Role of Nurse Leadership to Evaluate the Current Status of Nurses with a View to Invest in Nursing to Secure Global Health – An Exploratory Approach

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Abstract

There is an opportunity for nurses to better explain what we do, to break the myths around nursing and to advocate for investment in the profession. This study endeavoured to explore the role of nurse leadership to invest in nursing to secure global health and to identify role of nurse leaders according to their demographic variables. An exploratory sequential mixed method research design was selected in this study. Through purposeful sampling, the researcher selected 60 nurse administrators. Data was collected from the nurse administrators in the form of an electronic survey and virtual face-to- face semi structured interview method after obtaining a formal permission. The data collected from them was utilised only for the purpose of the study and was kept confidential. The final analysis summarised the findings that emerged from both quantitative and qualitative data. In the present study there were 50 (83.3%) females and 10 males (16.7 %) and them had nurse administrators 52(86.6%) of experience. The results covered the issues like current status of nurses, ways and benefits to invest in nursing for global health and the role of nurse leaders in investing in nursing for global Health. Nurses are the head honchos and lifeline of health-care organisations but still lack recognition. Concern on this has been expressed by many, but till date no strong visible implementation of laws and policies are seen. Nurses need to take initiation and leadership at higher levels to bring change in the existing scenario and implement the recommendations regarding basic pay and maximum working hours per week.

Key words: Nurse leadership, Current status of nurses, Global health

There are more than 20 million nurses across the world and each one of them has a story. They know about hope & courage, joy & despair, pain and suffering and life & death. As an ever-present force for good, nurses hear the first cries of newborn babies and witness the last breath of the dying. They are present at some of life's most precious moments and at some of its most tragic ones.

The public is not used to viewing nurses as leaders and not all nurses begin their career with thoughts of becoming a leader. All nurses must be leaders in the design, implementation, and evaluation as well as advocacy for the ongoing reforms to the system that will be needed. Additionally nurses need leadership skills and competencies to act as full partners with physicians and other health professionals in redesigning and reforming efforts across the health care system. Nursing research and practice must continue to identify and develop evidence-based improvements and these improvements must be tested and adopted through policy changes across the health care system.

Nurses advocate for their patients around the world. Fundamental respect for safe work environment, access to vaccinations, decent working conditions and fair compensation for nurses is paramount. Investing in nursing education, jobs and leadership is investing in national and world health, including our daily needs. Decisions driving investment and policy commitments must be expedited to stabilise our global health and workforce gaps. Invest in nursing, respect nurses rights, nurture and support the profession that cares for the world, your countries, your communities, your families and yourselves.

Leadership does not occur in isolation. Nurse Leaders influence change by helping group members to accomplish their objectives. Nurses are catalysts for positive transformation to repel the

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forces that threaten global health and build strong healthcare systems. We have seen the evidence and understand the need for investment. Now it is the time for action.

Every day nurses across the world overcome incredible challenges to care for their patients and communities. These challenges have been highlighted during the past three years due to COVID-19 pandemic. Several reports bring out the issues being faced by the nursing profession such as the global nursing shortage, the ageing nursing workforce, the mass traumatisation of nurses, the lack of protection, the increasing workloads and low salaries all of which call for investment in the nursing workforce to meet healthcare needs now and in the future.

In 2022 International Nurses Day report focused on four policies: education, jobs, leadership and service delivery. It discussed the benefits of investing in evidences of underinvestment, expected outcomes of meaningful investment as well as the actions required for successful delivery and monitoring of these priorities.

Statement of the problem: Role of nurse leadership to evaluate the current status of nurses with a view to invest in nursing to secure global health – an exploratory approach.

Objectives

- To explore the role of nurse leadership to evaluate the current status of nurses to invest in nursing to secure global health.
- To identify the role of nurse leaders to evaluate the current status of nurses to invest in nursing to secure global health according to respective demographic variables.

Review of Literature

Jane Salvage & Jill White (2020) conducted a study, Our Future is Global: Nursing Leadership and Global Health. Global health matters to every nurse everywhere.

In this article we outline why. Some important health issues confronting the world today; explore how these issues are being tackled, and consider their implications for nursing. It has been described how nurses are making a difference in the challenging contexts, range and complexity of nursing work round the globe, and concluded with a call to action. Nurses can influence, and become, policy-makers and politicians, and show why the Sustainable Development Goals (SDGs) cannot be reached without strengthening nursing. In this International Year of the Nurse and Midwife, Nurses and midwives globally and locally must be ready to jump through it. We ask you to join hands us.

Methodology

Research design

An exploratory sequential mixed method was used.

Samples

The sample size was 60 nurse administrators under different cadre.

Sampling technique

Purposive sampling technique was employed.

Settings of the study

Nurse administrators of hospitals, colleges and schools of nursing from south India.

Inclusion Criteria: Nursing superintendants, Deputy nursing superintendents, Assistant nursing superintendents, nurse supervisors of different hospitals, Principals, Vice principals and professors of Schools and colleges of nursing from South India.

Exclusion Criteria: Nurse administrators who are not willing to participate.

Procedure for data collection

- Data was collected from the nurse administrators after obtaining a formal permission.
- Each administrator was assured that data collected from them shall be utilised only for the purpose of the study and kept confidential. Investigators used virtual face-to-face semi structured interview method to collect data. Each sample took 20-25 minutes.

Analysis

Quantitative and Qualitative Data Analysis

Results and Discussion

The results are presented according to the derived prepositions (1) current status of nurses (2) ways and benefits to invest in nursing for global health (3) Role of nurse leader in invest in nursing for global Health.

Preposition 1: Current status of nurses

The majority of the respondents (n=57, 95%) held the view that the number of registered nurses is inadequate. Several factors are accountable for this in the opinions of the respondents. Notable among them include the following: nurses exiting bedside nursing and retirements.

This is what one participant typically said: "Patients in hospitals are more than the recommended nurse-patient ratio. If you want to give quality care, then the recommended nurse-patient ratio should be maintained.

Almost all the nurse administrators i.e. 56 (93.3%) have the opinion of lack of recognition as

Table 1: Distribution of demographic variables

Demographic data	Frequency	Percentage
Age (years)		
30 - 40	10	16.7
41 - 50	40	66.7
> 50	10	16.7
Gender		
Male	10	16.7
Female	50	83.3
Education		
Diploma	5	8.3
Graduation	25	41.7
Post-graduation and above	30	50
Working area		
Academic	24	40
Clinicals	36	60
Year of experience		
6 - 9	8	13.3
10 - 15	25	41.7
> 15	27	45

a member of health care team, lack of autonomy in practice, unfair pay, excessive work load, work stress, discrimination and humiliation from patients and healthcare team members. These factors contribute to the cause of nurses exiting bedside nursing.

Almost all the respondents (n=50, 83.3%) were concerned about long working hours. It is quite difficult for a nurse to provide efficient nursing care with exhausted state of mind and body. A deputy chief nursing superintendent thus shared her story about her administrative life: "I'm under the strict control and influence of the hospital administration which is mostly run by doctors. Although I need to follow policies, I'm still facing issues in my nursing administration in implementing recommended maximum working hours per week, sanctioning sick leave/paid leave and also to resolve issues of sensitive nature of nurses".

Inadequate supply of basic consumables were noted to have hampering effect. A participant expressed frustration about the unavailability of water, liquid soap, gloves, mask, etc. which affects the process of effective nursing care.

Few administrators (n=20, 33.3%) mentioned that poor educational infrastructure and resources for clinical skills teaching, lack of promotion and opportunities for teaching faculty are the problems of nursing education.

Preposition 2: Ways and benefits to invest in nursing for global health

Majority of the administrators (n=53, 88.3%) suggested that Nursing regulatory bodies and the health ministry of India need to take the lead for bringing change in licensing structure for RNs cadre. Also implementation of recommended basic pay scale in private hospitals/colleges and implementing recommended working hours that is maximum 40 hours per week.

Licensing system should be improvised with the provision of standardised skill assessment before considering eligibility to practice as RN and independent nurse practitioner.

Some of the respondents (n=47, 78.3%) suggested that nurses must invest in research and Continuous Nursing Education activity such as leadership development programmes because it helps them to advance their field to stay updated and offer quality patient care.

Almost all the nurse administrators were in favour of investment for adequate staffing and occupational health as well as prioritising safety with special efforts. Increment and other allowances should be granted regularly to attract, retain and motivate nurses.

Majority of the respondents (n=36, 60%) suggested that nursing educational institutions should strengthen their capacity by addressing inadequacies in faculty numbers, infrastructure limitations and the availability of appropriate clinical practice sites.

Preposition 3: Role of nurse leader to invest in nursing for global Health

Majority (n=50, 83.3%) conveyed about the limitations of nurse leaders, and absence of nurse politicians to formulate policies and legislations related to nursing profession, which is an issue to be addressed.

Key respondents (n=47, 78.3%), commented that nurses are confident and articulate to participate in policy conversations, solution framing, management and performance of health systems.

Majority (n=45, 75%) of respondents are not participating in lobbying due to lack of awareness, skills, resources, support and less opportunity and remaining (n=15, 25%) not responded towards lobbying. A head nurse explained her position: "I've been working as a nursing supervisor in this hospital since 20 years but I have to follow and maintain the power structure of the work environment because if I say something this administration will sue me. That's why most nurses stay quiet and don't express their issues to others, to save their job".

Almost all the key informants were of the opinion that nurse leaders have an important role in improving the current status of nurses with a view to invest in nursing to secure global health.

Nurses are key providers in primary healthcare comprising 60–80 percent of the total health system workforce and provide 90 percent of all healthcare services. They have an important role in solving present and future global health problems. However, their role in practice such as policy forums and influential decision-making institutions in global health sector is limited.

The ICN report of 12 May 2022 specifies the need to invest in nursing education, jobs, leadership, service delivery, safety of nurse, care for health and well being of nurses. In this study Nursing administrators expressed the need to focus on research, continuous nursing education programmes, implementation of standard recommended working hours, basic pay scale for private nurses, nurse-patient ratio and prevention of discrimination and humiliation from other health care members.

Recommendations

- In the light of the our findings, it can be stated that there exists a need to encourage the nurse leaders to raise their voice loudly to solve the current status of nurses.
- Similar study can be replicated on a large sample to increase validity and generalisation of findings.

Implications for nursing, health and social policy

This study promotes the concept to deliver quality health services in hospitals and to improve the social status of nursing in India. It provides influential evidence to policymakers who should urgently address issues of nurses at workplace like health and safety, exploitation by retaining for excess working hours and below par pay scale as a global right.

Limitations

- Small number of samples limits generalisation of research findings, hence long-term follow-up could not be carried out due to time constraints.
- The study is exposed to the inherent weaknesses of qualitative studies, such as limited interpretations, difficulty to verify findings, not statistically representative and inability to generalise findings.

Strength

This qualitative approach provided an open field to study subjects and allowed them to express their feelings and ideas.

Conclusion

Nurses are the Leaders, and lifeline of health-care organisations but still lack recognition. Concern on this has been expressed by many, but till date no concrete implementation of laws and policies is in view. Nurses need to take initiative and leadership at higher levels to bring change in the existing scenario and implement the recommendations regarding basic pay and maximum working hours per week. Collaborative working model of nurses and doctors with mutual respect would reflect positively on the health outcomes of the country.

Ethical consideration

Informed consent was obtained from the institution authorities and subjects' privacy, confidentiality and anonymity also guaranteed. Scientific objectivity of the study was maintained with honesty and impartiality.

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