

NURSING SHORTAGE PARADIGM: THE BAYELSA STATE SITUATION

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ABSTRACT

This paper attempted to educate the reader about the shortage of nursing staff and how it affects Bayelsa State's health sector. Bayelsa State like any other state in Nigeria has enormous health challenges associated with manpower shortage. Bayelsa's situation is unique because of its terrain. Some factors such as cost of river transport, insecurity of lives and properties due to incessant attacks from sea pirates, poor housing, lack of portable water, deplorable state of hospitals and health centres, erratic or lack of power supply, inadequate nursing personnel, and uneven distribution of the few nurses available, were identified to be peculiar with Bayelsa terrain. This consequently resulted in increased nurse- patient load, risk for error, infection spread, high mortality rate, quackery and chances of nurses being over stressed. Recommendation such as increase in the rural posting allowance for nurses, provision of social amenities in rural areas, employment of more nurses from various states of the federation among others were made.

KEYWORDS: nursing shortage, nurses, Bayelsa State, paradigm

INTRODUCTION

Nurses are indispensable in the health care system because of the important role they play in patient care. A health system without adequate nurses is like a severely anaemic patient. The role nurses play in the health care delivery system at every level is geared towards providing essential services for the promotion of physical, mental, economic, social and spiritual wellbeing of individual, families, and communities. Nurses also have the responsibility of motivating members of the communities to learn and solve their own health problems and also imbibe healthful habits and life style that ensures optimum health. Nurses achieve this function as a direct care giver at all levels, by developing a variety of clinical and community skills like examination of client to identify risk factors, teaching of mothers craft skills and explaining the need for immunization, nutrition, rest and sleep, exercise etc. (Olubiyi, Fewmiand Nwana, 2004). The Nurse also function as teacher and educator, a manager and supervisor, a researcher and evaluator and a policy maker. Adequate number of nurses is essential for quality nursing care in the health care system. Bayelsa State created in 1996, located in the south-south zone of Nigeria, is made of swamps and creeks that require the infusion of enormous resources for her development. As a result, Bayelsa State is one of the most difficult terrains in the country. The State through the ministry of health is making a huge effort in rehabilitating and reactivating the health sector in the State. However, her effort may not yield the desired impact on the health the people without the right number and quality of manpower especially nurses. The recruitment of Nurses in the state is imperative in view of the current remarkable dearth of nursing manpower in relation to its population of 1.7 million people as recorded in the 2006 census.

Nursing staff shortage is a global problem starring fiercely at both the developed and developing countries. Wikipedia (2008), refers to nursing shortage as a situation where the demand for nurses is greater than supply. The centre for nursing advocacy (2006) , posits that the current global shortage of nursing personnel is as a result of lack of awareness and dangerous lack of skilled nurses who are needed to care for individuals, patients and the population as a whole. There has been a growing global shortage of nursing personnel since 1980s, creating a severe problem in the health care delivery system. According to Jibao (2007) china alone faces a deficit of one million nurses. It is also reported by the united states of Government that their country will face a shortage of about 800,000 nursing personnel by the year 2020. To handle this futuristic problem, the USA through the commission on graduate of Foreign nursing schools (CGFNS)

Is aggressively recruiting highly skilled nurses from nations like the Philippines, India and Nigeria. The movement of skilled nurses from such countries to the united states is affecting the nursing personnel strength in these countries.

In Bayelsa State, the total number of trained nurses on the nominal roll of Bayelsa State Hospital Management Board as at April 2008 is 441. A total of 346 are active clinical nurses distributed to the various hospitals and health centres in the state. The remaining 95 nurses are either on study leave or secondment to special areas like the school of nursing. Information from the office of the Assistant Director of Nursing service, Federal medical centre, Yenagoa, reveals that the institution has a total of 150 nurses. Although the total number of nurses on the nominal roll of the various local governments was not available, the case is not different from the state. The nurses in the state service are not adequate enough to meet the health needs of about 1.7 million people.

TYPES OF NURSING STAFF SHORTAGE.

According to the centre for nursing advocacy (2008), the following are types of nursing shortage;

1. THE WILLING NURSE SHORTAGE

This type of shortage occurs because of nurses volition not to fill vacant nursing jobs because of the prevailing care environment e.g. erratic or absent power supply, poor infrastructures, lack of social amenities etc. In this sense, the current nursing shortage in many parts of Bayelsa state could be described as a willing nurse shortage.

2. FUNDING OR PERCEIVED FUNDING SHORTAGE.

This type of shortage may occur where there is lack or perceived lack of funds to finance nursing position that are generally understood to be needed. For instances, a given facility decision maker may understand that a particular unit shift really needs five nurses but have limited resources, may employ less. This is a classic under staffing scenario seen in many government institutions and private hospitals across Bayelsa state and Nigeria.

3. SHORTAGE OF UNDERSTANDING THAT NURSES ARE NEEDED TO DELIVER CARE

This type of shortage may occur where there is a general lack of agreement or awareness amongst policy makers in health care system that number of nurses needed to deliver care for a given population differ from setting to setting.

4. NURSE EDUCATION AND EMPOWERMENT SHORTAGE

Many Nurses do not have sufficient training and social empowerment to render quality care to patients. Research has associated nursing staff that have more formal education, specialty training and better work environment with significant improved patient outcomes (Forsyth and Mackenzie, 2006). Lack of nursing empowerment is a problem in many nation and health care settings. This is obvious in areas where training resources are scarce.

FACTORS CONTRIBUTING TO NURSING STAFF SHORTAGE

1. PROFESSIONAL ALTERNATIVE

Since inception, nursing has been predominantly female profession. However, in recent times, more career opportunities are open to women and this tend to create a competition between nursing and other career that perhaps offer better working condition and higher salaries (Bednash, 2000) as a result, fewer prospective students see nursing as their career choice.

2. WAGE DISPARITY

Although the wages of the nurse have increased dramatically over the past decades, they still lack behind other professions. For most nurses working in non-governmental settings, the typical wage is not enough to support an average family needs.

3. AGE

According to the centre for Nursing Advocacy (2006), the lack of younger people entering nursing profession has raised the average age of nurses. The average age of Registered Nurses in the United States is 43years of age. About half of the Nursing work force in the United States will reach retirement age in the next 15 years. Added to this, average age of new registered nurses is 31 years of age. Nurses are entering the profession at older age and offer fewer years of service.

4. THE NURSING SCHOOL DILEMMA

While the demand for admission into nursing schools is high, the ability of schools to expand is limited by the shortage of qualified faculty staff. In 2003, 16,000 qualified students were rejected

in United States alone (Brush, Sachalski and Berger, 2004). According to a 2002 study cited by Brush *et al*, part of the reason for the paucity of new graduate is the aging of health care faculty staff. "Clinicians who have paid their dues in front-line work, academic study, research and teaching are now reaching retirement age". With fewer teachers, there are fewer openings for students.

5. ATTRITION

One of the most disturbing trends contributing to the nursing shortage is the significant number of nurses leaving the profession in the prime of their working years. Because nursing has occasionally been a significant movement of nurses in and out of work force during their child bearing and parenting years. And, those who left to start and raise a family came back to the profession when their children become of school age. Recently, record number of nurses are leaving the profession early and never returning. Studies show raising family is no longer the primary reason cited for abandoning the profession, the work hours alone can be a major impediment to career satisfaction. Departing nurses report an extremely high level of dissatisfaction with the work place environment. They cite high demand and little reward, and they often feel they cannot provide the quality of care their patient need. (Wikipedia, 2008)

HearthMath White Paper (2008), highlighted that to compensate for the nursing staff shortage, some hospitals have increased the pressure on nurses to work double shifts. In some cases, they make it mandatory. This practice has been condemned loudly by nurse leaders and others studies have also shown that over worked personnel cannot possibly provide quality care on a sustainable basis.

6. RAPIDLY GROWING POPULATION

Nigeria according to 2006 census, has a population of 139.9 million people with double in 29 years (central Intelligence Agency the World Fact Book, 2008). This rapidly growing population puts a strain on the available health care infrastructures, thus, the ever rising need to open new hospital and health centres and expansion of existing ones. This condition tends to create a gap between supply and demand for nurses needed to work in these new hospitals and centres, (Honour Society of Nursing, 2008). Iruo (2006) asserts that: "the more health centers and hospitals in particular area, the more nurses are to be engaged".

7. BRAIN DRAIN

Nurses tend to move from countries with lower standard of living to those with higher standards (The centre for Nursing Advocacy 2006). In Nigeria, this movement is facilitated by the recruitment exercises of the United State through agencies like Global Nurses Online (GNO), etc. This situation has caused people and individuals to join nursing, not to the benefit of the society in which they are trained, but to the benefit of countries which they go for greener pastures. Of course more knowledge could be acquired in such foreign countries and nursing training is recognized to be given for promotion and maintenance of health world wide. The fact remains that nurses who have been to foreign countries with better working conditions will not want to return to their own countries with poor working conditions, where they are desperately needed.

Records from CGFNS show that in 2006 alone, 9,235 certificates were issued to nurses from the Philippines, India, China, Nigeria and Kenya, all in the third world countries in order to work in the United States. This has resulted in the gap between demand and supply of nurses in those countries (Commission on Graduates of Foreign Nursing schools, 2008).

8. GOVERNMENT POLICY

The inability of government at all levels to employ the appropriate number of nurse needed to work in government owned health care delivery facilities is a major cause of the nursing staff of hospitals. Understaffing leads to overworking of the few nurses available which in turn leads to stress and job dissatisfaction.

FACTORS THAT CONTRIBUTE TO SHORTAGE OF NURSING MANPOWER IN BAYELSA STATE

1. TERRAIN

Bayelsa State is surrounded by many creeks, rivers and tributaries making accessibility of the terrain difficult. This is a major contributing factors in nursing staff shortage in some parts of the state. Nurses employed by the state government who are posted to rural communities in the hinterland reject such posting because of diverse reasons. They include:

- High cost of river transportation
- Insecurity of lives and property due to incessant attacks from sea pirates.
- Poor accommodation.
- Poor school in the rural communities for children of employed nurses.
- No portable water supply.
- Deplorable state of hospital and health centres.
- Erratic or absent power supply to the health centres and the community.

2. INADEQUATE NUMBER OF NURSING PERSONNEL

Statistics from Federal Medical Centre, Yenagoa and Hospitals Management Board as highlighted earlier in this presentation show that the total number of employed nurses working in the state is grossly inadequate to meet the health care needs of Bayelsa with a population of about 1.7 million people.

3. LACK OF NURSE SPECIALTIES

Statistics from Bayelsa state health management Board also reveal a much more severe lack of nurses in virtually every area of specialisation. The state by the end 2008 has five 5 Nurse anaesthetists, one 1 ear, Nose and Throat Nurse, seven 7 Pediatric Nurses and Thirteen 13 peri-operative Nurses. Therefore more qualified nurses need to be trained to cover both the present and other specialty areas.

4. UNEVEN DISTRIBUTION OF THE FEW NURSES AVAILABLE

Bayelsa state health management board statistics also show an uneven distribution of nurses in favour of the urban areas and areas with more infrastructure and equipment. To illustrate on this uneven distribution: the statistics reveal that Cottage hospital, Otuasega, a hospital that is well funded and supported by shell petroleum development company has nineteen nurses 19 while General Hospital, Odi, a far bigger town with fewer hospital equipment can only boast of seven 7 nurses.

IMPACT OF THE NURSING SHORTAGE ON HEALTH CARE.

According to Brush *et al* 2004 the general consequences of nursing staff shortage is as follows:

- Increase in nurse patient load.
- Increases in the risk of error.
- Increases risk of spreading infection
- Increases mortality rates.
- Increase in the chances of quacks being employed.
- Increases chances of nurses being over stressed.

CONCLUSION

Poor state of the health system is attributed to manpower shortage especially nurses. Therefore more needs to be done in terms of manpower development. More nurses should be employed and deployed to the hinterland. Living condition should be improved in the rural areas so that bayelsans will enjoy the highest level of health possible.

RECOMMENDATIONS

- Nurses should be employed from other states of the federation to improve the work force.
- Bayelsa state Government should improve infrastructure in rural communities to encourage nurses.

- The government should Increase the rural posting allowance for nurses posted to the hinterland.

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