

Current Status, Issues and Challenges in Nursing

Bimala Chhetri, MN; Pushpa Koirala, MScN

Faculty of BN , B&B Medical Institute, Gwarko, Lalitpur, Nepal

Address for Correspondence:

Pushpa Koirala, MScN

Faculty of BN, B&B Medical Institute, Gwarko, Lalitpur

Email: pushpa_pk@yahoo.com

Received, 19 April, 2017

Accepted, 4 May, 2017

Nursing has undergone dramatic change in response to social needs and influences. Nursing today is different from nursing as it was practiced years ago, and it is expanded to continue changing during the 21st century. Today nursing is a profession with rich career opportunities that change and reflect the society in which nurse live. In the previous days nursing services was limited within the hospital, with the advancement of time and technologies, the role of nurses has expanded as a school health nurse, occupational health nurse, nurse practitioner, nursing administrator, nurse researcher, home care nurse, hospice nurse etc. ^{1,2}

In Nepal nursing education is growing drastically which was started from one nursing program in 1956 AD to 250 nursing programs till now. Currently we have different level of nursing education program like ANM, PCL nursing, BN/BNS, B. Sc. Nursing, MN/M. Sc. Nursing and Ph.D. in nursing.

Today nurses are facing various issues and challenges that have been driven by various factors. Brain drain or skill drain is one of the major issues. As evidence by Nepal Nursing Council record on the distribution of verification letter to work abroad has increased dramatically since 2002 which shows 5916 nurses has taken the letter till 2015. The purpose of this article is to present the current status, issues and challenges of nursing in Nepal.

Keywords: challenges, issues, nursing status.

Traditionally nursing was considered as the service providing for only sick, injured and dying person. With the advancement of time and improvement of the profession it included total care of the patients and healthy people. These days the profession has expanded from hospital to community and many other places such as schools, hotels, offices, home industry, etc. ² Advances in technology, the rising acuity

of hospitalized clients, and early discharge from health care institutions require nurses in all settings to have a strong and current knowledge base from which to practice. In addition, nurses are active in political and lobbying groups, social agencies and work on establishing social health care policies. These activities increase nursing's public validity and at the same time, increase the public's awareness of professional nursing. ³

| Level | No. of Institutes | Course Duration | Organization |
|--|-------------------|-----------------|--|
| Proficiency Certificate Level Nursing | 107 | 3 Years | CTEVT, TUIOM, KU, KAHS, NAMS, BPKIHS, PAHS |
| BN/BNS | 38 | 3 Years | TUIOM, PU, KU, NAMS, PAHS |
| B.Sc. Nursing | 40 | 4 Years | TUIOM, PU, PoU KU, PAHS, BPKIHS |
| MN | 7 | 2 Years | TUIOM, PAHS, BPKIHS, NAMS |
| M.Sc. Nursing in Midwifery | 1 | 4 Years | KU |

Table: 1 Level, course duration, and Organization

The scope of nursing has increased with more emphasis and priority on preventive and promotional aspect of health care. Similarly, the preventive and promotional nursing are in global priority. It seems that it is difficult to meet the need for the global demand of nursing and becoming shortage especially in western world and gulf countries. Similarly, in developing countries like Nepal nursing profession is becoming highly demanding and young students are attracted to the nursing profession due to endless opportunities around the world.⁴

According to Nepal Nursing Council, total registered nurses were 71557 till 12th March 2017. Among them 43139 are nurses, 27589 are ANM and 829 are foreign nurses.

According to MOHP, HRH assessment 2012, there are 3371 nursing professionals employed in public and 3683 in private sector totaling 7054. Nepal currently has 0.50 nurses per 1000/population which is significantly lower than the WHO'S

recommendation of 2.3 nurses per 1000 individual.

Present Status of Nursing Education

At present there are different institutions and Universities providing nursing education at different level. The duration of course in nursing at various levels are different. For example, ANM: 18 months, PCL Nursing: 3 years, Bachelor in Nursing Sciences (BN/BNS): 3 years, B.Sc. Nursing: 4 years, Master Degree in Nursing (MN/M.Sc.): 2 years, KU M.Sc. in Midwifery: 4 years. TU has Started PHD in nursing since 2012 with intake of two students per year, now the program has stopped in 2016.⁵

Current Challenges and Issues of Nursing in Nepal

Health care is changing dramatically due to advancement of medical sciences and technology, the abundance of clinical research and higher demands of consumers. As a key profession of

Healthcare, these changes represent a significant challenge to the nursing profession and nursing education.

Nurses play an integral role in the healthcare industry, providing care to patients and filling leadership roles at hospitals, health systems and other organizations. But being a nurse is not without its challenges. It's a demanding profession that requires a lot of dedication and commitment.

Current Challenges Inappropriate Staffing

Safe staffing is an important for both professional and personal concern. Inappropriate staffing levels can not only threaten patient health and safety, and lead to greater complexity of care, but also impact on nurses' health and safety by increasing nurse pressure, fatigue, injury rate, and ability to provide safe care. ⁶

The Changing Technology

The fast developing technology plays an important role in changing nursing profession in Nepal. Much technical advancement in medical and surgical practices, which were impossible in the past, has saved many lives today. This brought the need for specialist nurses in many areas of nursing. Thus, nurses have to be more knowledgeable. Advances in biotechnologies are having a spectacular impact on prevention, diagnosis and treatment of illness. Technology will continue to increase access to information and education to create new and expanded roles and skills for nurses.

Tele-health is increasingly connecting healthcare facilities and reaching into homes with health information and

consultation with health professionals, online network groups, teleconferencing and management of chronic diseases. There will be a need to balance the high tech with the human aspects of caring and compassion. ⁷

Changing Demographics and Increasing Diversity

Greater life expectancy of individuals with chronic and acute conditions is challenging the health care system's ability to provide efficient and effective continuing care. Significant increases in the diversity of the population affect the nature and the prevalence of illness and disease. Nursing practice, education, and research must embrace and respond to these changing demographics, and nurses must focus on spiritual health, as well as the physical and psychosocial health of the population. ⁸

Educated Consumer

The educated consumer despite some information gaps, today's patient is a well-informed consumer who expects to participate in decisions affecting personal and family health care. With advances in information technology and quality measurement, previously unavailable information is now public information, and consumers are asked to play a more active role in health care decision making and management. The increased power of the consumer in the patient provider relationship creates a heightened demand for more sophisticated health education techniques and greater levels of participation by patients in clinical decisions. Nurses must be prepared to understand this. ⁸

Rising public expectations

The public is becoming better informed and more assertive about health services, sometimes challenging the professional decisions. Patients group are increasing negotiating with professional about the care they want. At the same time concerns with human rights, equity, accountability and ethical issues will come to the forefront of debate and action. ⁷

Changing disease pattern

Changing disease pattern and challenges of infectious diseases, chronic and non communicable diseases, injuries and violence, new or re-emerging conditions is challenging today's nurses to think and react in a sophisticated way. Nurses need to be specialized in a continuum of care in providing holistic care in homes, rehabilitation centers, halfway houses, hospices and hospitals. ⁷

Workplace Violence

The rising rate of workplace violence in health care facilities has become a major problem for health care providers including nurses. Exposure to violence while carrying out duties adversely affect nurses and may lead to loss of concentration, inattention to ethical guidelines, commuting mistakes, absence from shifts, repeated absenteeism, inattention to patients, reduction in job satisfaction, dislike of job, and refusal to work in stressful wards. As a consequence of experiencing violence in the workplace, a nurse may decide to transfer to another section within the same health care facility, or may give up nursing altogether. This may result in significant additional costs on treatment centers and the

community. Moreover, the consequences of workplace violence in the health sector have a significant impact on the effectiveness of health systems, especially in developing countries. ⁹

Limited Super specialty in Nursing

Today we are facing new emerging disease with an aging population, this require additional medical professional to meet the burgeoning demand in health care. In Nepal there are various super specialties courses are available in medical. In comparison to medical, nursing has few nursing super specialties courses. Nurses need a wide range of skills and knowledge to meet the diverse needs of patient's across life span.

Current Issues in Nursing

Issues mean a subject which people are talking and arguing about evaluating past and present. The nursing profession can be very rewarding but it is equally challenging. In some cases, there is a lack of universal legislation to address these issues at the organizational, state, or national level.

Migration of Nurses

Migration of health worker is one of the biggest issues that is faced by country today. Since most of the nurses graduated from different institutions have started leaving the country in search of better jobs abroad and further study as the demand of nurses in developed countries is increasing Study conducted by ILO (2016) shows reason for migrating of health worker for better salary is 91.2% followed by (85.3%) better living condition. ¹⁰

Under financing

Nepali nurses have made their reputation in the international markets but it is found that they are low paid in their own countries inspite of heavy workload and longer hour of duties in most of the non-government health institutions. Moreover, the private nursing homes who are charging huge amounts with the patient's are giving low salaries and less facility to nurses.¹¹

Unequal distribution

It is vital for healthcare system to have a sufficient numbers of suitably trained health professionals including nurses at all levels of health services to deliver effective health care, study findings suggest that there is severe mal distribution of the nursing workforce in rural and urban healthcare centres in Nepal Although there is an oversupply of newly qualified nurses in hospitals in Kathmandu, the staffing situation outside the valley is undesirable.¹²

Employment problem:

The nurses who have a high demand in global markets are facing problems in getting a job placement in their own country. Despite the huge number of hospitals many nurses are still lacking the job placement. The reason behind this could be massive production of nursing colleges due to which nursing products are in increasing state thus only few getting opportunities. Hospitals are running with inadequate number of nursing staffs in spite of huge patients' flow and at the same time not maintaining nurse patients' ratio.¹¹

Recruitment issues:

There are different recruitment issues in the health sector of the country. Insufficient competencies in providing services, narrow skill mix of the workforce, and uneven distribution of trained human resources, improper HR management and political influence are the key issues. Similarly commonly observed problem areas in HR management in the public sector in Nepal are recruitment, legislation, discipline, development, training, rewards, and promotions.¹³

References:

1. Bermen A, Snyder sj, Koziar B, Erb G. Fundamental of Nursing. 8thed. India: Dorling Kindersley; 2008.
2. Dunphy LM, Winland-Brown JE. The art and science of advanced practice nursing. 3rd ed. Davis;2011.
3. Jose P. Nursing education in future perspective. Journal of Universal College of Medical Sciences. 2014;2.
4. Sigdel R. Nursing education in Nepal historical perspective. 2011; 10. Available from: www.nphss.org.np/archive_2011/89-90.pdf
5. KC T. Status of nursing education in Nepal. Journal of the Nepal Nursing Council. 2015;9
6. Top Issues for Staff Nurses - American Nurses Association. Available from: www.nursingworld.org > Staff Nurses
7. Mehta S.R., Pokharel T. Leadership & Management. 3rd ed.

- Nepal: Sopian Press Private Ltd; 2012
8. Heller BR, Oros MT, Crowley JD. The Future of Nursing Education: Ten Trends to Watch. Available from: faculty.ksu.edu.sa/.../Medical%20Education...
 9. Fute M, Mengesha ZB, Wakgari N, Tessema GA. High prevalence of workplace violence among nurses working at public health facilities in Southern Ethiopia. *BMC Nurs.* 2015;14:9.
 10. International Labour Organization. Migration of health workers from Nepal; 2017.
 11. Paudel K. Report on status of nurses in Nepal; 2010. Available from: library.nhrc.org.np:8080/nhrc/.../628.pdf?...
 12. Adhikari R. Vacant hospitals and under-employed nurses: a qualitative study of the nursing workforce management situation in Nepal. *Health Policy Plan.* 2015;30(3):289-97
 13. Global health workforce alliance. NEPAL: STRENGTHENING INTERRELATIONSHIP BETWEEN STAKEHOLDERS. Available from: http://www.who.int/workforcealliance/knowledge/resources/CCF_CaseStudy_Nepal.pdf?ua=1