Advanced Practice Nursing challenges in developing countries: perception of nurses in selected health care facilities in South East Nigeria

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Background

• The nurse practitioner/advanced nursing practice (ANP/NP) role, originated from the United States of America (US); now gaining recognition in many developed countries and with some degree of operation in developing countries (Price, Patterson and Hegney, 2006).

• Role created due to poor access to health that was caused by shortage of doctors
Background

• Studies show use of ANP/NP result in higher patient satisfaction, greater access to health, and outcomes of care that are of equal values with those experienced with the doctor.

• ‘Nurse practitioners are experts in their field and use advanced knowledge and skills within their specialist scope of practice... and must meet the competencies set out by the nursing council. They are able to articulate and advance the scope of their nursing practice, showing expert practice and working collaboratively with other disciplines as well as across settings’. (New Zealand Nursing Council, 2001)
Background

• Not much has been done in the area of ANP/NP - research or concept issues in Nigeria

• The present descriptive qualitative study is one such effort to establish the perception of nurses to the challenges of the ANP/NP role in selected health facilities in five of the South East states of the country.
Methodology

• **Design:** Descriptive qualitative study

• **Setting:** Two health facilities (primary and secondary) used in Abia, Anambra, Enugu and Imo States of Nigeria

• **Subjects:** Purposive sampling was used with inclusion criteria as 5 years experience, in practice in the facility during study period

• Participation was voluntary
Methodology

• **Subjects** – 24, comprising 1 deputy director, nursing services, 1 assistant director, 8 chief nursing officers, 2 assistant chief nursing officers, 1 principal nursing officer, 4 senior nursing officers and 7 nursing officers.

• Their ages ranged between 25 and 59 years, with work experience between 5 and 34 years.
Methodology

• **Data collection:** Through in depth interview of duration that ranged from 25 and 75 minutes. The interview guide developed by the researchers included general questions on the concept of ANP/NP, roles, and challenges.

• Questions and statements like ‘Is advanced nursing practice necessary in the health care system’? What in your opinion are the major challenges? Would you encourage ANP/NP roles to be introduced in Nigeria? Why or why not? were asked to direct the subjects
Methodology

• Ethical considerations: All the participants were informed of the purpose and design of the study and the voluntary nature of their participation with assurance of anonymity.

• Data analysis: Analysis involved carefully listening to the recorded interviews and transcribing, coding and creating themes. All transcribed interviews were read severally, before content analysis.
Results

The themes used to categorize the results:

• Concept of ANP/NP
• Relevance and need in Nigerian health system
• ANP/NP Roles
• Need for Specialist training
• Rationale for encouragement of ANP/NP roles
• Challenges
• Prospects for health system /profession
Results

• Suggestions on the way forward
• Discussion

**Concept:** For both primary and secondary facilities in the states the views expressed –

• “The ANP/NP is for nurses to see, assess, diagnose, treat patients and refer to other health professionals as necessary”; “It involves not only diagnosing, planning, implementing and evaluating care, but also follow up care given to chronically ill patients”;
Results

Relevance and need to Nigeria health system

• **Statements**: “Advanced nursing practice is important in Nigeria because it will help to solve peoples’ health problems. More nurses will be available to help in the system especially where doctors are not enough” “Advanced nursing practice will augment services in the rural areas because the doctors are not there in the communities”
Results

Relevance to health systems (cont’d)

Statements: “With ANP/NP, both time and cost is saved for the patients”; “In hospitals, the number of patients is quite high which often leads to seeing them in a rush, but with ANP, better attention will be paid to the patients and doctors’ workload will be reduced”; “ANP/NP will reduce waiting time in hospitals because patients tend to come so early and leave late causing stress on them, and some end up not being seen by the doctor”.
Results

Need for specialist training - All Participants agreed to specialist training at M.Sc level

Rationale for ANP/NP in health care -

“For example in an area with four health facilities and there is no doctor, it is only the nurse and the Community Health Extension workers (CHEWs) that are there. The nurse is in charge and ANP will distinguish the nurse in such a place”; “ANPs can actually replace doctors in the rural areas as they are not only the ones there, but they attract more patients, the villagers have confidence in them etc”; “… when doctors took over palpation, the pregnant women will come much earlier so that nurses can palpate them before the arrival of the doctor” (in hospitals).
Results

Challenges: Participants highlighted,

• Professional rivalry between doctors and nurses
• Fear of threat by nurses – doctors fear that nurses will take their jobs
• Opposition by medical groups/doctors
• Fear of poor management by nurses
• Quality of care offered by nurses
• Coverage of the population
• Legislation by government
Results

Participants’ Statements: “The doctors think that nurses will take over their jobs or replace them” (CNO, hospital); “It’s for money; In this our environment community medicine was not heard about before, only nurses were in the community and suddenly doctors want to be there... yet they are not there physically, only nurses” (CNO, Primary health facility);
Results

“Nursing procedures are now hijacked by doctors… very much in Nigeria; e.g. Intravenous infusion/drug administration, in some places palpating pregnant women, deliveries etc”; “They just woke up one morning and all I. V. line/drugs is for doctors, deliveries for doctors etc”(ACNO – Sec facility)

“Poor management is not traceable to nurses, even in the rural areas. Mismanagement may be by other lower cadre health staff who wear white like nurses” (Participants on issue of nurses’ management)
Results

• Quality of care by nurses - Participants say:

• “The quality of care offered by nurses is even higher. Apart from research, the reality is that it is nurses that do the work. Nurses do the coverage; manage the clinics for the doctors”. “If the nurses’ work quality is poor why are they still employed? Doctors do not go to the health centres. They just request the data from the nurses.”; “They look down on nurses”
Results

Participants’ statements:
Coverage of population: “Yes, even with the amount of work nurses do especially in the rural areas, it is still a challenge because of poor resources”

Government legislation: “Really nursing is poorly defined in Nigeria, standards for training are poor in some of the schools due to lack of resources/ facilities in both training institutions and health facilities”; The Act for nursing and midwifery by the government needs review to reflect the reality of advanced practice”
Results

Prospects for ANP/NP: Participants say;

Nigeria: “If it is encouraged today, a lot of things will change in health care. We want it to help lower the death rate which is really under reported. In a health facility for example, where there are 5 deaths, they may not all be reported because of the negative effect on the health facility, and patients may not understand why”;

Profession: “If the practice works in other countries, it will work in our own”; “It will enhance the professional image of the nurse”; Nurses have patience, and are better positioned to work with patients so they will bring about a lot of change in the profession”.
Suggestions

Participants suggest:

“The Nursing associations need to work together for its adoption, and ensure that government legislation supports advanced nursing practice”; “There should be laws to encourage their registration and practices”; “Nurses should unite and strive to have legislative support for their professional practice”. “More nurses should embrace research and evidence based practice, apart from getting more education” and the Nursing and Midwifery Council should advance nursing through curricula review and approval by liaising with the nursing associations and nurses”. There may be need for awareness creation, sensitization and advocacy on the advanced practice nursing”
Conclusion

• This study has shown that advanced nursing practice is a necessity in both primary and secondary health care facilities.
• It also reveals that mutual respect between doctors and nurses will enhance that role and harmony within the health care system, and that advanced practice nurses are a valuable resource to provision of health care.
• Many countries have grown beyond the rivalry between doctors and nurses and are enjoying the benefits of ANP/NP, and Nigeria should not be left out.
• Medicine and nursing should move beyond their differences and work with consumers and other health professionals for models of care provision that would ensure satisfaction and meet the health needs of the population; ANP/NP roles need their support.
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Thank you