Career Promotions: A Challenge for Nurses in the National Health Care System of Pakistan

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Abstract:
Career planning and promotions creates enthusiasm, and results in high potential and benefits for both employee and organization (Moses, 1999). Career promotions bring a positive relation and develop a loyalty, and dedication of the employee with organization. As highlighted by Donna Wilk Cardillo that “Nurses are the heart of healthcare system”. Career promotion also plays a major role in developing enhancing nurse performances and uplifting the health care system. The purpose of the paper to present a conceptual study established on the career promotion, nurses and National Health System (NHS) and aims to identify the issue of career promotion and its impacts on nurses’ and role of NHS of the Pakistan. The issue will be described and analyzed by using Adam’s motivational theory of leadership and management. The severity of issue will be measured by comparison of career pathways, policies and criteria’s of different professionals at national and international levels through evidence based literature, Additionally, strategies for solving problem and recommendations for developing policies to be addressed

Key words: Career promotions, Equity, Job-Satisfaction, National Health Care System, Nurses, Policies

Scenario:
Few days back, I got experienced nearby press club of Karachi, and saw an impressive attendance of nurses wearing the white uniform holding play cards, posters, protesting for their rights, and expressing their views and demanding for their due promotion, and polices for career pathway. Nurses’ were speaking for promotions identical to other health professionals of the country which depends upon their experience, education, and contribution to field, but in return police pushing them back and resisting from protest. It bring a concept to me that nurses are facing many issues among all career promotion is leading one.

Introduction:
I would like to begin with the words of Whitney Johnson, “When you disrupt yourself, you are looking for growth, so if you want to muscle up a curve, you have to push and pull against objects and barriers that would constrain and constrict you. That is how you get stronger.” Health care system is growing rapidly worldwide, and Pakistan is also contributing its efforts to uplift the healthy life style of the people, and it is designed to focus on target population in a manner of health care needs. Healthcare professionals are playing their part in order to improve health statistics of population (Bahalkani et al., 2011). As Like other health professional, nurses are dedicated individuals’ and play a key role in care for achieving the health of individual, families and communities, and being playing major roles in country’s health system, nurses are not treated as other professionals. Equally career opportunities for professionals proved to play a basic role in task achievements (Joyce & Showers, 2002; Shields, 2001). Lack of opportunity for career promotion for nurses is the one of reason for job dissatisfaction, stress, withdrawal from profession, and barrier in attaining health tasks. It is not possible to achieve task by avoiding the competencies, skills of the employees, and goal cannot be gained without self-satisfaction of employees (Bahalkani et al., 2011). The rationale for career promotions is that, it is a source of motivation, inspiration for nurses, and it is positively associated with increased job satisfaction. It decreases the level of turnover, increased efficacy, effectiveness, and positive outcomes for health care agencies of
Caring is the fundamental and principal force to become nurse. Lack of opportunities, improper and equal implementation of policies for promotion can bring barrier in professional and organization achievements (Puchalski et al., 2009). Career promotion is like a reward to nurses; it improves the health care system and increases the quality of care, and its lack impacts the outcomes (Dittrich & Carrell, 1979). It is an alarming sign for state, stakeholders and policy makers that nurses are not uniformly treated like other professionals, pushed backward, and being neglected for promotions.

**Literature Review:**

Career promotion on uniform basis plays a vital role in individual and organization achievements, and it boosts the individual satisfaction and organization goals (Schein, 1990). The Express tribunes article “Medical Professions-movement on promotions, allowance still an issue” on December 10, 2011, pointed that nurses’ of Pakistan are being neglected, and not uniformly promoted like doctors, engineers and other professionals. The total number of 11, 253 nurses are due for their promotion and struggling for career pathway, and about 300 are waiting for their promotion since 27 years, and currently this number is more than this digit. This amount is high enough in comparison with other fields, and it affects the professional career of nurses in Pakistan. Career promotion and incentives are the rights of professionals if it is not uniformly distributed to comparable professionals it can bring an adverse effect and impacts the quality of system (Kingma, 2003). Nurses are at the top compared to others who lacks proper career pathway, and worried about their promotions, career path way which eventually, results in uncertainty about future goals (Brown, 1992). An un-organized policy of career promotions for nurses seems to be barrier in their career. The Express tribune article “Protest time: In Pindi nurses demand better pay structure” by Wasif S on November 26, 2011, critically analyzed that nurses promotions and better pay structure are still hanging in the corridors of government. Majority of Pakistan nurses are unsatisfied with their career pathway and job structure, and requested to develop criteria for promotions like other health professionals.

The lack of uniformity among health professionals, lack of support from policy makers, and unavailability of career ladder for promotion are key factors for nurses of leaving the profession (Schein & Schein, 1978). A research study indicates that Pakistani nurses are facing multiple issues e.g. low salaries, lack of opportunities, and lack of career promotion disappointed them and limited the boundaries of nurse for future achievement (Bahalkani et al., 2011). Moreover, a report of WHO for Pakistan regarding strengthens the NHS, pointed that lack of good career structure, poor motivation for the health worker, unequal distribution of resources and lack of human resources policies are common in country and it is main barrier in achieving health related tasks. In order to improve the standards and quality of health system, the chance for career progression may not be decreased at any level of their life (Eley, Francis & Hegney, 2013). The Dawn News article “Nurses protest denial of promotion” on Dec 09, 2014, indicated that Pakistani nurses have issue of career promotion. Nurses are being neglected, and senior, experienced, and educated nurses are not being promoted like doctors and others. Hence, Poor policies always de motivate them. Equivalent career opportunities for all professionals proved to play a basic role in task achievements (Shields & Ward, 2001). In contrast, Pakistan has different scenario as mentioned in tribune article “Nursing in Pakistan: Handle with care” by Chauhan N on December 7, 2014, states that Pakistan health care system mostly focus on cure rather than care, it focal point are doctors than nurses, and nurses are being ignored in different manners. The different standards and unequal distribution of credits impacts the public perception about nursing. However, despite of ignoring nurses are contributing and playing a key role in providing quality care.

**Analysis with Implication of the Theory:**

While pondering upon the scenario, articles and evidence based literature it can be easily analyzed that our system is deficient in having uniform policies for different fields. The different professionals have different criteria, pathway, and standards for promotions. At one glance in depth can easily conclude the difference in career promotions. In Pakistan, almost all bachelor degree programs have identical credit hours and years of education despite this, nurses don’t have career pathways like other professionals, and uniformity is not followed both in both public and private sectors. Moreover, by looking the scenario I observed, Adam’s equity motivational theory can be applied to identify the severity of problem, and to induce a fair balance between the input and output of all professionals serving in Pakistan. Equity theory concentrates on employees’ contribution to work, and in return identifies the organization response to them. The response is in a manner of resources distribution, promotion, and achievements for their valuable contributions, which is type of motivation for them. Equity in a sense of career promotion can be easily measured through identifying the level of self-satisfaction. According to the study by Lu, While, & Barriball, (2005) in Scotland after 2000, various laws and policies been developed on equity basis among all employees of the state. After implementation, now successfully they have greater level of satisfaction among all employees working in different dimensions, which in turn able to develop advanced NHS and other systems. Unfortunately, equity principles are not followed at Pakistan and one example is different criteria for lecturer of different fields. According to higher education commission (HEC) guidelines for criteria and promotions, university is liable to provide BPS- 18 to professionals working as lecturer in different fields. But, universities are appointing nursing lecturers in BPS-17 grades, and medical and engineering lecture in BPS-18. Another example, from HEC act that newly appointed doctor will be promoted to resident medical officer (RMO) after five years of working experience. However, about 300 staff nurses are waiting for promotion since last 27 years (Express tribune, 2011). These two examples indicate that equity in a way of career progression is not followed in our system. The implementation of equity motivational theory by leaders and managers will be helpful in identifying the severity of issue, and resolving the issue.
Equity principles change the results from good to best, bring the change in organization and increase employees' level of satisfaction (Dittrich & Carrell, 1979). India concentrated on equity principles, and developed career pathway for nurses like other professionals, and according to the Indian nursing and midwifery journal (2008), nursing sister will be promoted to deputy nursing superintendent/matron with only five years of experience after BSN. The criterion for chief nursing officer is MSc nursing with ten years of experience as DNS or five years as NS. It is applicable not only for state government hospitals, but also private, and autonomous hospitals. Unfortunately, Pakistan doesn't have such implementation of career pathway and policies for nurses. The role of nurses are self-explanatory evidence of their performance in health care system despite their valuable roles; our NHS is not concentrating on providing the equal powers and promotion to them as to doctors and others. However, restrictions in career progression of nurse did not impact their performance and role to serve for human beings. Carrell and Dittrich (1978) highlights that “employees who perceive inequity will seek to reduce it, either by distorting inputs or outcomes in their own minds (“cognitive distortion”), directly altering inputs or outcomes, or leaving the organization.” It predicts that lack of opportunity for promotion might impacts the profession in future, and forces the nurses to leave profession, which in turn contributes to nurses' shortage. Career progression is a natural state correlated to satisfaction of job (Ewen, 1964). Career promotion is driving force for job satisfaction, and to be on uniformity basis can generates strong relationship among employees, and cohesive relations among employees in health care system will be helpful to achieve required health indicators sooner.

The above evidences reveals that world is focusing on motivating the employees through appraisal, incentives and promotion in order to get better results in multiple fields. Adam’s equity motivational theory can be easily implemented to get better results. Equity principles are applied to create strong relationship, improve the outcomes and increase the standards of fields. Equity in a way of career promotion, and resources management can boost the skills, talent of nurses’, and which in turn improve the efficacy, effectiveness and quality of care. Career promotion on identical basis is a road map towards individual, professional and organizational success (Dittrich & Carrell, 1979). However, our country policies and HEC guidelines do not supports the equity among all professionals and consequently, nurses are major victims of poor policies, unavailability career ladder and promotions.

Recommendations:

There are multiple ways to develop pathway for career promotion, to bring self-satisfaction, and equity for nurses and other professionals. It can bring quality care service by using different strategies like rewarding with praise, responsibilities, incentives, and opportunities. Government officials, stake holders, and policy management team should take an interest in issues of nurses and plan for developing the career pathway for promotion and other matters. Policies to be developed on equal basis like other professionals, and are required to be implemented in both public and private sectors. The developed policies are distributed among all public and private organization and are instructed to follow the policies. The policies must focus the education, experience, knowledge, contribution to work and performances. The strategies be made to evaluate the performance, and documented in order to provide the appraisal, promotions, and higher position. A monitoring team is to be developed to assess the performances. Policies must reflect parallelism with other professionals working in different fields. It will defiantly increase the graph of satisfaction of nurse, career achievements, and brings positive outcomes in health sector of country. Policies and its implementation for all professionals on equally bases will helpful achieving state goals.

Conclusion:

Career promotion is one of the best tool to retain nurses, to attain health goals, and to create positive bonding between employees. It is significant for individual, professional, and organizational achievements. It brings a positive public perception of nursing, increased enrollment in nursing, and eventually decreases in nurses’ shortage. Career promotion is helpful in improving the performance, attaining health indicators and achieving health outcomes of country. Policies to be planned developed, and implemented on uniform basis among all professionals in both government and private health care systems. To conclude, career promotion is driving force in development of competent nurses and optimizing the health care system. It not only benefits the nursing profession but also NHS in achieving present and future aspiration as well. Thus, it is beneficial in multiple ways and significant in increasing the efficacy, effective and quality of care.

Conflict of Interest:

I have no any competing or conflict of interest.

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References:

1. Bahalkani, H. A., Kumar, R., Lakho, A. R., Mahar, B., Mazhar, S. B., & Majeed, A. (2011). Job satisfaction in nurses working in tertiary level health care settings of Islamabad, Pakistan. J Ayub Med Coll Abbottabad, 23(3), 130-133.
2. Brown, M. (1992). Nursing Management: Issues and Ideas. Jones & Bartlett Learning.
3. Dittrich, J. E., & Carrell, M. R. (1979). Organizational equity perceptions, employee job satisfaction, and departmental absence and turnover rates. Organizational behavior and human performance, 24(1), 29-40.
4. Eley, R., Francis, K., & Hegney, D. (2013). Career progression: the views of Queensland’s nurses.

5. Ewen, R. B. (1964). Some determinants of job satisfaction: A study of the generality of Herzberg’s theory. Journal of Applied Psychology, 48(3), 161.

6. Executive, S. (2006). Modernising nursing careers: setting the direction. Scottish Executive, Edinburgh.

7. Joyce, B. R., & Showers, B. (2002). Student achievement through staff development. Ascld.

8. Kingma, M. (2003). Economic incentive in community nursing: attraction, rejection or indifference?. Human Resources for Health, 1(1), 1.

9. Lu, H., While, A. E., & Barriball, K. L. (2005). Job satisfaction among nurses: a literature review. International Journal of Nursing Studies, 42(2), 211-227.

10. Moses, B. (1999, February 1). Career planning mirrors social change. The Globe and Mail [On Line]. Retrieved August 18, 2016 from the World Wide Web: http://www.bbmcareerdev.com/careerplan.html

11. Puchalski, C., Ferrell, B., Virani, R., Otis-Green, S., Baird, P., Bull, J., ... & Pugliese, K. (2009). Improving the quality of spiritual care as a dimension of palliative care: the report of the Consensus Conference. Journal of Palliative Medicine, 12(10), 885-904.

12. Schein, E. H. (1990). Career anchors and job/role planning: The links between career pathing and career development.

13. Schein, E. H., & Schein, E. (1978). Career dynamics: Matching individual and organizational needs (Vol. 24). Reading, MA: Addison-Wesley.

14. Shields, M. A., & Ward, M. (2001). Improving nurse retention in the National Health Service in England: the impact of job satisfaction on intentions to quit. Journal of Health Economics, 20(5), 677-701.