.121			Significant
	Total	71.305	551				
Role Ambiguity	Between Groups	2.921	4	.730	1.481	.207	Not
	Within Groups	269.694	547	.493			Significant
	Total	272.615	551				
Role Conflict	Between Groups	12.635	4	3.159	5.715	.000	
	Within Groups	302.342	547	.553			Significant
	Total	314.977	551				
Unreasonable group &Political Pressure	Between Groups	1.826	4	.456	.915	.455	Not
	Within Groups	272.798	547	.499			Significant
	Total	274.624	551				
Responsibility for Persons	Between Groups	3.667	4	.917	2.186	.069	Not
	Within Groups	229.386	547	.419			Significant
	Total	233.052	551				
Under Participation	Between Groups	8.598	4	2.149	2.857	.023	
	Within Groups	411.507	547	.752			Significant
	Total	420.105	551				
Powerlessness	Between Groups	3.859	4	.965	2.172	.071	Not
	Within Groups	242.982	547	.444			Significant
	Total	246.841	551				
Poor Peer Relations	Between Groups	8.103	4	2.026	3.099	.015	
	Within Groups	357.532	547	.654			Significant
	Total	365.636	551				
Intrinsic Impoverishment	Between Groups	5.461	4	1.365	3.062	.016	
	Within Groups	243.868	547	.446			Significant
	Total	249.329	551				
Low Status	Between Groups	1.992	4	.498	1.198	.311	Not
	Within Groups	227.396	547	.416			Significant
	Total	229.388	551				
Strenuous Working Condition	Between Groups	4.598	4	1.150	8.326	.000	
	Within Groups	75.523	547	.138			Significant
	Total	80.121	551				
Unprofitability	Between Groups	3.913	4	.978	7.021	.000	
	Within Groups	76.221	547	.139			Significant
	Total	80.135	551				

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

Stress Factors	Gender	N	Mean	Std. Deviation	T value	DF	Sig	Conclusion
Role Overload	Male	520	1.9478	.34723	7.335	550	.000	Rejected
	Female	32	1.4888	.27682				
Role Ambiguity	Male	520	1.8972	.69842	3.017	550	.003	Rejected
	Female	32	1.5134	.69595				
Role Conflict	Male	520	2.0961	.74166	4.202	550	.000	Rejected
	Female	32	1.5259	.79714				
Unreasonable Group & Political Pressure	Male	520	2.0200	.69505	3.478	550	.001	Rejected
	Female	32	1.5772	.76178				
Responsibility for Persons	Male	520	2.0653	.64023	2.283	550	.023	Rejected
	Female	32	1.7959	.76468				
Under Participation	Male	520	1.7489	.88464	3.364	550	.001	Rejected
	Female	32	1.2188	.42001				
Powerlessness	Male	520	1.7569	.67419	2.770	550	.006	Rejected
	Female	32	1.4213	.49324				
Poor Peer Relations	Male	520	1.7503	.81947	2.604	550	.009	Rejected
	Female	32	1.3659	.63904				
Intrinsic Impoverishment	Male	520	1.8158	.67211	3.651	550	.000	Rejected
	Female	32	1.3734	.53829				
Low Status	Male	520	1.6855	.64603	1.760	550	.079	Accepted
	Female	32	1.4791	.60900				
Strenuous Working condition	Male	520	1.7585	.37855	5.345	550	.000	Rejected
	Female	32	1.3963	.24033				
Unprofitability	Male	520	1.7572	.37930	4.870	550	.000	Rejected
	Female	32	1.4256	.26365				

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

Stress Factors	Marital Status	N	Mean	Std. Deviation	T value	DF	Sig	Conclusion
Role Overload	Unmarried	233	3.2769	.87223	-.798	544	.425	Accepted
	Married	313	3.3298	.67668				
Role Ambiguity	Unmarried	233	3.2103	.72500	-.478	544	.633	Accepted
	Married	313	3.2412	.76332				
Role Conflict	Unmarried	233	3.1648	.63352	-1.315	544	.189	Accepted
	Married	313	3.2409	.69346				
Unreasonable Group &Political Pressure	Unmarried	233	3.2242	.74523	-.541	544	.589	Accepted
	Married	313	3.2604	.79215				
Responsibility for Persons	Unmarried	233	2.9784	.86927	-2.639	544	.009	Rejected
	Married	313	3.1746	.85213				
Under Participation	Unmarried	233	3.2918	.84181	-2.734	544	.006	Rejected
	Married	313	3.4776	.74052				
Powerlessness	Unmarried	233	3.2260	.85401	.056	544	.956	Accepted
	Married	313	3.2217	.91390				

Stress Factors	Marital Status	N	Mean	Std. Deviation	T value	DF	Sig	Conclusion
Poor Peer Relations	Unmarried	233	3.0569	.72162	-3.374	544	.001	Rejected
	Married	313	3.2500	.61303				
Intrinsic Impoverishment	Unmarried	233	3.3380	.70197	-2.316	544	.021	Rejected
	Married	313	3.4752	.67224				
Low Status	Unmarried	233	3.5090	.42791	-.427	544	.670	Accepted
	Married	313	3.5244	.40881				
Strenuous Working Condition	Unmarried	233	3.0644	.84597	-1.345	544	.179	Accepted
	Married	313	3.1565	.74963				
Unprofitability	Unmarried	233	3.2167	.96670	-1.512	544	.130	Accepted
	Married	313	3.3450	.99072				

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

Stress	Type of Firm	N	Mean	Std. Deviation	T value	DF	Sig	Conclusion
Role Overload	Indian	304	1.9573	.36161	2.622	550	.009	Rejected
	Multinational	248	1.8770	.35314				
Role Ambiguity	Indian	304	1.9064	.67178	1.166	550	.244	Accepted
	Multinational	248	1.8363	.73985				
Role Conflict	Indian	304	2.1209	.72250	1.996	550	.046	Rejected
	Multinational	248	1.9921	.79100				
Unreasonable Group & Political Pressure	Indian	304	2.0353	.67797	2.113	550	.035	Rejected
	Multinational	248	1.9442	.73715				
Responsibility for Persons	Indian	304	2.0318	.64023	1.511	550	.131	Accepted
	Multinational	248	2.0717	.66319				
Under Participation	Indian	304	1.7518	.86866	-.716	550	.474	Accepted
	Multinational	248	1.6769	.87869				
Powerlessness	Indian	304	1.7916	.65104	1.002	550	.317	Accepted
	Multinational	248	1.6710	.6865-6				
Poor Peer Relations	Indian	304	1.8149	.88808	2.113	550	.035	Rejected
	Multinational	248	1.6216	.70154				
Intrinsic Impoverishment	Indian	304	1.8082	.65983	.695	550	.487	Accepted
	Multinational	248	1.7681	.68880				
Low Status	Indian	304	1.6959	.61085	.901	550	.368	Accepted
	Multinational	248	1.6461	.68527				
Strenuous Working Condition	Indian	304	1.7700	.39149	2.227	550	.026	Rejected
	Multinational	248	1.6976	.36533				
Unprofitability	Indian	304	1.7764	.39354	2.639	550	.009	Rejected
	Multinational	248	1.6908	.36110				

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

	RO	RA	RC	UGP	ROP	UP	PLN	PPR	IM	LS	SWC	UNP	TS
RO	1												
RA	.506(**)	1											
RC	.468(**)	.089(*)	1										
UGP	.420(**)	.150(**)	.017	1									
ROP	.467(**)	.121(**)	.136(**)	.087(*)	1								
UP	.280(**)	.124(**)	.075	.039	.107(*)	1							
PLN	.433(**)	.661(**)	.036	.062	.111(**)	.114(**)	1						
PPR	.368(**)	.016	.603(**)	.001	.074	.100(*)	.075	1					
IM	.370(**)	.031	-.007	.690(**)	.070	.018	.099(*)	.111(**)	1				
LS	.256(**)	-.035	-.066	-.018	.502(**)	-.021	.036	.063	.113(**)	1			
SWC	.660(**)	.303(**)	.284(**)	.299(**)	.323(**)	.541(**)	.478(**)	.554(**)	.472(**)	.389(**)	1		
UNP	.658(**)	.292(**)	.295(**)	.318(**)	.338(**)	.185(**)	.516(**)	.619(**)	.559(**)	.493(**)	.898(**)	1	
TS	.864(**)	.474(**)	.438(**)	.429(**)	.460(**)	.469(**)	.504(**)	.527(**)	.470 **)	.337(**)	.899(**)	.854(**)	1

** 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.

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