

## BARRIERS TO HIGHER EDUCATION AMONG NURSES OF BACCALAUREATE DEGREE PROGRAM IN THREE SELECTED INSTITUTES OF PESHAWAR, KHYBER PAKHTUNKHWA, PAKISTAN

*Sumera Bibi,<sup>a</sup> Safia Ilahi,<sup>b</sup> Sher Bahadur<sup>c</sup>*

### ABSTRACT

**Introduction:** Advancement in education and globalization require enhanced opportunities of higher education for nursing students in degree programs. Even though government has worked on this and established nursing colleges, yet nurses face challenges in pursuing higher education. The barriers in this regards are implicit in nature; hence it is desirable that a study be done to determine the perceived barriers that have become hurdles in acquisition of higher degree in nursing profession in the region.

**Materials & Methods:** This was a cross sectional survey conducted from November to December 2015 on nursing students of three selected Nursing Colleges of Peshawar, Khyber Pakhtunkhwa. A self-administered questionnaire which included questions regarding barriers to acquisition of higher education in nursing was used for data collection through convenience sampling and after informed consent. Data were analyzed by SPSS 20.0.

**Results:** A total of 136 nursing students of both genders (21, 15.4% male and 115, 84.6% female) responded; the mean age was  $31.5 \pm 6.8$  years and 72 (53%) were married. The barriers to nursing education were broadly divided into Personal Level problems such as family approval for higher education (51.1%), financial problems (49.6%), personal indecision for higher education (46.3%), fear of passing higher education examinations (46.1%), fear of losing job (34.8%) and fear of losing family support (34.1%); and Organizational Problems such as lack of poor policy for professional growth (91.5%), followed by lack of formal pay scale (89.4%) and lack of job structure (82.2%).

**Conclusion:** Although nurses pay due attention to professional growth, they face multiple challenges such as financial, family and organizational barriers to achieving their professional development.

**Keywords:** Nurses; Baccalaureate Nursing Education; Education, Nursing, Continuing; Education, Professional.

### *Author Designation & Affiliation*

- Charge Nurse, Lady Reading Hospital Peshawar, Khyber Pakhtunkhwa
- Charge Nurse, Khyber Teaching Hospital, Peshawar, Khyber Pakhtunkhwa
- Senior Research Officer Rehman Medical College, Peshawar, Khyber Pakhtunkhwa

### INTRODUCTION

Education is not a static process. It evolves with newly discovered best-practices, technology, and innovation in the classroom.<sup>1</sup> Presently Nursing education in Pakistan is in its transitional state, whereas it was expected to convert all till the end of 2015; three years diploma nursing will be replaced by a four year degree as the level of entry for practicing nursing in the country.<sup>2</sup> However, still majority of nursing schools are running the diploma program because of shortage of technical workforce and trained faculty, and other personal and system level barriers.

In Nursing, students have the opportunity to obtain nursing education through several avenues including; diploma programs, undergraduate (BSc Nursing), accelerated degree (fast tract for senior) or Master Degree. Most bachelor degree programs offer the nursing student a four year course of study, including core nursing curriculum as well as research, lab sciences and English. Like other countries, in Pakistan, the minimum requirement obligatory to practice as a Registered Nurse (RN) is by completing a diploma or associate degree program, but there is no licensure exam.<sup>3,4</sup> Compared with other members of the healthcare team, the evolution of the profession of Nursing is sluggish and the educational requirements atypical.<sup>5</sup>

In short, advancement in nursing education is essential to the relevance of the professional nurse encouraged by relevant national organizations. For efficient operationalization, the nursing educational program may be developed in a transparent way by ensuring equal opportunities and eliminating grass root barriers at all levels. The education program in accordance to the relevant

content to professional nurses is a continued struggle in a perpetually changing healthcare environment and workforce.<sup>6</sup> Furthermore, professional development programs need to be rooted in practical design, contributing to the nurses' persistent desire to learn, and the program may be continuously evaluated for relevancy and effectiveness.<sup>7</sup> While some factors influencing the effectiveness of the existing programs are known, exploring the organizational barriers placed on professional nurses would benefit the profession.<sup>8</sup>

The global community has supported university preparation for nurses, and standards are rapidly changing around the world. Countries such as Australia, Belgium, Canada, Denmark, Finland, Ireland, Italy, the Netherlands, New Zealand, Norway, the Philippines, and Spain have moved nursing education to the BS level.<sup>9</sup> The new structure for higher education has improved the competitiveness and status of nursing in these countries with a resulting increase in number of new graduates and nurses per 1,000 population.<sup>10</sup> Discussions on the international impact of BS education and the ensuing growth in nursing in every country that raised their standard have been instrumental in winning the support of nurses, legislators, and chief executive officers in healthcare organizations for the New York model.<sup>11</sup>

The positive collective efforts in the implementation of a proposed strategy (all diploma holders nurses should be shifted to baccalaureate level) enhance access to education. This indicated that there is a need to determine the barriers to higher education. As a result of such barriers, Pakistan Nursing Council goal and strategy is yet not achieved and it may take years to be achieved if the barriers are not eliminated;<sup>2</sup> however nurses are doing self-efforts for their own profession.<sup>12</sup>

Since, Pakistan Nursing Council (PNC) has recommended a nursing baccalaureate educational

degree (BSN) over Diploma in General Nursing, all Health care organizations, Nursing colleges and schools would benefit in their medical, business, financial and legal aspects by inculcating ways to increase the proportion of BSN-level RNs employed at their institutions. In order to advance the profession, barriers that hinder nurses from advanced education should be identified and then properly addressed. The objectives of present study were to identify and to understand students' experiences perceived as barriers to pursuing a baccalaureate degree program in nursing; and to identify the restraining forces that affect nurses to pursue graduation or higher studies in nursing education.

## MATERIALS & METHODS

A cross sectional study was conducted from November to December 2015 in three selected nursing institutes of Peshawar Khyber Pakhtunkhwa, namely, Postgraduate College of Nursing (PGNC), Khyber Medical University Institute of Nursing Sciences (KMU-INS), and Rufaidah Nursing College. All these colleges offer the Post RN BSc program. These are the only institutes where a registered nurse could avail further education. The study subjects were baccalaureate nursing students of selected institutes having experience in Government and private sectors recruited in the study through convenience sampling technique. Before starting data collection, permission was taken from all Principals and Coordinators of selected colleges and informed consent was taken from all participants. A pretested self-administered questionnaire was used for data collection; the questionnaire contained items related to elucidating possible barriers for nursing students to seek higher education in their profession.

Data were entered for analysis in SPSS version 20; descriptive statistics such as frequencies, percentages, means and SD were obtained.

## RESULTS

A total of 136 student nurses participated with mean age of  $31.5 \pm 6.8$  years (range 20-69) years, out of whom 21(15.4%) were male and 115 (84.6%) were female. Further age categorization indicated that 83(61%) were from 20-30 years, 42

(30.9%) from 31-40 years and 11(8.1%) 41-50 years respectively. Majority (72, 53%) of the students were married. Students distribution with respect to age, Institutes and semester of study are shown in figure 1.

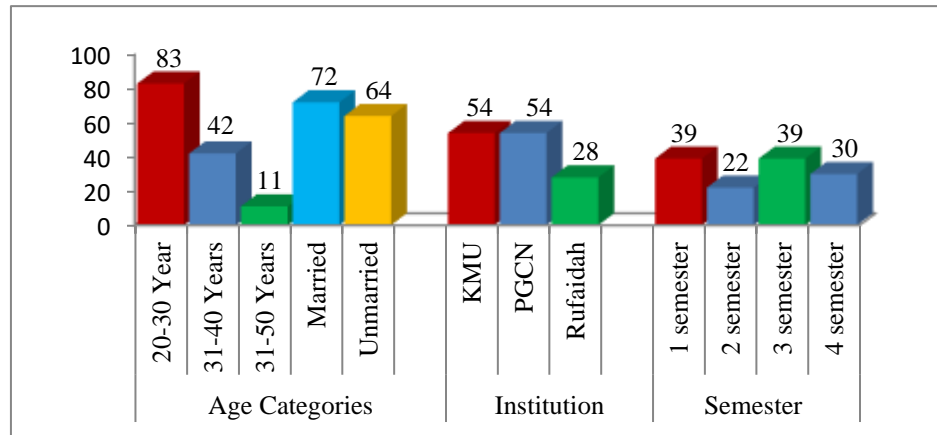


Figure 1: Distribution of participants by age, institutions and semesters

**Personal level Barriers:** Reported personal barriers are shown in Table 1. The most reported barrier was Family approval for higher education (51.1%), followed by Financial Problems (49.6%),

Personal indecision for higher education (46.3%), Fear of passing higher education examinations (46.1%), Fear of losing job (34.8%) and Fear of losing family support (34.1%).

Table 1: Barriers related to personal life of Nurses

Reported Barriers in Personal Life	Frequency	Percent
Family approval for higher education (n=135)	69	51.1
Financial problem (n=131)	65	49.6
Personal indecision for higher education (n=134)	62	46.3
Fear of passing higher education examinations (n=130)	60	46.1
Fear of losing job (n=132)	46	34.8
Fear of losing family support (n=132)	45	34.1

**Organizational Barriers:** Organizational Barriers were reported as shown in Table 2. The leading barriers were Lack of poor policy for professional

growth (91.5%, followed by Lack of formal pay scale (89.4%) and Lack of job structure (82.2%).

Table 2: Organizational barriers reported by subjects (n=136)

Organizational Barriers Reported	Frequency	Percent
Lack or poor policy for Professional growth (n=129)	118	91.5
Lack of formal scale assigned for BScN students (n=132)	118	89.4
Lack of job structure for BScN Qualification (n=135)	111	82.2
Distance impediment for access to Institutes (n=133)	100	75.2
Availability of Institutes for higher education in your province? (n=132)	96	72.7
Difficulty in getting permission from current parent organization (n=136)	98	72.1
Favoritism in organization where you were working? (n=136)	96	70.6
Duty schedule (n=134)	90	67.2
Lack of Motivation from Institution (n=134)	88	65.7

Other reported barriers were Distance Impediments (Access to colleges), Inadequate number of Institutes, Difficulty in getting permission from current parent institutes, Favoritism in current parent institutes, Current duty schedules and Lack of motivation from current parent institutes.

## DISCUSSION

Advances in nursing take place very rapidly; nurses all over the world are pursuing their education to higher levels. Nursing education in Pakistan is in transition state and the current three years' diploma in nursing will be replaced by a four year BScN degree by the end of 2015 as the level of entry for practicing nursing in the country;<sup>2</sup> hence nursing education would be shifted to medical universities as diplomas have to be transformed into Baccalaureate.

The present unique study highlights the fact that despite the upgradation to BScN, nursing students of Diploma in Nursing courses were not optimistic about their chances of obtaining higher education, due to perceived and reported barriers mainly related to their organizational setups (Table 2). Majority were worried about the poor policy for professional growth, lack of formal pay scales and job structures for BScN graduates. This would indicate that despite the policy decision and announcement by PNC, the end users and other stakeholders are not aligned with the vision, mission and objectives of the proposed plan. The administration and students of current nursing colleges see the plan as poorly designed and fear its implementation and execution. It would appear that the end users (nursing colleges) were not taken on board when the change in policy was made.

A recent (2013) study from India<sup>3</sup> highlights problems and barriers to implementation of a faculty development program in Nurses education. It identified the need for more intensive individual and institutional mentorship and that Centers of Excellence in Nursing should

be involved. The colleges participating in the program reported heavy workloads, lack of controls of working conditions and curricula, and poor infrastructure and resources; hence it was felt that the program would have limited impact.

Regarding personal barriers in the present study (Table 1), these were of a lesser severity than the organizational barriers. However the more pressing ones were related to family approval, financial problems and personal indecision in favor of higher education. A recent study from Iran<sup>13</sup> on 361 nursing students in a Continuing Medical Education (CME) Program identified personal barriers of time constraints, domestic responsibilities, emotional stress and poor physical health. The reported barriers are not too different, and the differences may be explained by the shorter durations of the CME courses compared to the prolonged two-year input required from Diploma students to become BScN graduates.

Another barrier to higher education would be that female students have only done Matriculation as basic education. A gender disparity is evident here, because the eligibility criteria for entry of nursing education are different for males and females; males have to pass FSc (Fellow of Science) while females with matriculation are eligible.

Lack of motivation and lack of (or poor) policy for professional growth are also active contributors in creating obstacles in academic growth among nursing staff. As mentioned above,<sup>3</sup> an active involvement of the faculty and organizational structure of participating colleges and schools alone will ensure compliance with the policy rules and regulations framed by the PNC for promotion of the BScN program in the country..

## Conclusion

Nurses face constant constraints in acquisition of higher education and knowledge to add value to their professional development. In their pursuit for professional growth, multiple personal and

organizational barriers restrict them to continue and update their education.

### Recommendations

1. Policy makers and educationists should develop a base for enhancing nursing education as well as for nurses' professional growth.
2. Policy makers should give more opportunities for continuing nursing education so nurses will become more competent and they will deliver quality healthcare to patient.
3. Nursing leaders should create relevant educational programs that keep nurses motivated to make full efforts for becoming more educated in their fields.
4. The higher nursing education programs are to be developed relevant in content to nursing

practice, indicating a continued need for attention to the relevancy of programs.

5. Further research is needed to explore the perception of nurses regarding others barriers.

### Limitations

1. The cross sectional nature of this study does not reflect the possible changes in perception of the sample population as result of the ongoing nature of the organizations of which they are a part and the healthcare environment.
2. The study also presents limitations in the barriers surveyed. A limited number of previously identified barriers were explored, failing to include other organizational barriers nurses may perceive.
3. Time also presented as a limitation to this study. Time allowed for this study was short.

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### **Corresponding Author**

Sher Bahadur, Senior Research Officer, Department of Medical Research, Rehman Medical College, Peshawar, Khyber Pakhtunkhwa, Pakistan.

Email: [sher.bahadur@rmi.edu.pk](mailto:sher.bahadur@rmi.edu.pk)

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