

## Assessment of Nurses Challenges regarding Health care system in Hilla City

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### Abstract

**Background:** There are certain challenges which the nurses in the present healthcare system face . These challenges arise due to issues at the organizational, state and national level. Therefore, the study aimed at assess nurses challenges related to health care systems in Hilla City Hospitals.

**Methodology:** A descriptive cross-sectional quantitative assessment approach using the tools that have been questionnaire. By a convinces sample of (220) nurses is selected throughout the use of non probability sampling approach. Data were analyzed through the application of descriptive statistical data analysis approach that includes, frequencies, percentages; and score mean.

**Results:** "Findings indicate that nurses were recorded high level of mean 1.8 were without social challenges. Nurses suffers of psychological, Economical, administrative, Professional and professional challenges at mean low level of mean <1.5, it recorded (53.6%, 53.2%, 63.2%, 70.9% and 83.2%) respectively.

**Conclusion:** The study concludes that challenges in terms of social, nurses they do not encounter social challenges. Challenges in terms of psychological, economical, administrative, professional and policy, nurses suffers. Need to be paying attention to the competencies and skills of workers in the nursing field through internal and external training courses to refine the personality of nurses and increase their skills. Emphasizing that the role of nurses is no less important than that of doctors and other workers in health institutions.

**Key-wards:** Assessment, Challenges, Health Care System.

### INTRODUCTION

Only a few of the major organizations that have documented the global challenges that affect both health care and the profession of nursing are the "World Health Organization (WHO), the International Council of Nurses (ICN), Sigma Theta Tau International, and the American Academy of Nursing" [1] .

The challenges to health-care delivery are shared by all six WHO regions, though the magnitude

of each challenge varies by region. Inadequate human assets at all levels of the health-care system, low pay, a lack of career incentives, an aging population, a weak professional image, poor working conditions/environments, and difficulties enforcing and reinforcing current policies are among the obstacles to growing nursing and midwifery services[2].

Nurses, according to the International Council of Nurses (ICN), may make a major contribution to the development of appropriate and efficient health policies. Nurses, with their knowing and experience, hold a unique role among healthcare providers and are a powerful force in influencing healthcare policy through the implementation of successful strategies [3]

Nurses are part of a larger organization because they work in a hospital. The majority of hospitals are still hierarchical, with nursing work environments largely organized and managed by someone other than the nurses themselves. Things aren't always the way nurses want them to be [4].

Iraq's health-care situation has deteriorated as a result of leadership and financial corruption, which has resulted in a general deterioration in the country's services [5].

Our previous two descriptions of the Iraqi health-care system, on the other hand, indicated that the system was not changing in any meaningful way, but rather collapsing due to corruption and a lack of real leadership [6].

Hundreds of patients die each year as a result of hospitals' inability to follow basic protocols for safe and efficient medical treatment, according to Iraqi health care experts [5].

It is important for public health to improve patient services on a regular basis. All people should have access to high-quality health care [that is, care that is secure, affordable, patient-centered, timely, equitable, and efficient] [7].

According to Reuters, Iraq has 1.1 hospital beds and 0.8 doctors per 1000 people, while the Kurdistan province of Iraq (KRI) has 1.5 beds and 1.4 doctors per 1000 people. According to the same survey, Iraq had 2.1 nurses and midwives per 1,000 people in 2018[8].

Nursing in Iraq has long been challenged by several of the issues, including varying levels of training, social attitudes toward nursing that are shared by nurses, low pay, and unsafe working conditions. Furthermore, studies have shown that nurses, especially female nurses, have a young age. The Iraqi Nursing Association, which is supposed to serve and advocate for nurses, has remained inactive[9].

Patients may become more dissatisfied and nursing care quality may suffer as a result of a lack of attention to nurses' challenges and issues[10].

Exploring and comprehending the obstacles that nurses face allows authorities to resolve the prerequisites and strengthen the workplace environment for aims to enhance the quality of care[11].

## **METHODOLOGY**

The study was conducted using descriptive cross-sectional quantitative assessment approach using the tools that have been questionnaire to explore the challenges faced by the nurses.

Study instruments: A questionnaire was created through a comprehensive review of the literature that have relevant. Which was used as a data collection tool that included the following:

"Nurses demographic information"

"Nurses challenges related to health care system"

Study sample: A convinces sample of (220) nurses is selected throughout the use of non probability sampling approach. The study sample is distributed throughout four hospital according to Babylon Health Directorate which are (Imam Al Sadiq, Babylon Maternity and Pediatric Hospital, Hilla Surgical Hospital and Marjan Hospital

Method of data collection: After completing the required approvals, data was collection through the use of a questionnaire (Arabic version) "self-administrative" nurses. The researcher introduced himself to the participants and explained the purpose of the study in order to get oral agreement. The questionnaire fill out an answer by the participants (nurses). The researcher gathered the questionnaire from the participants after distributed it's for each nurses staff on individual bases. Approximately each self-management took (15 to 20) minutes.

Methods of Statistical: The used SPSS-ver.20 in order to analyze and evaluate the study data is used for "Methodology of statistical data used descriptive analysis to describe the study variables: frequencies and percentages".

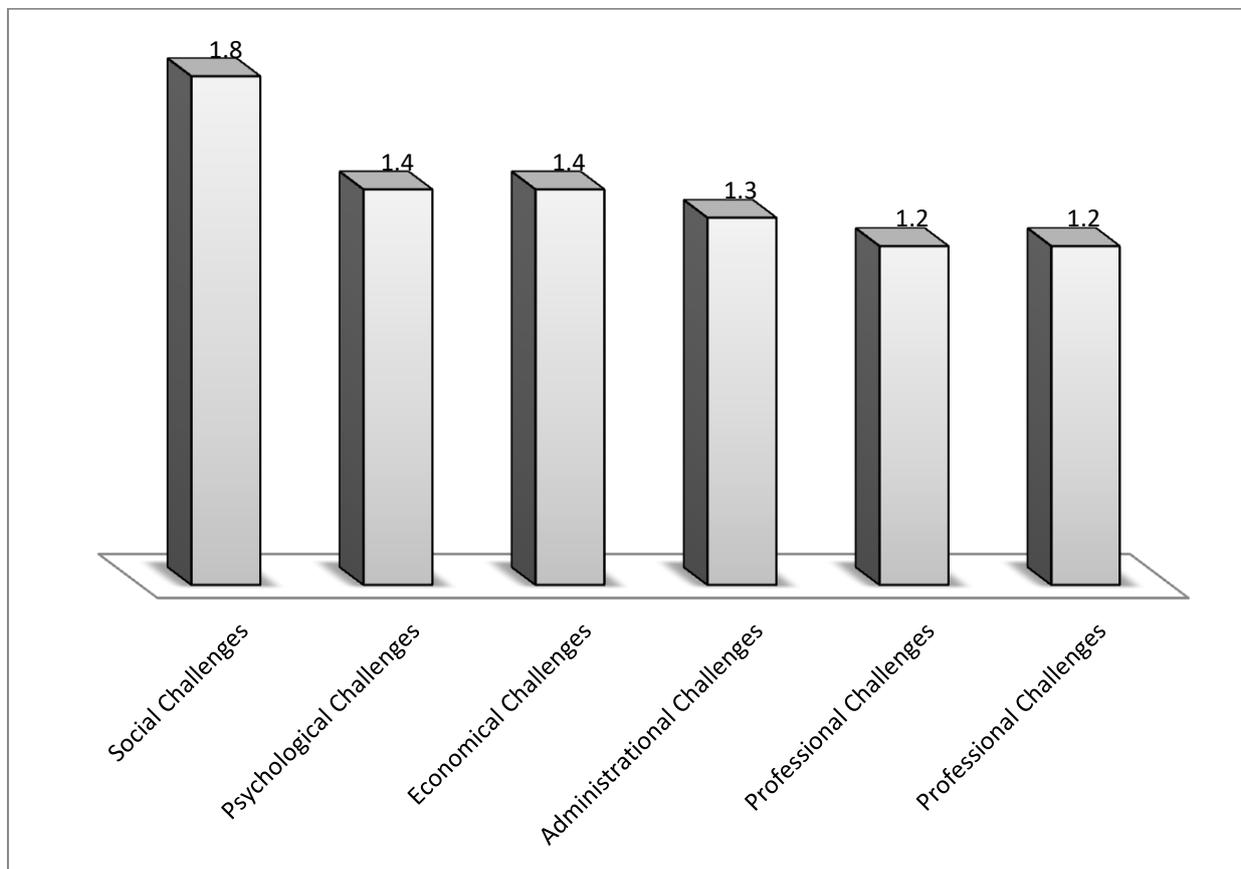
**Mean <1.5 considered suffers of Challenges**

**Mean ≥1.5 considered without of Challenges**

**RESULTS**

**Table 1:Sample Population Variables Descriptive Statistic Analysis**

<b>Demographic Variables</b>	<b>Rating</b>	<b>F=220</b>	<b>%</b>
<b>Age/years</b> (Mean+ S.d= 31.47+8.96)	<b>20-29 years old</b>	<b>129</b>	<b>58.6</b>
	<b>30-39 years old</b>	<b>47</b>	<b>21.4</b>
	<b>40-49 years old</b>	<b>27</b>	<b>12.3</b>
	<b>50 and older</b>	<b>17</b>	<b>7.7</b>
<b>Gender</b>	<b>Male</b>	<b>114</b>	<b>51.8</b>
	<b>Female</b>	<b>106</b>	<b>48.2</b>
<b>Years of Experience</b>	<b>&lt;5 years</b>	<b>119</b>	<b>54.1</b>
	<b>5-10 years</b>	<b>42</b>	<b>19.1</b>
	<b>11-15 years</b>	<b>12</b>	<b>5.5</b>
	<b>16-20 years</b>	<b>22</b>	<b>10.0</b>
	<b>&gt;20 years</b>	<b>25</b>	<b>11.4</b>
<b>Residency</b>	<b>Urban</b>	<b>164</b>	<b>74.5</b>
	<b>Rural</b>	<b>56</b>	<b>25.5</b>
<b>Marital Status</b>	<b>Single</b>	<b>91</b>	<b>41.4</b>
	<b>Married</b>	<b>128</b>	<b>58.2</b>
	<b>Widowed</b>	<b>1</b>	<b>.5</b>
<b>Monthly Income</b>	<b>Not enough</b>	<b>75</b>	<b>34.1</b>
	<b>Partially enough</b>	<b>91</b>	<b>41.4</b>
	<b>Enough</b>	<b>54</b>	<b>24.5</b>
<b>Educational attainment</b>	<b>Secondary school nursing</b>	<b>58</b>	<b>26.4</b>
	<b>Medical institute</b>	<b>90</b>	<b>40.9</b>
	<b>Bachelor 's degree</b>	<b>70</b>	<b>31.8</b>
	<b>Master's and above</b>	<b>2</b>	<b>0.9</b>
<b>Work time</b>	<b>Morning</b>	<b>120</b>	<b>54.5</b>
	<b>Evening</b>	<b>100</b>	<b>45.5</b>



**Figure 1: Score mean among Challenges**

## DISCUSSION

Individual-motivational factors such as personal characteristics of the staff and lack of motivation in nurses are among the challenges that are discussed in the present research. In our findings out of the (220) subjects involved in this study, their age ranged from (20-29) years of age and comprised (58.6%) of the study sample. More than half of the study sample is from young groups, and this age group is characterized by activity, vitality and the ability to give, and this is due to several things, the most important of which is the existence of institutes that work to graduate young age groups that join the health system

In terms of gender, more than half of the study sample was shown to be predominant among the findings of the male nurses (51.8 percent). Results come in the same line with findings deals with

nurses perceived challenges. Their findings depicts that male nurses were predominated (57.6%) out total 33 [12].

In regarded with years of experiences, nurses who works less than five years were constituted the majority (51.8 percent ) out total number. Nursing experience plays an important role, but education and training are the most important, especially in light of health technology developments. Often times, the novelty of work experience has many positive aspects, including: motivation to work, increased productivity, self-affirmation, in addition to seriousness in dealing with patients.

Concerning residency, most of them (74.5 percent) were residences at urban areas of Hilla city, as being the hospitals covered by the study are located in urban areas so, the health care workers residents in those areas.

It is evident from the findings that more than half of the study group were married nurses. Out of the total number of the study population,(58.2%). This result come because most of these age groups are the age of marriage, especially after the completion of the study and appointment in the field of nursing.

The newness of the experience and the low educational level of nurses are reflected in the income, and the monthly income is one of the obstacles to the acceptance of the profession, noting that this profession involves many risks in addition to the sensitivity of work and the nature on which it is based. A socio-economic status was reported among nurses (41.4 percent) who make a partially income.

The findings indicate the distribution of the study sample according to academic achievement. Where the proportion of medical institutes graduates was the majority, the total amount was (40.9 percent). Also, the lowest percentage was recorded by the Master's and above. The percentage of nurses working in hospitals at the bachelor's level and above is still small compared to diploma graduates, and the reason is due to the newness of nursing colleges.

Most of them work in the morning shift and compose about working time (54.5 percent ). The field of work in the nursing corps is varied, there are some jobs that are active with specific hours (morning work) and some fields need to work full hours (evening work), we note through our results the majority of nurses work in the morning and this is due to their desire due to the social

nature that women, especially married women, have difficulty because they have home engagement. The results of Picakcief and others (2018), stated that few percentage of nurses who work at night.[13].

## **Discussion Challenges related to Domains**

### **Challenges related to Social**

Social challenges represent the relationships, social and family problems, the role and the job of the nursing worker, in addition to society's perception and social values and customs related to this work. According to the mean score study, the findings indicate that the majority (80.9%) of nurses were did not have social challenges. The ability to address specific social determination that may impact patients and then connect them with specified services has the potential to reduce healthcare costs. In United State, nurses were continue to be a need for social support even if they do not have social determinants. Because the social aspect in the workplace and outside the workplace has a positive effect on productivity [14].

Moreover, it is important for nurses and all members of the health care team to be knowledgeable of and able to identify and address social determination of health (SDOH) in practice. Education for health care providers is necessary to enhance SDOH awareness and best practice. Nurses are integral to the transformation of SDOH into patient care and improving health of individuals and patient populations for a culture of health without challenges [15].

### **Challenges related to Psychological**

Psychological challenges include the effect of work on the psyche of the nurse in terms of mood, psychological stability, fear, shyness, suspicion, obsession and respect, which affect personality, behavior and productivity. According to the mean score study, the findings indicate that the majority (53.6%) of nurses were have psychological challenges. The study showed that nurses often experience strains, which may lead to stress and burnout. Previous studies showed several sources of stress for nurses including poor workplace management, loss of peer support, lack of necessities in home care settings, interactions with patients, inadequacy of perceived professional knowledge, unexpected events and care process, and working time problems [16].

In this regard, previous studies showed that stress related to the working conditions probably contributed to the development of physical symptoms, too [17].

### **Challenges related to Economic**

It is related to the effort exerted and the economic cost to the worker, and it includes salaries, incentives and retirement. It also includes obstacles that pay to work in this field. According to the mean score study, the findings indicate that the majority (53.2%) of nurses were have economical challenges. The solving of economic challenges is through reviewing the salary scale and achieving a decent living for the nursing worker. Working with rewards and promotions also helps a great deal to minimize economic barriers on the one side and to improve productivity on the other. Our findings agree with Wälivaara and others (2013), who found nurses were suffers of economic barriers. The other studies showed that the financial crisis influenced the home health care services and had led to some obstacles in the provision of care [18].

As well as, one of the important economic issues is that home care services in Iran are not covered by health insurance. This problem leads to limited access to home care services; instead, families receive help from unauthorized persons who provide services at a lower cost. This leads to an inability to monitor the quality of home care. Accordingly, insurance coverage is an effective factor in maintaining the quality of home care [19].

### **Challenges related to Administrations**

These challenges include the nature of the relationship between nurses and senior-direct management in hospitals, and the bias and favoritism that this relationship carries out. These obstacles include the nature of the work system, incentives and promotions. According to the mean score study, the findings indicate that the majority (63.2%) of nurses were have administrative challenges. Administrative difficulties require the existence of a special system and adherence to it that determines between the worker and the management and not to exploit the weakness or legal flexibility, the human relationship based on friendliness and respect is the basis, the nursing profession is primarily human and the relationship must emerge from this context.

Our findings consisting with findings of study Nepal deals with administrative challenges faced by nurses. Their findings confirmed that today's ever-changing health care environment the role of nurse administrators are challenged by number of factors such as Multi-Generational Workforce, The Business of Health Care, Ethics, Competition for Health Care Professionals, Nursing turnover, Nursing shortage, Staff absenteeism etc [20].

Challenges in quality and safety work were interrelated and depended on many factors. In addition, they often implied trade-offs for both managers and employees. Managers struggled to maintain continuity of care due to sick leave and continuous external-facilitated change processes. Employees struggled with heavier workloads and fewer resources, resulting in less time with patients and poorer quality of patient care. The increased external pressure affected the possibility to work towards engagement and culture for improvement, and to maintain quality and safety as a collective effort at managerial and employee levels. All these things lead to administrative challenges [21].

### **Challenges related to Profession**

Like these challenges are short-staffing in hospital settings is a top concern for nurses, long working hours. to help make up for staffing shortages, nurses are often required to work long shifts, workplace hazards, and limitation of qualification. According to our findings indicate that the majority (70.9%) of nurses were have professional challenges as being different educational qualification.

The use four categories and ten sub-categories were extracted from the experiences of the nurses working in the intensive care units in terms of nursing challenges in using non-verbal pain assessment scales. The four categories included "forgotten priority", "organizational barriers", "attitudinal barriers", and "barriers to knowledge". This challenges due to lack of experience and educational qualification is one of the greatest determinants of professionalism[22].

The most common factor threatening patient safety in health institutions is medical errors, and most of the professional determinants come from lack of educational qualifications and lack of practical experience in the health system [23].

### **Challenges related to Policy**

Nursing influences health care policy through a nurse's daily role in health care delivery. According to the American Association of Colleges of Nursing, nursing is the largest health care profession in the United States, with more than 3.8 million registered nurses (RNs) nationwide. It's an independent field of medicine, and a nurse is not merely an assistant to other medical professionals. The U.S. Bureau of Labor Statistics projects that the employment of nurses will increase by 15% between 2016 and 2026, which is faster than the national average for all occupations. The median annual pay for nurses is \$71,730 in the U.S. Clearly, nursing is an important component of the health care system and need that without limitations [24].

According to the our analysis, the findings indicate that the majority (83.2%) of nurses were have policy challenges. This findings come with decade deals with challenge of contributing to policy making in primary care. Their findings showed that nurses faced a number of policy challenges in their attempts to contribute to and influence local health policy [25].

Based on the concept analysis undertaken, nurses' policy influence is nurses' ability in influencing decisions and affairs related to health through political knowledge, effective communication, and collaboration with other members of the health team, which results in the improvement of nurses' job environment and increases patient outcomes [26].

### **CONCLUSIONS**

The study concludes that challenges in terms of social, nurses they do not encounter social challenges. Challenges in terms of psychological, economical, administrative, professional and policy, nurses suffers. Need to be paying attention to the competencies and skills of workers in the nursing field through internal and external training courses to refine the personality of nurses and increase their skills. Emphasizing that the role of nurses is no less important than that of doctors and other workers in health institutions.

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