

GREEN HEALTH MANAGEMENT FOR EMPLOYEES IN I.T AND BPO SECTORS, USING SHARON SCHEMA WITH CHRISTINA THEORY

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ABSTRACT

The term absenteeism refers to the failure to attend to work. It is one of the major problems faced by companies across the globe today. High rate of absenteeism is neither desirable to employers nor good for the employees. In this work we have proposed a new application on mobile to cater the well being of heart and we designing a new mobile which is incorporating with stethoscope. We call it as "Mobile Steth" with automatic application for suggesting the food and heart related problems. Mobile steth will record the user datum; with this datum critical label will be checked. If the subject (patient) reaches the critical label, mobile steth will initiates an alarm to their family members and if the subject needs it will fix appointment in the nearest hospital from the organization.

In majority of organizations, high rate of health related absenteeism has an adverse effect on quality and quantity of production, efficiency of workers and organization, organizational discipline and more importantly on the organization's intention to fulfill the new market demands. Sudden medical leave badly hurts the progress of an organization resulting in loss of productivity, increased costs in hiring additional staff and low morale among the workers. It is high time that employers address this health and heart related problem on a priority basis. Whatever be the reason absenteeism is not at all a healthy practice and steps should be taken to manage it effectively. In this paper a study has been conducted among the I.T and BPO peoples facing young age heart related problems. The main objective is to find out the level of CVD absenteeism among the workers in the organization, to find out the various causes for absenteeism, to study the relationship between the employee's satisfaction level and CVD absenteeism and to finally suggest the possible remedial measures to

reduce and control the absenteeism rate. The study concludes that absenteeism can be reduced to a great extent if the management takes initiative in making the workers feel responsible towards their job by introducing various motivational schemes.

KEYWORDS: *Mobile with Inbuilt stethoscope, Sharon's Heart Card, Job Stress, Heart Related problems, Eating Habits, Self Motivation, Less Concentration.*

I. INTRODUCTION

0 years back – Have you ever heard of a cardiac arrest, blockage in angina, high cholesterol and high diabetes to an employee in the age group of 25-40 years?

Similarly have you heard of early retirement, mental strain, absenteeism and burnout?

Obviously no, which you have not come across - such a scenario. Occupational stress with health problem is the interaction of the worker and the conditions of work. Downsizing, increased workloads, high competition, growing population etc. are taking their toll. "Mental Stress, in essence, is a feeling of doubt about being able to cope, a perception that the resources available do not match the demands made.

II. MOBILE WITH INBUILT STETHOSCOPE IS GIVEN TO ALL EMPLOYEES

Healthier employees mean happier employees. There's less absenteeism, improved productivity and lowered health care premium costs- Jim Link Failure to attend or appear when expected. In another words, the absence means the state of being away or not being present. According to "Webster's Encyclopedia unabridged dictionary", absence means, "not in a certain place at a given time". The Law Lexion defined absent literally as "etymologically it means not present.

More recently, absenteeism has increasingly been viewed as an indicator of psychological, medical, or social adjustment to work." According to Goff, Mount, & Jamison, in 1990 "Employee absences due to personal illness, personal business and absence without leave, as measured in number of hours.(Source: G. Ritzer Ed., Blackwell Encyclopedia of sociology, Blackwell Publishing.) Van der Merwe and Miller (1988) classify absenteeism into three broad categories that help to understand the nature of this phenomenon. They are Sickness absence, Authorized absence/absence with permission and unexcused absence/ absence without leave.

III. ORGANIZATION IS MAINTAINING EMPLOYEES RECORD.

However there is a concern regarding issues of health and safety that are unique to this new & developing Industry. The lack of reliable and response to this concern poses a challenge for safeguarding the health of IT and BPO employees having young age heart related problems. Elevated Food habits, Non-vegetarian food items, cigars, stress levels, shift duties, high work targets, lofty income may force many towards addictions to keep them going. Call centers and I.T is blooming field of employees in the present age of global communication technology. The Kerala Health department and Migration Surveys of 2007 and 2008 covered a much larger sample than the NSS survey for employees in Kerala zone and its surroundings were assess the extent of bias in estimates based on NSS Health Sector for the IT and BPO Employees data.

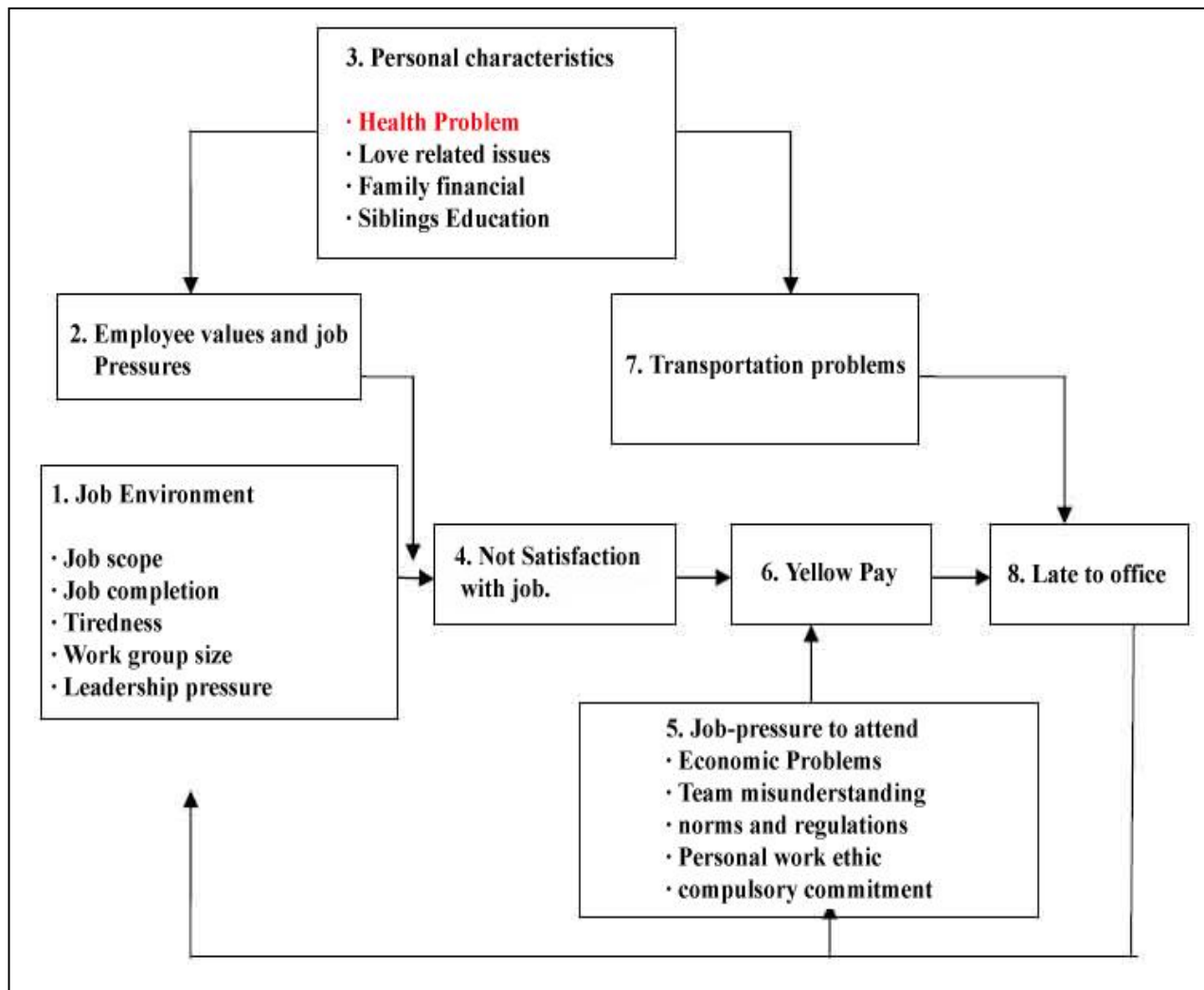
1. STATEMENT OF THE PROBLEM

According to the most recent CCH Unscheduled Absence Survey, employers are losing ground when it comes to keeping workers on the job. Unscheduled absenteeism rates have risen to their highest level since 1999. What continues to be of most concern is that almost two out of three employees who don't show up for work aren't physically ill. Absenteeism is a serious problem for a management because it involves heavy expenses.

2. MODEL OF ABSENTEEISM

Heuristic framework on the various factors influencing employee attendance

FIGURE 1
**HEURISTIC FRAMEWORK ON THE VARIOUS FACTORS INFLUENCING
EMPLOYEE ATTENDANCE**



IV. REVIEW OF LITERATURE

The study on employees absenteeism conducted by a number of researchers has been gathered in order to analyze the previous findings in accordance to the present scenario.

The Business Roundtable Report C-6 (June 1986 Reprinted Sept. 1989) ‘Heart related Absenteeism and product turnover a Construction Industry Cost Effectiveness project report. Based on the findings reflecting the workers' views, reasons for absenteeism and turnover fall into two broad categories:

1. Controllable with intimation 2.Uncontrollable (Emergency)

The Controllable reasons for absenteeism and turnover involve the ingredients of the environment of a construction site. In addition, each ingredient is important in its own right, quite apart from its effect on absenteeism and turnover. Careful attention to planning, safety, interpersonal relationships, and other management Fundamentals will not only reduce absenteeism and turnover, but will have other positive effects on job costs and schedules. A relatively small portion of the work force is causing most of the absenteeism and turnover. Eighty-six percent of the workers surveyed reported quitting fewer than three jobs in the last two years.

R. BRIAN HAYNES, DAVID L. SACKETT, D. WAYNE TAYLOR, EDWARD S. GIBSON, AND ARNOLD L. JOHNSON, (October 5 2000),

The New England journal of medicine ‘‘Increased Absenteeism from Work after Detection and Labeling of Hypertensive and Young Heart Patients’’. A study of hypertension in an industrial setting allowed us to confirm and explore an earlier retrospective finding that the labeling of patients as hypertensive resulted in increased absenteeism from work. After screening and referral, we found that 80 % of people have work pressure, blood pressure and tension that leads to absenteeism in the general employee population during this period. This cardio vascular disease affecting the health of the employees which unknown to them.

PAUL M. MUCHINSKY (27 JULY 2004) ‘‘EMPLOYEE ABSENTEEISM AT IOWS STATE UNIVERSITY USA’’.

The purpose of this paper is to review the literature on employee absenteeism as a form of withdrawal behavior apart from turnover. Studies examining the psychometric properties of absence measures are reviewed, along with the relationship between absenteeism and personal, attitudinal, and organizational variables. Studies exploring the relationship between absenteeism and turnover are examined according to the unit of analysis studied in the research. Programmatic efforts to reduce employee absenteeism are also reviewed. Throughout the paper emphasis is placed on the indices used by investigators to measure absenteeism, and the problems that have arisen in the literature through the use of multiple indicators of absenteeism. The review concludes with suggestions for research that are of both theoretical and practical concern.

FACULTY OF MANGEMENT SCIENCE AND HEALTH SECTOR DEPARTMENT OF INDUSTRIAL PSYCHOLOGY OF THE UNIVERSITY OF THE WESTERN CAPE, (NOVEMBER 2007).

CVD - employees not showing up for work when scheduled - can be a major problem for organizations. As pressures increase on the budgets and competitiveness of companies, more attention is being given to reduce workplace absenteeism and its cost. Most research has concluded that absence is a complex variable and that it is influenced by multiple causes, both personal and organizational. Job satisfaction has been noted as one of the factors influencing an employee's motivation to attend. Studies on the relationship between absenteeism and job satisfaction seem to be inconsistent. Some research has found no correlation between these two variables whereas other studies indicate a weak to moderate relationship between these two variables.

WILLIAM H. HENDRIX, BARBARA A. SPENCER AND GAIL S. GIBSON, JOURNAL OF BUSINESS AND PSYCHOLOGY VOLUME 9 REPRINTED (2009)

“Organizational and extra organizational factors affecting stress, employee well-being, and absenteeism for males and females”. The purpose of this research is to examine separately for males and females, the effects of different sources of job and life stress on the emotional and physical well-being of those individuals, and in turn on absenteeism. Results using experienced higher levels of job stress, absenteeism, and poorer emotional well-being.

1. OTHER MAJOR FINDINGS FROM THE STUDY

It has been clearly established that major of stress related diseases lead to critical illness like heart attacks, high diabetes, high cholesterol and many more medication related diseases.

Which could have been much under control / avoided in some cases through preventive medicine?

- About 82 % of the doctors are of opinion that preventive healthcare increases productivity as well as profitability of a company.
- Some of the diseases that can be detected through preventive health care are
 - Sudden Heart Attack (94% - PRIMARY)
 - Hypertension
 - Diabetes
 - Gastro Intestinal

- Heart diseases with throat cancer

2. THE ROLE OF HEALTH FOOD CULTURE IN ORGANIZATION

“This organization relies on committees, structures, logic and analysis” (Lynch 283). In this context a small group of managers/leaders will make the final decision but they will rely on procedures, systems and well-defined roles of communication. Besides in knowledge based economy, many of the business rely on the intellectual capital including creativity and innovation which is critically dependent on the health of the employees as shown below.

FIGURE 2
EMPLOYEE’S TROUBLE FACTORS IN ORGANIZATIONS AND ECONOMIC GROWTH REDUCING

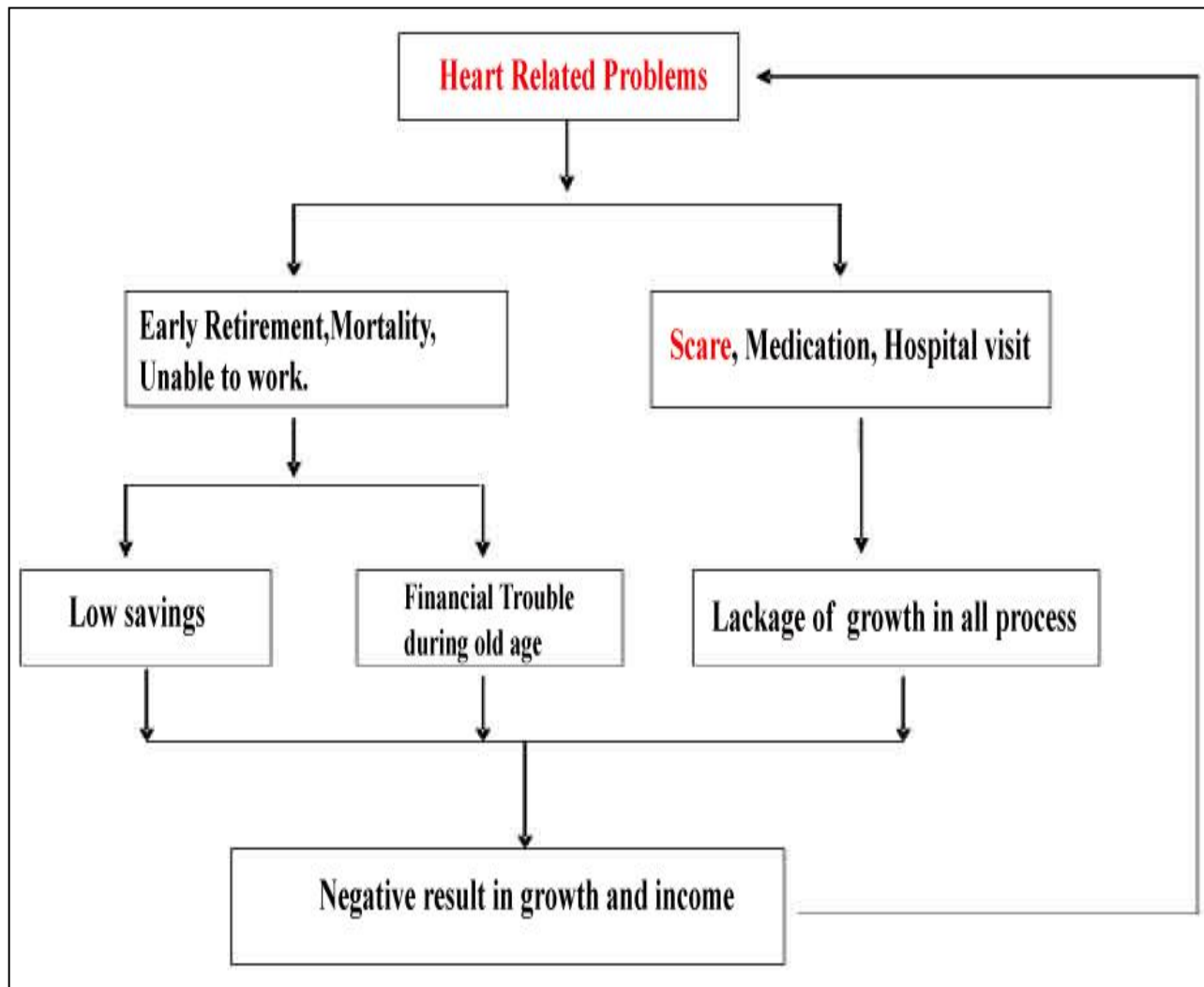


TABLE 1
ATTRIBUTE FACTORS FOR ABSENTEEISM AND
WORK REGULARITY OF EMPLOYEES

Attributes	W. Avg (3)	status
Employees coming for work at correct time	2.25	B
Leave taken by the employees without any prior information	2.11	B
Afternoon permission (any chest pain, high b.p)	3.87	A
Leave taken by the employees even though the leave application is not sanctioned	2.09	B
Physical Tiredness of work to the employees	2.80	B

Attributes	Avg (3)	status
availability of various leave facilities (CL,EL)	2.00	B
employees informing the supervisor through email, phone.	2.00	B
no balance between personal life with work life	2.82	B
high stress and chest pain leads to absenteeism	3.16	A
employees who are healthy & energetic	2.16	B
employees with working attitude with specific illness	1.14	B

However post diagnosis medical treatment is recommended and to some extent counseling, shifting to less stressful job in the company is also advised.

- The employee oriented measures that can be adopted to reduce stress are ranked as exercise, spending time with family followed by meditation in the same order.
- The employer oriented measures to combat stress are ranked as follows creating awareness on weight control, exercise, curbing smoking, and blood pressure control and health risk assessment.
- In the future occupational stress can be promoted by the following in the same order of importance as employee, employer, government, NGO & then finally hospitals.
- It has been unanimously accepted by doctors that there is need for acceptance of the working style and culture by the IT and BPO employees.

- Employers can take new initiatives like counseling, psychiatry and providing in-house medical facility to combat the growing lifestyle diseases.

V. DATA SOURCES FOR HEALTH PROBLEMS AND CVD ALERTS

Both secondary and primary data was used. Primary data was collected through a questionnaire. About 50 medical practitioners from various medical fields from both the towns were selected in the sample. Various secondary sources like Anna University Library, Pondicherry University Library, and JIPMER Library was visited to collect the data apart from referring national and international journals and internet.

A well structural Questionnaire with open and close ended questions was used and data was collected through personal Interview method. Statistical tools like chi square (one sample test), ranking methods were also used so as to judge the credibility of the survey results. The findings of the study are tabulated below.

TABLE 2

OBSERVATIONS ON OCCUPATIONAL STRESS DIMENSIONS AMONG PATIENTS

MAJOR STRESS FACTOR	
Factor	% of the respondents
Work related problems / Problem with team peoples	70
Family / Love / relationship issues for money	90
Young age Heart Problem	45
Have to update the subject topics daily	83
Other (specify)	----
AGE GROUP FACING STRESS	
Age Group	% of the respondents
20 – 30	65
30 – 40	55
40 – 50.. +	43
FREQUENCY OF VISIT OF PATIENTS WITH CVD / B.P	
Frequency	% of the respondents
Always	75
Sometimes	33
Often	43
Rarely	87
Never	94

1. RESEARCH METHODOLOGY FOR MOBILE STETH FOR EMPLOYEES

The research design adopted in this study is Descriptive research. The researcher has used both the primary as well as secondary data. The primary data was collected using a structured questionnaire and secondary data from financial websites, business magazines, newspapers, journals, attendance record, employee's handbook, HR handbook and policies, and from company website. The sample size was 75 and the sampling techniques adopted were simple random sampling. Scoring scheme was evolved to quantify the data. The data was analyzed using Percentage analysis, weighted average, Chi square test and one way ANOVA.

HYPOTHESIS 1

Ho: Factors causing occupational stress are uniformly distributed among patients.

O	E	(O-E)	(O-E) ²	(O-E) ² /E
35	16.6	18.4	338.56	20.39
11	16.6	5.6	31.36	1.96
4	16.6	12.6	8.76	9.56
$\sum (O-E)^2/E = 31.91$				

The calculated value of chi square was 31.91 and the table value was 5.99 at 5% level of significance and degree of freedom equal to 2. Hence the null hypothesis is rejected and it is concluded that factors causing occupational stress are not uniformly distributed among patients.

HYPOTHESIS 2

Ho: Frequency of visit of patients with stress related diseases is uniformly distributed.

TABLE 3
EMPLOYEES MOST SUSCEPTIBLE TO LIFESTYLE DISEASES

Employees	Rank
IT/ITes	1
Media	3
KPO	2
Financial Services	4
Telecom	5

HYPOTHESIS 3

Table 4 indicates that the doctors consider IT / ITes employees to be more susceptible to lifestyle diseases like obesity, diabetes, high BP, High cholesterol, heart-ailments, spondylolysis, sleep disorders and depression. This is indeed characteristic of the sectors working style.

TABLE 4
MOST COMPLAINED STRESS SYMPTOMS OF PATIENTS

Symptoms	Always	Sometimes	Rarely
Tension / stress	✓		
Irritability	✓	✓	
Inability to cope	✓		
Excessive tiredness	✓		
Trouble in sleeping	✓		✓
Anxiety	✓		
Pounding heart	✓	✓	✓
Pains & trembling	✓	✓	

2. MOBILE WITH STETHOSCOPE – SHARON MOBILES FOR EMPLOYEES

The proposed idea of Sharon mobile phone alarm allows all authenticated individuals to suggest the individuals for their food lifestyle and diet mechanisms. Authentication is validated by capturing the small user's information and by comparing with the existing stored database of food zone with the help of array matching scheme. The Health transactions and communication of the individual is carried over using synthesized information what he provided before using this software. It has 3 label stages say normal, medium, and critical. Our target is mainly focusing the critical label patients, because they are in risk levels in their health. We added new mechanisms called as instant appointment fixing in hospital zone, if the patient reaches the critical label or he is feeling to be in uneasy state, our program will search in the hospital zone for the appointment with doctor. If the doctor is not free or the hospital server is busy, then our programs will switch to the next hospital zone.

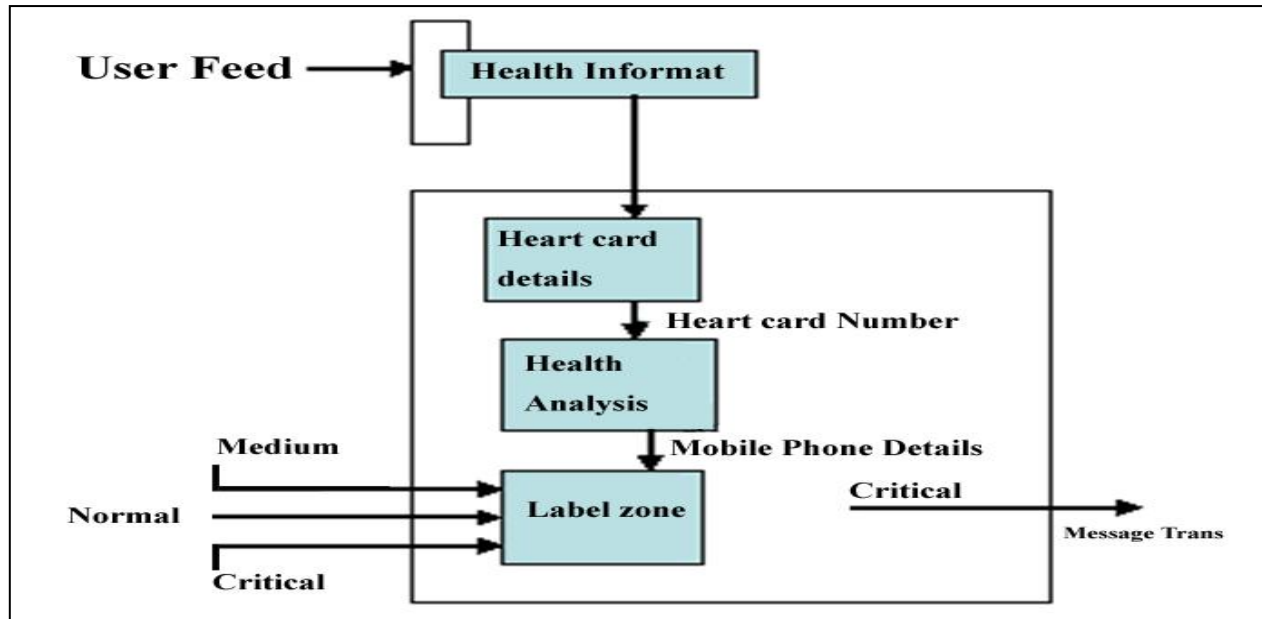
3. CHRISTINA THEORY FOR HEALTH SUGGESTIONS TO THE EMPLOYEES

An important advantage of our scheme is that the patient can change the class keys of system at anytime without having to reissue new devices to the users, whereas only the user with valid class and the daily food information need to be updated in HCN. However, when an individual authenticated user wants to change the profile, a new device needs to be issued. This also needs to be done when a different class is desired for personnel data to be accessed with the Christina theory for food habits. It contains the entire accessing records that how to change their profile schemes in a detailed manner. User can use that files for their diet process and to upload their personnel contents. Christina applies five criteria related to cooperative strategy to analyze the strategic implications of the cultures.

The five criteria are:

- Fit with prescription or emergent strategic routes for stress free life
- Ability to cope with strategic change oh health
- Hospital Management should not couple with work environment
- World class Medicare facilities at affordable costs established at aesthetic locations.
- Permanent cure of disease and rejuvenation of body , mind and spirit imparted by the Wellness therapies

FIGURE 3
EMPLOYEE'S HEALTH DATA IS MAINTAINED



4. HEART CARD NUMBER SCHEMA (HCN)

Note that the mobile application in our scheme is an alarm. That does calculation in the Decrypting Key Derivation process. This raises the question of whether such an application can be attacked by an adversary to gain secret information to subvert this process. This concern is necessary, since cosset lock scheme has been successfully attacked, due to the weakness of the security. we face a similar situation here also.

5. EMPLOYEES PARTICIPATORY RESEARCH SUPPORT

This architecture is well suited for participatory research as it enables the user to be involved in the sampling process. We highlight below some of the advantages of this architecture. Easy integration of off-the-shelf sensors which provides the user with a large selection of sensors. This flexibility is a result of three different factors. First, using Bluetooth which is very ubiquitous today and leveraging the serial port profile as it is typically used in Bluetooth implementations. Second, the design of a flexible sensor controller that separated the connectivity of the communication from the sensor data format which is stored in the HCN, enabling minimal code customization as new sensors are added to their system, hence if the employee needs any assistance means, immediately they can contact with the organization health sector to fix appointment in the hospital.

6. REDUCE THE RATE OF ABSENTEEISM WITH SHARON MOBILES:

- **PATIENT WITH HEART MOBILES**-The training of supervisors in how to best manage absenteeism should include instruction on how to conduct effective and fair return-to-work interviews. Recent national surveys indicate that these interviews are regarded as one of the most effective tools for managing Short-term absenteeism.
- **EMPLOYEE HOSPITAL APPOINTMENT PROGRAM**- Employees become frequently absent from work due to personal problems so the company can take initiative by providing employee hospital appointment programs.
- **HEART CARD ACCESS WITHIN ORGANIZATION**-Tell employees that they must phone in as early as possible to advise why they are unable to make it to work and when they expect to return.
- **RETURN TO WORK INTERVIEW**- When an employee returns to work then ensure that they have a 'return to work interview' and routine enquiry must be done.
- **MEDICAL CARE PROGRAM (WEEKLY)**-The management can provide advanced medical care program at least every week for the health care of the workers.
- **HEALTHY FOOD CHART IN THE ORGANIZATION**-The attendance incentives may be raised a little to motivate the employees regularity.
- **INDUCTION PROGRAMME FOR THE FAMILY MEMBERS** –The family members of the worker should also clearly inform about the loss the worker incurs due to his frequent absence for work. The management can also make the family members to actively co-operate in making the worker attend work regularly.

7. HEART RELATED SUGGESTIONS FOR THE EMPLOYEES

The survey has brought about very interesting revelations to combat stress of BPO employees as stated below:

Government intervention through its comprehensive care and commitment to regularly introduce innovative schemes, infrastructure development, environment protection at the Macro level and also provide incentive and subsidies to these companies or indirect subsidies cover the whole range of preventive health care. Measures like counseling, gym, health check- ups, follow – up to this check – ups etc. should also be covered by government schemes.

- Though some companies provide wellness measures they are used by employees only in certain situations. Hence government must ask these companies to make preventive checkups mandatory.
- Corporate can offer preventive health care vouchers for fixed time periods at regular intervals of time.

- When you are in Rome be like a Roman” This philosophy has to be realized by the employees to accept the demands of the BPO job profile apart from the income from it.
- The role of HR personnel has to be unbiased towards the Employees and the employers to provide a more stress free work environment.
- Providing music in the background of the shop floor, would give them relaxation to monotony and boredom in the work.
- Fixing up smiling, pictures of philosophers like Swami Vivekananda to calm the employee stress.
- Follow guidelines for arrangement of the employee work station like in the aspect of height, depth, and back rest of the chair.
- Good lighting design can be followed to significantly help reduce discomfort due to glare.
- Tips should be followed to protect the employees from (CV) computer vision syndrome with respect to areas like monitors positioning, angle of viewing, attaching antiglare screen etc.
- Following tips while regularly using the keyboard so as to avoid stiffness of the hand / fingers
- Following de stress exercises during Lunch break like eye exercises.
- Sedentary work style in I.T and BPO jobs can be combated through neck relaxation exercises otherwise one will end in stress and end up in spondolysis.

VI. DISCUSSION

There were some interesting surprises in the details of the findings. The initial analysis using Means was based on attitude towards the company and its health sectors, attitudinal and behavioral responses. Behavioral responses were consistently lowest, followed by attitude towards the company and its image and the highest was health related attitudinal. The findings suggest that having or not having health related awareness does not impact employees. Nevertheless, what was surprising was that there was no significant difference in the response of a predetermined, selected, and known segment towards a pretested and accepted medical related food habits in the company canteen. There was no significant difference in company, attitudinal and behavioral measures responses. This contradicts previous studies that have nearly all found differences and significant differences in favor of health food advertisers (Atkins & Block, 1983; H. Friedman et al., 1977). There was no possibility of bias or comparison between the different types of posters brochures for food principles. In essence, respondents evaluated each advertisement on its own merits and the authors found that these merits produced similar results. The authors found no evidence that health endorsement program, which normally cost in

low budget, would benefit the company image. The result demonstrates no difference in respondent's view to the variables tested against a health related advertisement with a celebrity and one without.

In other words, respondents were indifference in terms of their attitude towards company employee image, company, products, brand, WOM whether a health advertisement posted in the company.

Even though previous research shows favorable increase in respondents' perceived corporate health records were through high exposure to specific health campaign (Grass et al., 1972), this study has proven already with set of 25 employees of I-system Pvt.ltd.

VII. CONCLUSION

It is increasingly being recognized that occupational stress and young age heart related problems is a major hazard at the work place of IT and BPO employees. This is taking a toll on the lifestyle of our youngsters. The deaths in the recent years in this sector have to some extent brought the attention of policy makers to regulate the health and safety related issues. Combating occupational stress of I.T and BPO employees has to follow 3600 approach wherein a mental change is required in these IT and BPO employees to accept their job profile and have to respond to new behaviors this sector calls for, while the employers should also promote awareness and provide necessary facilities to control their employee stress. Also the various sections of our society should understand that healthier the population of a country, the greater is its economic growth.

Further while liberalization of the economy has expanded opportunity for employment and additional incomes in this BPO sector, it has also brought with it urbanization and changes in lifestyles. These changes have had a profound impact on the epidemiology of diseases and health care demands of the people. To some extent large companies like Infosys has introduced programme like (Hale) Health Assessment Lifestyle Enrichment for reducing absenteeism and psychological stress. Similarly WIPRO runs a programme called Mitr (Friend) to take care of the emotional and physical well being of its employees.

REFERENCES

Agrawal, J., & Kamakura, W. A. (1995). The Economic Worth of health endorsers: An Event Study Analysis. *Journal of Health sectors*, 59(3), 56 - 62.

Cheng, Enjiang and Xu, Zhong (2005), "Domestic Insurance Transfer Services for Migrant Workers in China:Executive Summary", Report prepared for the Consultative Group to Assist the health management sectors,<http://www.microfinancegateway.org/gm/document-1.9.26799/80.pdf> accessed on 20 Jan. 2011.

Ghate, P. (2005), "Serving Migrants Sustainably: Employee Services Provided by an MFI in Gujarat", *Health & Digest Weekly*, April 23, pp. 1740-1746.

GoI (2001), Census 2001 Migration Data, www.censusindia.gov.in, accessed on 15 Nov. 2010. Office of the Registrar General and Census Commissioner, India. Government of India.

Herbig, P., & Milewitz, J. (1993). The Relationship of Reputation and Credibility to Brand Success of vegetables in china market. *Journal of Consumer Marketing*, 10(3), 18-24.

Ind, N. (1997). *The Corporate Brand*. London: Macmillan Press Ltd. Kambitsis, C., Harahousou, Y., Theodorakis, N., & Chatzibeis, G. (2002). Ayurvedic Food Advertising in Print Media: The Case of 2000 Olympic Games. *Corporate Communications: An Interational Journal*, 7(3), 155-161.

Kamins, M. A. (1990). An Investigation into the "Match Up' Hypothesis in Celebrity Advertising for oil products: When Beauty May be Only Skin Deep. *Journal of Advertising*, 19(1), 413.

Misra, S., & Beatty, S. (1990). Health related Spokesperson and Brand Congruence: An Assessment of Recall and Affect. *Journal of Business Research*, 21, 159 - 173.

Mitchell, A. A., & Olson, J. C. (1981). Are Product Attribute Beliefs The Only Mediator Of Advertising Effects On Brand Attitude? *Journal Of Marketing Research*, 18, 318 - 322.

Maheswaran, D., & Sternthal, B. (1990). The effects of knowledge, motivation, and type of message on ad processing and product judgments. *Journal of Consumer and health Research*, 17(June).

Martin, J. H. (1996). Is the Athlete's Sport Important when Picking an Athlete to Endorse a Non-sport Product? *Journal of Consumer Marketing*, 13(6), 28-43.

Mathur, L. K., & I, M. (1996). Is Value Associated with Initiating New Advertising Agency in the organizations with employee and Client Relations? *Journal of Advertising*, 25(3), 2-11.

Mueller, V. and Shariff, A. (2009), "Preliminary evidence on Internal Migration, young age heart problems in Teen Schooling in India", IFPRI Discussion Paper 00858.

NABARD-GTZ (2009), "Remittance Needs in India", Technical Study for the Rural sectors http://www2.gtz.de/wbf/4tDx9kw63gma/NABARD_GTZ_Remittances.pdf, accessed on 18,Oct. 2010.

Peterson, R. A., Wilson, W. R., & Brown, S. P. (1992). Effects of advertised customer satisfaction claims on consumer attitudes and purchase intention. *Journal of Advertising Research*, 32(2), 34 - 40.

Sahu, G. B. and Das, B. (2008), *Income, Insurance and Urban Labor hospital maintenance: Oriya Migrant Workers in Surat City (Bhubhaneshwar: Adhikar)*.

Spencer, B. C. (1999). An examination of the relationship between corporate image and sponsorship. Unpublished Master of Business, University of Otago, Dunedin.

Zachariah, K. C. and Rajan, I. (2007), "Migration, Remittances and Absenteeism Employment: Short Term Trends and Long Term Implications", CDS Working Paper 395.

Zachariah, K. C. and Rajan, I. (2010), "Migration Monitoring Study, 2008: Emigration and Remittances in the context of surge in health foods", CDS Working Paper 424.

World Bank (2008), Migration and Remittances Fact book 2008, The World Bank Remittances and Health record of urban peoples (Inflows). Posted online on April 23, 2010. <http://go.worldbank.org/SSW3DDNLQ0>.