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FACTORS CONTRIBUTING TO INCREASE NURSING SHORTAGES AMONGST NURSES WORKING IN PRIVATE AND PUBLIC TERTIARY CARE HOSPITAL KARACHI, PAKISTAN.

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ABSTRACT

Objective: To determine the factors contributing to increase nursing shortages in public and private tertiary care hospitals, Karachi Pakistan.

Introduction: Nurses are a significant part of the healthcare system; however currently healthcare is suffering from shortages of nurses into their profession which leads in compromise of the patient-care system and health related outcome.

Methodology: An analytical Cross-sectional study was conducted amongst 140 nurses through convenient sampling technique and self-structured questionnaire.

Results: The results revealed that, shortage of nurses was identified more on female 76 (54.3%), married71 (50.7%) women whose age between 21-30 53 (37.9%), had more than 1-5 years of

experience 59(42.1%) in the position of staff nurse 105(75%) who strongly agree; that shortage of nurses impact the quality of patient care 52 (37.1%), insufficient government funding59 (42.1%), limited availability of nursing education system 59 (42.1%), lack of career advancement 51(36.4%), absence of rewards and appreciation54(38.6%), staff safety 46(32.9%), lower census of nursing staff lead to increase stress and burnout among nurses 49 (35%), government, healthcare institutions, & educational bodies address the shortage of nurses51(36.4%); Public awareness about the importance and role of shortage of nurses 56 (40%), all were contributing factors which trigger or cause nurses to leave the profession or migrate into another country to avail good incentives and better opportunities. Besides, Spearman Correlation showed dependent variables are significantly associated with each other.

Conclusion: The nursing profession is compromised by the shortages of bedside nurses which directly impacts on patient-care and health system of the country.

Keywords: Nurses, Shortage, Patient Care, Government Funding, Rewards and Appreciation

INTRODUCTION

Vital component of every medical department, nurses, are the backbone of the healthcare system. However, a lack of nurses is currently causing a scarcity in the nursing field, which compromises patient care and health outcomes. According to American Association of Colleges of Nursing (AACN), the number of unemployed nurses is expected to rise from approximately 40,000 in 2010 to nearly 80,000 by 2020. This is a critical issue that could potentially increase patient morbidity and mortality rates worldwide.² Similarly, World Health Organization (WHO), expects that there will be a shortfall of 7.2 million health care workers to offer health care services worldwide by 2035, with a demand for nursing reaching 12.9 million.³ As, previous study carried out in the public sector of Lahore found that Pakistani nurses face the number of challenges in the healthcare setting including; verbal abuse from medical professionals, heavy workload due to the organization's failure to hire new staff in the previous five years, lack of support from the organization, conflicts with supervisors or head nurses, dearth of resources, lack of recognition and opportunities for advancement and limited educational opportunities; all these factors trigger nurses to turnover from their profession. ⁴Likewise, in the same context, the current bedside nurse-patient ratio is approximately 1:40; this means that the bedside nurse is responsible for all actions related to their patients including head-to-toe care, medication, surgical procedures and vital sign monitoring, though these factors can easily lead to compromised quality care, which in turn raises the mortality and morbidityrate.⁵ Therefore, to reduce the shortages of nurses Pakistan Nursing Council (PNC) recommended that the nurse-patient ratio should be about 3:10 in health care sectors.⁶

Moreover, descriptive correlation research studies also revealed that organizational factors such as job satisfaction (32.60%), staff recognition (34.80%), work environment (29.8%), workload (53.90%), and turnover rate (79.90%) all contributed to an increase of nursing shortages amongst 141 nurses at Lahore, Matai General Central Hospital, because these are the things that make nurses to quit their jobs and have a detrimental impact on patients care and their safety. Additionally, the study was carried out in Lebanon, where a shortage of nurses had a negative impact on the safety and quality of care provided to their patients, because of not getting enough incentives and benefits within the country (72.8%), leaving to abroad (60.3%), and lack of opportunities for professional growth and career advancement (55.9%). Pertaining to the cross- sectional quantitative study conducted in city of Brazil and Campo Grande in 2018, on 80 nurses where they reported nurses were suffering more from verbal abuse (90%), fear of aggressor from patients (15.3%), anxiety(14.9%), sadness(15.8%), and Physical violence (17.5%), stress (22%),low level of self-esteem (18.5%), and mainly female nurses 5.83 time higher from verbal abuse than male nurses which generate turnover and an intention to leave the profession frequently.

According, to the above evidence-based research studies, there are the dearths of nurses' increases worldwide due to which patients are neglected and also compromised in health care. Even the health

care systems are concerned about patients compliant of not getting enough nurses. Hence, this study will be take place in Private and Public tertiary care to pinpoint the causes of the nursing shortage in our current environment in order to overcome the issues caused by it and improve patient care and safety.

METHODOLOGY:

Study Design and Setting:

The Descriptive Analytical Cross sectional study was conducted in both Private and Public tertiary care hospitals which were residing in Karachi, Pakistan.

Sample Size:

The sample size was calculated based on the proportion of nurses working at 5% Level of Significance, 95% of Confidence Interval. The minimum 140 sample size was collected from both private and public tertiary care hospitals Karachi, Pakistan. Raosoft.com/samplesize.html version 2007 software was used to calculate the sample size.

Data Collection Technique:

Data was collected through Self- Structure Questionnaire by visiting the selected hospitals and formal permissions were granted through official correspondence.

Inclusion and Exclusion Criteria:

Staff nurse, head nurse, nurse manager, and matron were included in this study criteria whereas nursing assistants, technician, and part time nurses and nursing student, and those who were not given the consent were excluded in this study setting.

Data Analyzed:

The data analyzed on SPSS licensed V-16 software. Percentages and Frequencies used to describe socio demographic characteristics. The quantitative variables will be calculated by using Charts, Graphs and Frequency tables, included; Binary Logistic regression, and Spearman Correlation was also used in the inferential statistics. Moreover, the reliability of questionnaires were assessed through Cronbach alpha and it was 0.88.

Ethical Consideration:

Ethical approval was obtained from Ethical Review Committee (ERC) of the College of Nursing, (Female) Dr. Ruth K.M Pfau Civil Hospital Karachi. Participants were informed about the purpose of the Studied and written consent was taken. An autonomy ethical principle was used to collect the data respectively.

RESULTS:

Variables	Characteristics	Frequencies	Percentages
Gender	Male	64	(45.70%)
	Female	76	(54.30%)
Age	21-30 years	53	(37.90%)
	31-39	28	(20%)
	40-49	37	(26.50%)
	50- 60	22	(15.70%)
Marital status	Married	71	(50.70%)
	unmarried	60	(42.90%)
	Widows	06	(4.30%)
	Divorced	03	(2.10%)

Professional Education	Diploma	72	(51.40%)
	Bachelor Degree	63	(45%)
	Master in Nursing	05	(3.60%)
	PHD	Nil	Nil
Employment Status	Permanent	104	(74.30%)
	Temporary	36	(25.70%)
Current Work Position	CNS	01	(0.70%)
	Matron	03	(2.10%)
	Supervisors	08	(5.70%)
	Head Nurse	32	(16.40%)
	Staff Nurse	105	(75%)
Work Experience	1-5years	59	(42.10%)
	6-10years	34	(24.30%)
	11-15years	18	(12.90%)
	More than 15 years	29	(20.70%)
Hospitals	Public	90	(64.30%)
	Private	50	(35.70%)

Table 1: Socio-Demographic Data

In terms of the demographic aspect of the respondents there were 76(54.3%) female married 71(50.7%) between the age of 21-30 years 53(37.90%), Diploma Nurses 72(51.4), who were permanently 104 (74.3%), staff nurse 105(75%), had 1-5 years of working experience 59(42.1%) working in Public and Private tertiary care hospital.

variables	strongly Agree	Agree	Neutral	Disagree	Strongly Disagree
There is a noticeable shortage of nurses in health care facilities in Pakistan	48(34.3 %)	44(31.4%)	39(27.9%)	6(4.3%)	3(2.1%)
The shortage of nurses in Pakistan that impacts the quality of Patient care.	52(37.1%)	47(33.6%)	32(22.9 %)	2(1.4%)	7(5%)
Insufficient government funding for healthcare is a primary cause of nurse shortages.	59(42.1%)	39(27.9%)	32(22.9%)	5(3.6%)	5(3.6%)
Limited availability of nursing education program contributes to the shortage of nurses.	59(42.1%)	27(19.3%)	43(30.7%)	6(4.3%)	5(3.6%)
Higher salaries and improved benefits would attract individuals to pursue nursing careers in Pakistan	45(32.1%)	44(31.4%)	37(26.4%)	8(5.7%)	6(4.3%)
Better working conditions and facilities would help retain more nurses in the profession in Pakistan.	57(40.7%)	45(32.1%)	29(20.7%)	5(3.6%)	4(2.9%)
Public awareness about the importance and role of nursing could help alleviate the shortage in Pakistan.	56(40%)	33(23.6%)	40(28.6%)	6(4.3%)	5(3.6%)

Lack of opportunities for career advancement in nursing discourages individuals from entering the profession in Pakistan.	51(36.4%)	42(30%)	35(25%)	7(5.0%)	5(3.6%)
Overall, addressing the shortage of nurses in Pakistan require collaborative efforts the government, healthcare institutions, and educational bodies.	51(36.4%)	38(27.1%)	42(30%)	4(2.9%)	5(3.6%)
Rewards and appreciation would encourage nurses to motivate within their work?	54(38.6%)	47(33.6%)	32(22.9%)	01(0.7%)	6(4.3%)
Staff shortages lead to increased stress and burnout among nurses.	49(35%)	43(30.7%)	38(27.1%)	6(4.3%)	4(2.9%)
Patient safety is at risk due to nursing staff shortages.	46(32.9%)	45(32.1%)	41(29.3%)	5(3.6%)	3(2.1%)
The hospital provides a safe working environment even when under staffed.	49(35%)	37(26.4%)	36(25.7%)	5(3.6%)	13(9.3%)
Have an adequate resource to cope with the challengesposed by nursing shortages.	27(19.3%)	49(35%)	48(34.3%)	7(5.0%)	9(6.4%)
Supervisors and head nurse ensure you that workloads are distributed amongst the nursing staff as equally.	48(34.3%)	39(27.9%)	38(27.1%)	05(3.6%)	10(7.1%)

Table 2: Factors of Shortages of Nurses amongst n=140 Nurses in Both Tertiary Care Hospitals.

From table 2, In terms of the analysis it revealed that there was around 48(34%) increased shortage of nurses in health their care setting. This shortages had a significant impact 52(37%) on the quality of patient care, as the major cause that had been revealed from this study was getting insufficient funding from the government59 (42.1%), Proper education and training of the nurses was very effective to overcome this shortages 59 (42%). Additionally, 57(40.7%) of the participants emphasizes on providing better working conditions and secure environment can lead to retention of the nurses. The quality of patient care and nurse's education and training is observed to be 59(42.1%), insufficient government funding upon analysis found out be 59(42%), lack of reward system and motivation was the major contributing factor and is 54(38.6%), low or in competent salary is 45(32%), and lastly the major concerns was staff safety environment which 49(35%) was the very reason of nurses turnover and retention problem, all of which contribute to an increase in the desire to leave the profession. Overall the data reveals that 51(36%) participants believe that in collaboration with the government. Pakistan in terms of funds allocations, education system in providing training and conducting sessions, adequate resources and working condition can help overcome the shortage of nurses in both private and public sector of Pakistan, which will eventually attract more people in this profession in future and also it will provide a sense of motivation to the those who are already part of this field.

Table 03: Mean± SD of Factors That Contribute Towards the Shortage of Nurses

Table 03. Meun± SD of Pactors That					Stron	
Items	Strong ly agree	Agree	Neutr al	Disa gree	gly disag ree	Mean ± SD
There is a noticeable shortage of nurses in healthcare facilities in Pakistan	48 (34.3 %)	44 (31.4 %)	39 (27.9 %)	6 (4.3 %)	3 (2.1)	3.91± 0.992
The shortage of nurses in Pakistan Impacts the quality of patient care.	52(31. 4 %)	54 (38.6 %)	32 (22.9 %)	2 (1.4 %)	7 (5%)	3.96± 1.05
Limited availability of nursing education Program contributes to the shortage of nurses.	%)	27 (19.3 %)	43 (30.7 %)	6 (4.3 %)	5 (3.6%)	3.92± 1.10
Higher salaries and improved benefits would attract individuals to pursue nursing careers	45 (32.1 %)	(31.4 %)	37 (26.4 %)	8 (5.7 %)	6 (4.3%)	3.81± 1.08
Better working conditions and facilities would help retain more nurses in the profession in Pakistan.	45 (32.1 %)	57 (40.7 %)	29 (20.7 %)	5 (3.6 %)	4 (2.9%)	3.95± .966
Public awareness about the importance and role of nursing could help alleviate the shortage	56 (40%)	33 (23.6 %)	40 (28.6 %)	6 (4.3 %)	5 (3.6%)	3.92± 1.08
Lack of opportunities for career advancement in nursing discourages individuals from entering the profession	50 (35.7 %)	43 (30.7 %)	35 (25%)	7 (5%)	5 (3.6 %)	3.9± 1.06
Overall, addressing the shortage of nurses in Pakistan requires collaborative efforts from the government, healthcare institutions, and educational bodies.	51 (36.4 %)	38 (27.1 %)	42 (30%)	4 (2.9 %)	5 (3.6%)	3.90± 1.04
Rewards and appreciation would encourage nurses to motivate within their work?	54 (38.6 %)	47 (33.6 %)	32 (22.9 %)	1 (0.7 %)	6 (4.3%)	4.01± 1.01
Staff shortages lead to increased stress and burnout among nurses.	49 (35%)	43 (30.4 %)	38 (27.1 %)	6 (4.3 %)	4 (2.9%)	3.90± 1.02
Patient safety is at risk due to nursing staff shortages.	46 (32.9 %)	45 (32.1 %)	41 (29.3 %)	5 (3.6 %)	3 (2.1%)	3.9± 0.976
The hospital provides a safe working environment even when understaffed.	37 (26.4 %)	49 (35%)	36 (25.7 %)	5 (3.6 %)	13 (9.3%)	3.65± 1.18
Hospital Have an adequate resources to cope with the challenges posed by nursing shortages.	27 (19.3 %)	49 (35%)	48 (34.3 %)	7 (5%)	9 (6.4%)	3.55± 1.06
Supervisor or head nurse ensure you that workloads are distributed amongst the nursing staff as equally.	39 (27.9 %)	48 (34.3 %)	38 (27.1 %)	5 (3.6 %)	10 (7.1%)	3.72± 1.12

Insufficient	government	funding	for	44	54	32	5	5	
healthcare	is	a	(31.4	(38.6	(22.9	(3.6	(3.6%	3.9± 1	
primary caus	se of nurse short	%)	%)	%)	%))			

Table 03, aims to highlight the dissatisfying factors that contribute towards the shortage of nurses in a hospitals. These factors are derived from the responses of the population and are non-probing. The results from the survey revealed that 52(31.4%) respondent strongly agreed that shortage of nurses has positive impact on the quality of patient care. The average data of the factor shows the mean of 3.96 while the variations among the responses were approximately ± 1.05 . Similarly, in contrast to the factor which states that, limited education of nurses is one of the main cause of their shortage this has an average response rate of 3.92 mean while the variation is considered to be ± 1.10 , whereas 59 (42.1%) strongly agreed to it. 45 (32%) participant shows strong acknowledgement towards increased salaries and improved benefits in order to mitigate the shortage of nurses. The central tendency of the response rate is said to be 3.81 and the variation amongst is ± 1.08 . Furthermore, the idea of better working conditions would help retain the nurses is supported by 45 (32.1%) respondents while the average set of response revealed from the analysis is 3.95 and the variation is said to be \pm .998. In addition, respondents also shared that awareness amongst public through social media or technology could enhance the development of reputation in nursing profession 56(40%) therefore the fact that awareness about the importance of nurses could help the country to resolve the endemic issues; this shows a varying degree of ± 1.08 , while the means stands out to be 3.92. Rewards and appreciation plays a critical role in overcoming the shortage of nurses and is strongly agreed by 54 (38.6%) study population, in terms of difference of responses the mean obtain is 4.01 while the standard deviation is ± 1.01 . Due to the shortage of nurse's patient's life is at risk 46 (32.9%) strongly agreed to it while in summary of mean 3.9 and standard deviation ± 0.976 shows that participation are in favor of the resultant factor, 44 (31.4%) responses strongly agreed that insufficient government budget is a driving force towards the shortages of nurses; the representation of 1 standard deviation is clustered tightly to a mean of 3.9. Overall addressing the shortage of nurses in Pakistan requires collaborative effort of Government, Education system and health care institutions. Hence it is strongly agreed by 51 (36.4%) with an observed mean of 3.94 and overall addressing the shortage of nurses in Pakistan requires collaborative effort of Government, education system and health care institutions. Hence it is strongly agreed by 51 (36.4%) with an observed mean of 3.94 and scattered responses of ± 1.04 .

Table 04: Binary Logistic Regression of Socio-Demographic Variables

Age(years)	OR	95% C.I	P-value
21-30	0.856	0.207-3.547	0.831
31-39	0.724	0.148-3.533	0.689
40-49	0.774	0.177-3.39	0.734
50-60 (ref)			
Marital status			
Married	1.822	0.756-4.394	0.181
Unmarried (ref)			
Professional Education			
Diploma	0.123	0.022677	0.198
Bachelor degree	0.389	0.065-2.343	0.228
Master in Nursing (ref)	0.149	0.023958	
Work experience (years)			
1-5 years	0.123	0.022677	0.066
6-10 years	0.389	0.065-2.343	0.303
11-15 years	0.789	0.232-0.958	0.045
>15 years (Ref)			

*OR-odd Ratio, CI-Confidence Interval, P-value, <0.05 stands statically significant.

The results of binary logistic regression are presented in table 03 was carried out to analyze factors that were directly proportional towards the contribution of shortage of nurses and the result stands out to be significant with the study variable. The results postulate that the nurses who were relatively more experienced were the ones who leave the hospitals keeping every other factor constant. On the other side, age, marital status and professional qualification were not associated with the shortage of nurses.

Table 05: Spearman	Correlation	amongst De	pendent Variables

	Q1	Q2	Q3	Q4	Q5	Q6	Q7	Q8	Q9	Q10	Q11	Q12	Q13	Q14	Q15
Q1	1	0.189*	0.197*	0.38*	0.326*	0.361*	0.401*	0.303*	0.201*	0.219*	0.221*	0.196*	0.223*	0.088*	0.295*
Q2	0.189*	1	0.12*	0.428*	0.379*	0.311*	0.363*	0.348*	0.295*	0.363*	0.338*	0.123	0.198*	0.137*	0.384*
Q3	0.197*	0.12*	1	0.39*	0.421*	0.282*	0.477*	0.316*	0.314*	0.178*	0.126*	0.47*	0.344*	0.26*	0.421*
Q4	0.38*	0.428*	0.39*	1	0.583*	0.36*	0.566*	0.446*	0.459*	0.36*	0.343*	0.355*	0.285*	0.276*	0.408*
Q5	0.326*	0.379*	0.421*	0.583*	1	0.428*	0.711*	0.429*	0.615*	0.374*	0.377*	0.448*	0.304*	0.412*	0.56*
Q6	0.361*	0.311&	0.282*	0.36*	0.428*	1	0.386*	0.657*	0.365*	0.601*	0.63*	0.248*	0.575*	0.247*	0.238*
Q7	0.401*	0.363*	0.477*	0.566*	0.711*	0.386*	1	0.502*	0.674*	0.355*	0.351*	0.593*	0.376*	0.344*	0.491*
Q8	0.303*	0.348*	0.316*	0.446*	0.429*	0.657*	0.502*	1	0.42*	0.722*	0.707*	0.339*	0.542*	0.238*	0.306*
Q9	0.201*	0.295*	0.314*	0.459*	0.615*	0.366	0.674*	0.42*	1	0.574*	0.551*	0.568	0.346*	0.424*	0.375*
Q10	0.219*	0.363*	0.178*	0.36*	0.374*	0.601*	0.355*	0.722*	0.574*	1	0.875*	0.277*	0.538*	0.196*	0.216*
Q11	0.221*	0.338*	0.126	0.343*	0.377*	0.63*	0.351*	0.707*	0.552	0.875*	1	0.263*	0.548*	0.23*	0.218*
Q12	0.196*	0.123*	0.47*	0.355*	0.448*	0.248*	0.593*	0.339*	0.567*	0.277*	0.263*	1	0.63*	0.643*	0.423*
Q13	0.223*	0.198*	0.344*	0.285*	0.304*	0.575*	0.376*	0.542*	0.346*	0.538*	0.54*	0.63*	1	0.552*	0.259*
Q14	0.088*	0.137*	0.26*	0.276*	0.412*	0.247*	0.344*	0.238*	0.424*	0.196*	0.23*	0.643*	0.552*	1	0.259*
Q15	0.295*	0.384*	0.421*	0.408*	0.56*	0.238*	0.491*	0.306*	0.375*	0.216*	0.218*	0.423*	0.259*	0.251*	1

In summary of the above table 05, the correlations between the study variables were positive at a value of +1. The value of +1 shows a perfect association among the study factors while -1 shows a negative correlation between the study items. According to the analysis it is perceived that the factors have a positive correlation between dependent variables, while it demonstrates that the nursing shortage would be overcome through better working conditions, motivation, eliminating growth barriers, decreasing burnout and stress among staff, ensuring safety, overcoming funding issues and providing work life balance.

DISCUSSION

For decades, nurses have been providing essential services in the realm of health care sector. The demand for nurses and paramedics has increased over time due to an increase in demand for health care facilities. This increased demand from the system is resulting in a decreased availability of human resources in the field. In today's world, nurses are required to work in hospitals, nursing homes, and community settings as community service providers, as well as to educate and progress research in their specialty. In this review, the result postulates that the demand of nurses have doubled and the nurses with more than 11 years of experience are more concerned about it.¹⁰

As, very eloquently mentioned in one of the study that, shortage of nursing is not just a governmental challenge or a topic for financial analysis; it has a catastrophic impact on overall health care system of a country. Though, this study is related to the current study that nurses strongly agree to not getting financial support from the government, and neither getting enough grant for their growth and development in nursing profession.

The nurse workforce deficit is an ongoing issue that must be handled appropriately in order to overcome and mitigate the turnover rate. Despite previous initiatives to address the challenges, the nursing shortage persists. In a study, it was hypothesized that the factors like insufficient government funding, lack of reward system, low salary, staff safety, workload, lack of appreciation has a significant impact on overall nurses' shortage and the quality of patient care. ¹² Similarly, in contrast

to the current study these factors are significant and contributes towards an increase in the desire to leave the profession or migrate from the country so as to opt for a rewarding career.

In a systematic review it was identified that, nursing is considered as primary skeleton of every health care organization, and achieving care standards without a workforce is extremely challenging. As, this observation tends to be contemporary with present study findings that lack of reward system and working conditions contributes towards the shortage of nurses. Another study conducted in a public tertiary care hospital in Pakistan revealed that the majority of respondents were not satisfied with the career advancement, low salary, and development possibilities provided by the institution. ^{14, 18, 19} Thus it is indistinguishable with the data revealed from ongoing study. Although, nursing is seen as a noble and dignified profession the public perception of nurses falls short of acceptable standards. ^{13, 15} Nursing has long been viewed as a female oriented profession, resulting in disenfranchisement.

In a study it was emphasized that, the physician nurses collaboration or coordination in developing a congenial work atmosphere, increasing staff happiness, and providing improved patient care are very crucial ¹⁶. (Leung et al., 2020), Though the analysis from the present study reveals similar results so as to overcome the shortage in the profession. In addition, the current study postulates that there are no opportunities for CPE or in service training for public-sector staff nurses, and promotion opportunities are extremely limited, hence it is similar to the findings proposed by. ¹⁴ In a nutshell, continuing education and in-service training are significant aspects of nurses' professional growth as it plays a vital role in increasing productivity, satisfaction, and improving the capacity of nurses to better their clinical abilities towards quality nursing care, similarly it has been proposed in a previous study. ¹⁷

CONCLUSION

In conclusion, the nursing shortage remains a critical issue despite prior efforts to mitigate its effects. Factors such as insufficient government funding, lack of a reward system, low salaries, unsafe working conditions, heavy workloads, and lack of appreciation significantly contribute to the ongoing crisis. These issues not only impact the quality of patient care but also drive nurses to leave the profession or migrate in pursuit of more rewarding career opportunities.

Limitations

- The nurses were hesitant to provide information.
- Inadequate resource allocation or funding by the government.
- The findings may not be as broadly applicable to the general population due to the very small sample size. To confirm these findings, larger, more varied populations and longitudinal follow-up are required in future research.

Recommendations:

According to the analysis it is perceived that the factors has a positive correlation between dependent variables while it demonstrates that, the nursing shortage would be overcome through better working conditions, motivation, eliminating growth barriers, decreasing burnout and stress among staff, ensuring safety, overcoming funding issues and, providing work life balance, Policy Reforms that address systemic issues contributing to job dissatisfaction, such as ensuring fair treatment, equal opportunities, and addressing concerns specific to the nursing profession.

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Ethics approval statement: An approval was granted by the ERC from College Of Nursing, (Female) Dr. Ruth K.M. Pfau, Civil Hospital Karachi, Pakistan.

Authorship Contribution:

Conceptualization of Project: K.K,S.K, S.P, N.B, S.M Data Collection: F.M, M.M.A, L.S Data Analysis: A.I, S.K. Literature Review: MMA, S.W, SK. Drafting, Revision, writing of manuscript: S.P, S.K, S.M Others: Budgeting: M.M.A, K.K,S.K, S.P, N.B, A.I, S.W, F.M, L.S

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