

Career Management: Challenges To The Academics And Nurses In Nigeria

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As key stakeholders in two significant sectors of Nigerian economy, this paper discussed the challenges facing academics and nurses in the pursuit of managing their careers. In an attempt to establish empirical evidence to support those factors long suspected as hindrances to career advancement for these professional groups, a number of assumptions were made on the relationships between this variable and number of children, commitment to spouse, family and spouse's career among others. Survey technique was adopted with primary data collected using structured questionnaire. Collected data was analysed by simple percentages, cross-tabulations and Pearson's Product-moment correlation coefficient. Findings established positive correlations between number of children and delay in promotion at $r = 0.47$, $p < 0.05$; marital status and societal expectations for academics and nurses to cope with other life-roles at $r = 0.36$, $p < 0.01$; spouses higher professional status and societal belief that (female) professionals should perform extra roles at $r = 0.35$, $p < 0.01$ and academic publications number against increased (women) involvement in other life-roles as $r = 0.49$, $p < 0.01$. The paper concluded that managing career of any form in Nigeria can be very daunting in view of the peculiar challenging environment, especially for the female gender, for whom expectations could be very high when combined with the demanding professions.

Field of Study: Management

1: Introduction

Making a head-way in any chosen profession requires an appropriate outlook and a set of skills, the cases for Nigerian academics and nurses do not differ; the problem was that achieving the required quality would be difficult for these professionals in the current socio-political climate in the country. As stakeholders in education and health sectors these academics and nurses are vital to the success of all economies and even more so to a developing economy like Nigeria. But how would these professionals manage demanding careers in the face of other multiple roles?

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The harsh socio-cultural, political, and economic environment of operations, probably make working in the sectors more daunting. Although a number of studies exist, as would be discussed under literature review, most of them focused on specific issues bothering on nursing and academic careers as separate entities, none actually looked at the two professions within the same study. This study examined the challenges faced by the male and female genders in the two professions and comparing issues militating against having successful careers in Nigeria. The choice of looking at the two professions side-by-side was informed by the fact that both reside within the data collection environment and many of them inter-married.

2 Literature Review:

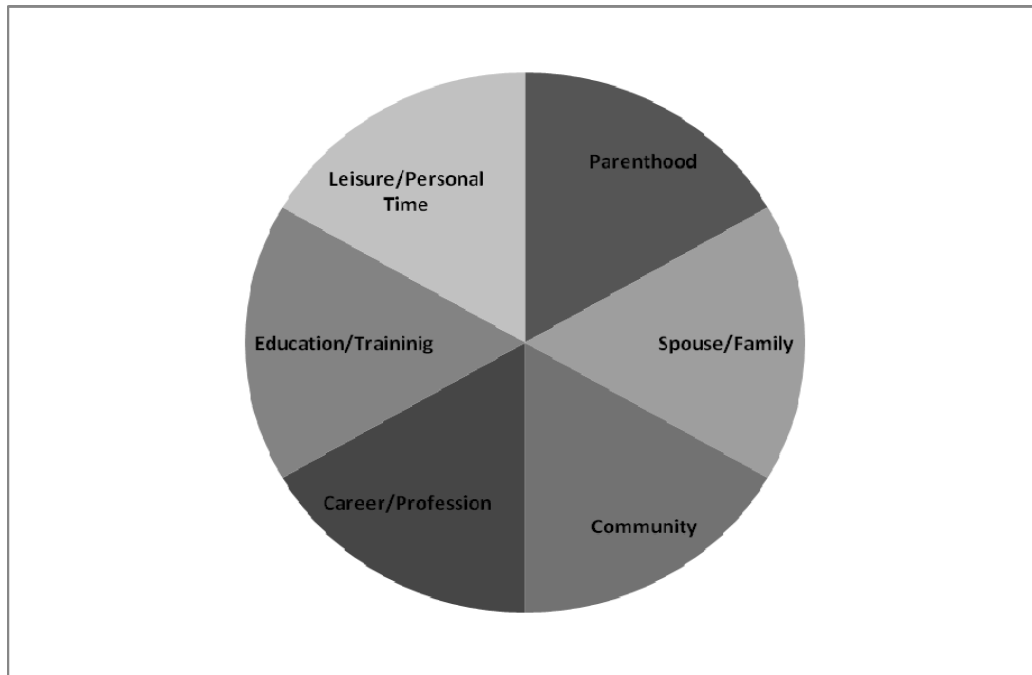
There had been several studies that treated career related areas, some of these studies were McGettigan and Henderson's (1994) - nursing career; Seyedfatemi et al's (2007) on experienced stressors and coping strategies among Iranian nursing students; Goliath Resources' (2007) - career counselling and development; Ogu's (2008) - on challenges facing Nigerian universities; Onokala and Onah's (1998) - on women in academic positions in the universities in Nigeria; and Merwin and Jones' - on evidence based decision making and challenges in the nursing career and the list went on; however none of these focused on both nurses and academics' career challenges specifically in Nigerian context, hence it became the focus for this paper.

Furthermore, just as the needed workplace skills are a must, so are pressures to balance these with the other life roles like parenthood, home and family, education, leisure and community (McGettigan, and Henderson, 1994). Often though, in Nigeria and perhaps in other African countries, parenthood, spouse, home, family and community roles obviously take priority over career, leisure and education, thus creating unhelpful pressures on the person concerned.

Figures 1 (a), 1(b) and 1(c) depicted an adaptation of McGettigan and Henderson's (1994) study on how an ideal balanced-time could be skewed from career/profession, education/training and leisure/personal activities towards the parenthood, spouse/family and community roles. Ability to deflect the skew towards the former three often pitch affected individuals (particularly women), against other stakeholders in the latter set, i.e. children, spouses, families and their communities and the 'accused persons' may be negatively labelled by immediate/extended family members, and the community.

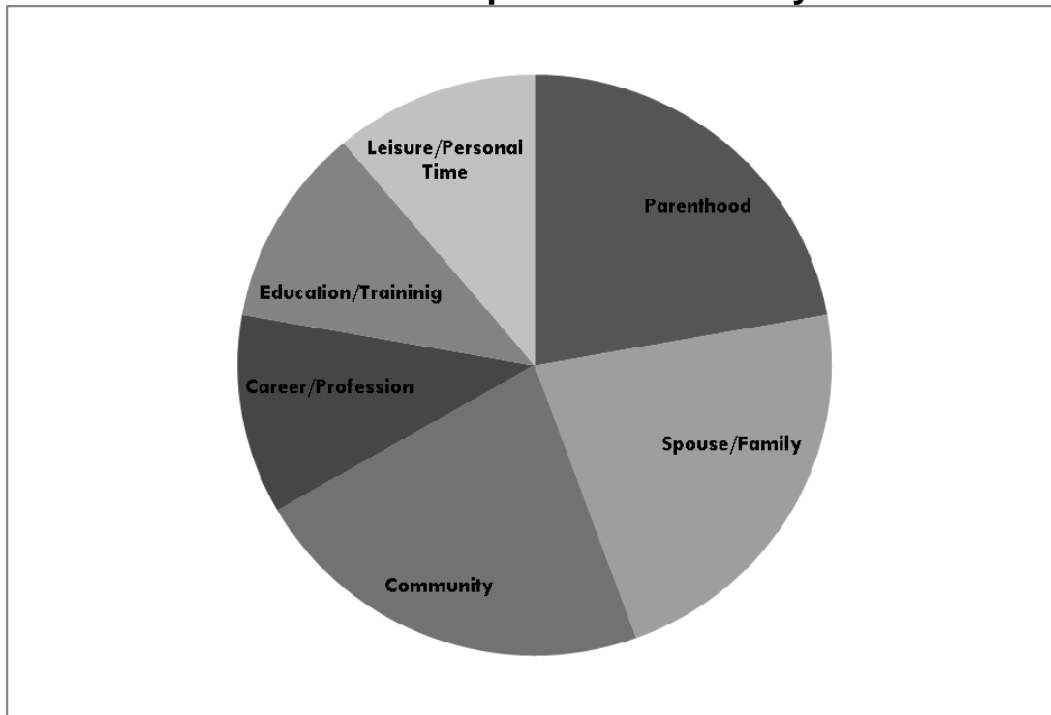
Nigerian academics, already burdened with the pressures of teaching, research, statutory meetings, examinations invigilation & grading, and a host of other administrative duties and nurses constantly coping with shift work and other key stressors associated with the work-Life cycle had to grapple with additional roles associated with family life. The question was where would the vicious cycle end? Was there a possible end to these incredibly difficult-to-balance roles?

Figure I (a): Diagram Depicting Equal Attention to All Life-roles



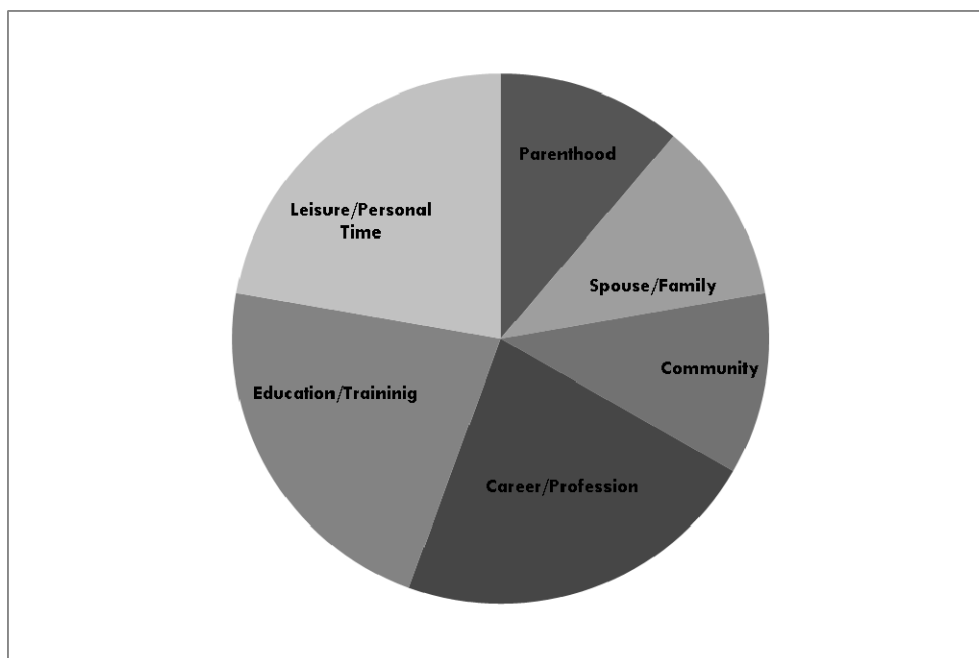
Source: Adapted from McGettigan and Henderson,s 'Managing Your Career in Nursing (1994)

Figure I (b): Diagram Depicting Skewed Attention Towards Parenthood/Spouse/Community



Source: Adapted from McGettigan and Henderson,s 'Managing Your Career in Nursing' (1994)

Figure I (c): Diagram Depicting Skewed Attention towards Career/Training/leisure



Source: Adapted from McGettigan and Henderson,s 'Managing Your Career in Nursing' (1994)

3 Research Objectives:

The overall goal of the study was to determine factors that constitute hindrances to academics and nurses careers in Nigeria. Specific objectives were designed to achieve the broader goal; they were to:

- (i) Ascertain whether relationships exist between Nigerian academics and nurses careers and their other roles competing for their attention;
- (ii) Highlight the main obstacles to successful academic and nursing careers within Nigerian context;
- (iii) Evaluate the societal expectation of academics and nurses whose spouses had higher career level;

4. Research Assumptions:

Certain predictions were made to test association between some pairs of variables, they were that:

H₁₁: The delay in **academic** promotions was directly related to the number of children in the family;

H₁₂: The expectation that **academics and nurses** schedules be easily adaptable to cope with private life burden slowed down their careers;

H₁₃: Higher level career of **spouses of academics and nurses** predisposed the latter to extra work;

H₁₄: Number of academic publications was related to level of private life involvement.

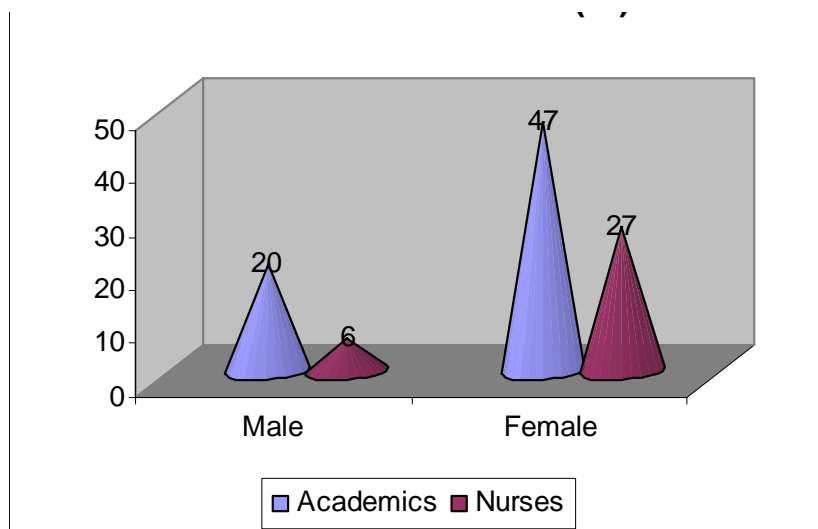
5 Methodology:

Eighty-nine (89) respondents consisting of 60 academics and 29 nurses were picked using simple random sampling. Female respondents were targeted more because practical experience in Nigeria showed that the female professionals were affected more than their male counterparts, hence the variation in the number of male/female members in the sample. In addition, the size of representation of the two categories, academics and nurses reflected the size of each subset of the population; nurses were sampled based on morning, afternoon and night shifts strata while academics were picked at random by convenient sampling.

Sampled academics were staff of Obafemi Awolowo University, situated in the south-western part of Nigeria; all of the nurses' respondents were also staff of the University Health Center within campus but the rest, also university staff, were attached to the institution's public health clinic at the town center. Collected primary data was analysed using simple percentages and cross tabulations. Pearson's Product-moment correlation coefficient was adopted to assess the extent of relationships between the identified variables.

6. Results:

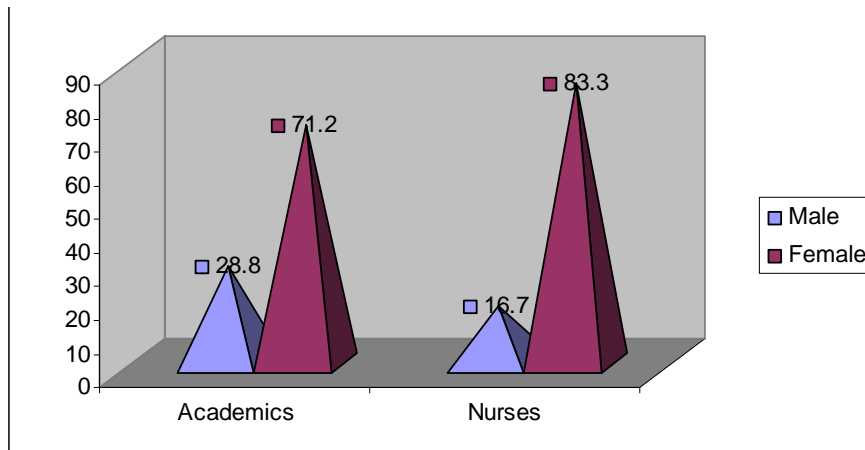
Figure 2: Distribution of sample by Gender and Profession (%)



Source: Charted from Field Data, 2008

Figure 2 showed the percentage distribution of the whole sample; 20% of the 89 total respondents were male academics and 47% were female in the academia; male nurses were 6% with female nurses making up for the remaining 27% of the sample. The sample location, the university, had nurses in the minority compared with academics because of the small nature of the university health center.

Figure 3: Distribution of each profession by gender (%)



Source: Charted from Field Data, 2008

Figure 3 gave a gender-based breakdown of each profession as follows: the academics sample comprised of 71.2% female and 28.8% male while nurses had 83.3% female and 16.7% male. The size of the female gender content of the sample for this study reflected a deliberate sampling bias towards female because popular opinions and personal experiences in Nigeria favoured the suggestion that career women were more affected by responsibilities outside of careers than the men.

Table 1 (a):

Academics by Marital Status (%)

	Male	Female	Total
Married	29	64	93
Single	0	7	7
Total	29	71	100

Source: Field Survey, 2008

Table in 1 (a), indicated a skew towards married respondents as they were key to the study. The academia sample contained 64% married female, 29% married male and only 7% single female with no single male. Table 1 (b) on the other hand showed that the nurses sample had 73% married female, 17% married male, 7% single female and unlike the academic respondents, it contained 3% divorced female. Marital status assisted the understanding of how family life, particularly spouses and children impact the career of individuals whether you are a male/female nurse or academic.

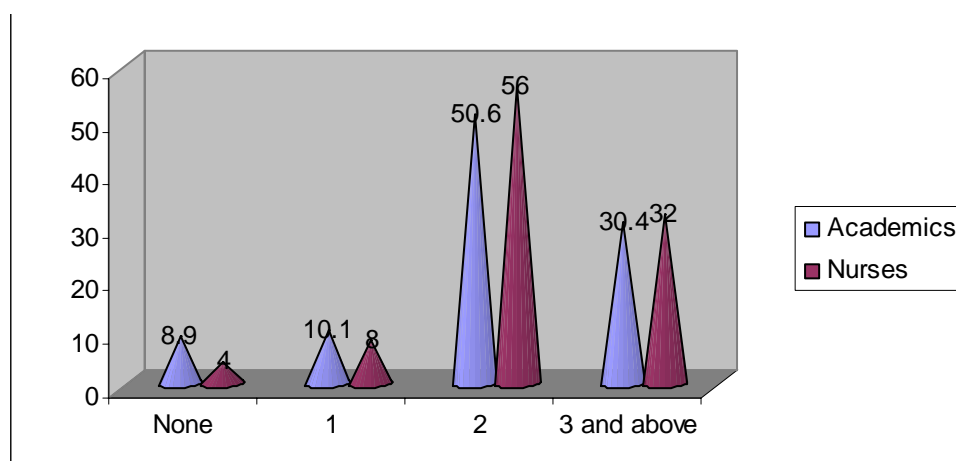
Table 1 (b):

Nurses by Marital Status (%)

	Male	Female	Total
Married	17	73	90
Single	0	7	7
Divorced	0	3	3
Total	17	83	100

Source: Field Survey, 2008

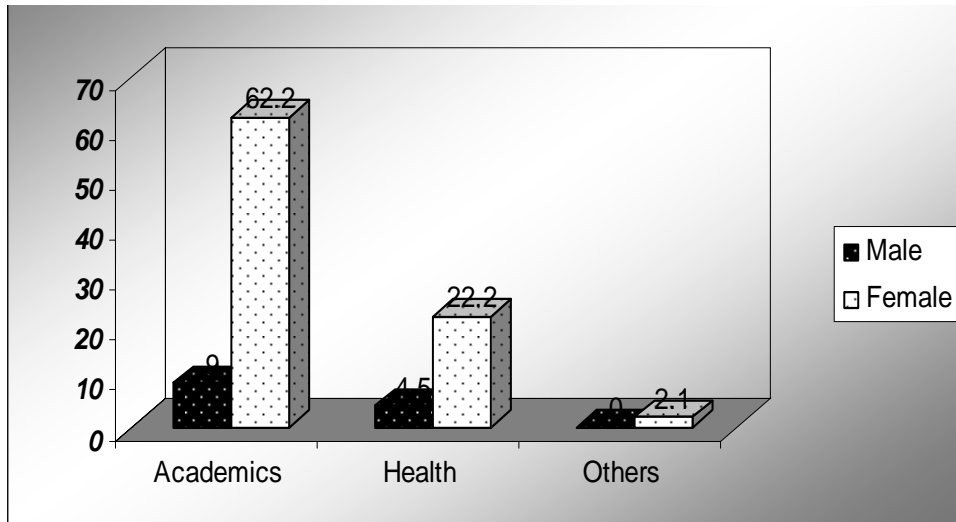
Figure 4: Distribution by profession and number of children



Source: Charted from Field Data, 2008

The graph in figure 4 highlighted the components of the sample by profession based on the number of children in the family. 8.9%, 10.1%, 50.6% and 30.4% of respondents in the academia reportedly had no child, 1 child, 2 children and 3 children & above in that order. On the side of sampled nurses, 4%, 8%, 56% and 32% of them had no child, 1 child, 2 children and three children & above respectively. From personal experience, the number of children in each family in Nigeria usually dictates how late or early individuals, women in particular, start and rise in a career. In most cases, women had been suspected to be late career starters than men because they'll have to stay home and nurture most of the children, sometimes through teenage years in the least, or even support spouses through his own career before embarking on her own career pursuit, by which time they could be mid-life and their male counterparts were either at mid-careers or close to the peak.

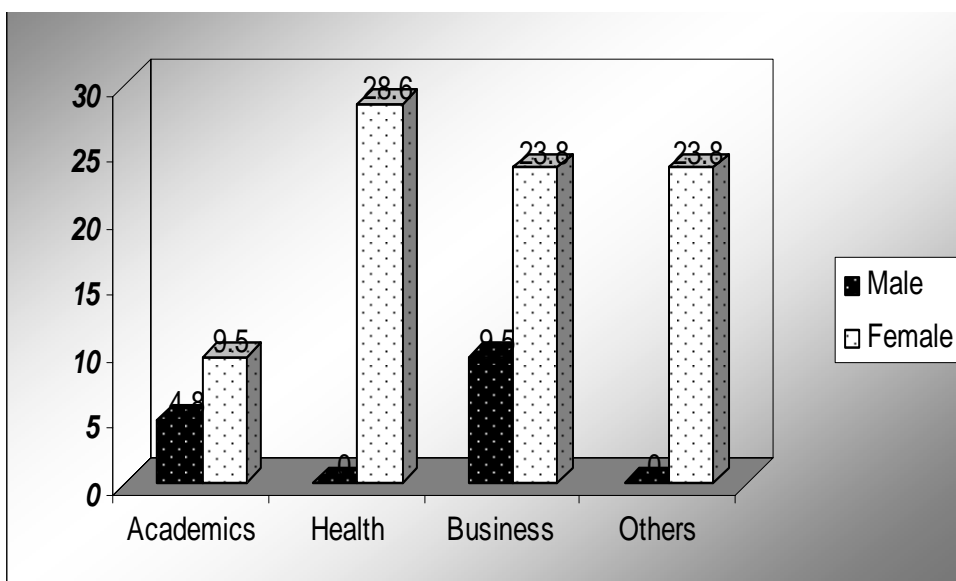
Figure 5 (a):_Distribution of Academics by spouses' profession



Source: Charted from Field Data, 2008

Going by the chart in figure 5 (a), 62.2%, 22.2% and 2.1% female academia in the whole sample reported that their spouses were respectively academics, health workers and others, while 9% and 4.5% male counterparts claimed spouses to be in academics or health. Female nurses members of the whole sample in figure 5 (b) recorded having their spouses in the academia, health, business and others areas in the following order 9.5%, 28.6%, 23.8% and 23.8%.

Figure 5 (b):_Distribution of nurses by spouses' profession (%)



Source: Charted from Field Data, 2008

Table 2:

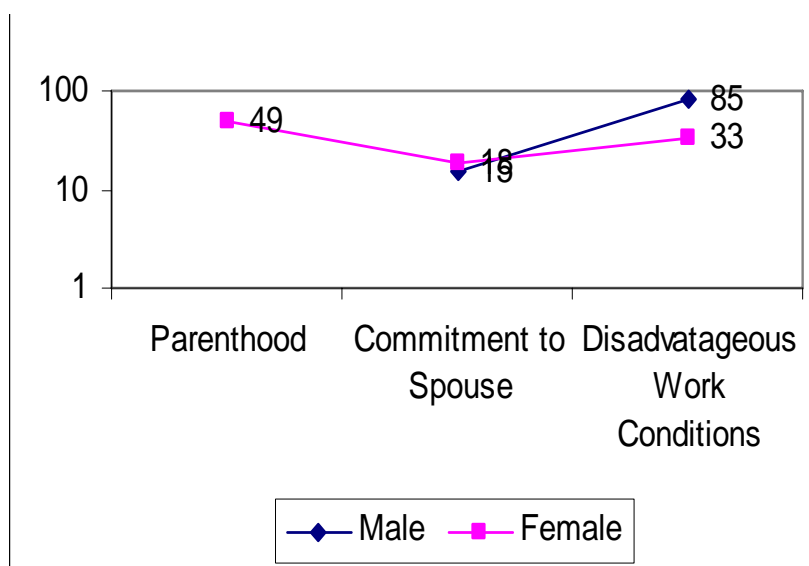
Number of Publications by Academics (%)

Number of Publications	Male	Female	Total
0 -10	16	45	61
11 – 35	15	24	39
Total	31	69	100

Source: Field Survey, 2008

From table 2, 16% male and 45% female claimed having 10 publications or below with 15% male and 24% female claiming to have 11 to 35 publications so far in their careers. Family and community obligations, more often than not, were known to act in opposing directions to career development; the pressure signs of other life roles in female academics can be visible with majority of them, 45% of all academics sampled claiming to have between 0 and 10 publications, while only 24% of the sample had between 11 and 35 publications. When these figures were compared with male academics, there were discrepancies; the number of male academics who claimed to have had 10 publications or below were quite close to those with 11 to 35 at 16% and 15% respectively, bearing in mind that the academic sample contained 28.8% male and 71.2% female. Essentially, certain variables had to be responsible for the differences in the publication figures and would be discussed at the latter sections of this paper.

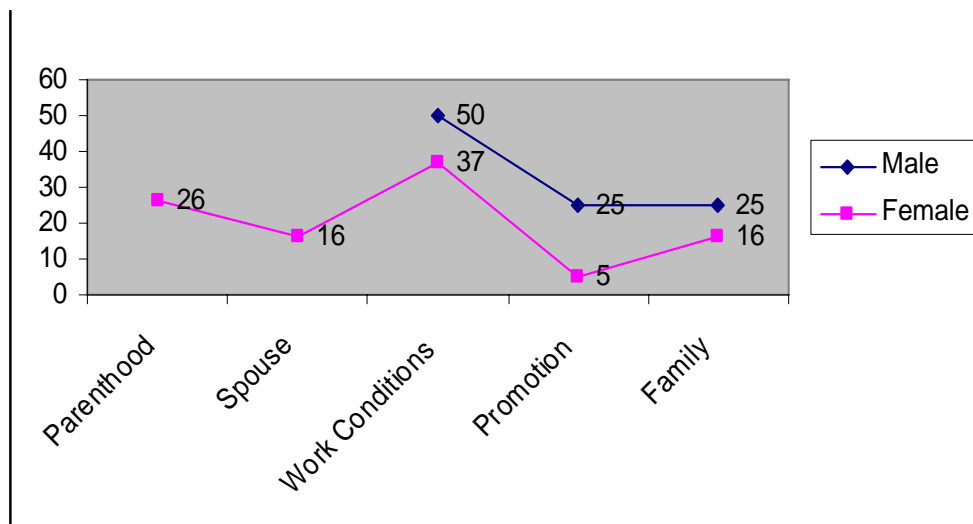
Figure 6 (a): Academics reasons for delay in career progression (%)



Source: Charted from Field Data, 2008

In figure 6 (a), 49%, 18% and 33% female in the academia pointed to motherhood, commitment to spouse and disadvantageous work conditions, in that order, as reasons for delay in career progression and their male colleagues cited 15% commitment to spouse and 85% disadvantageous work condition for the same issue. Clearly, no male academic respondent picked parenthood/fatherhood as a distracter for their career while the figure for female was 49%; this could be a pointer to something significant. Often, most men grow up being made to believe that daily basic care of children, particularly when they were young, should be the sole responsibility of mothers, putting unnecessary burden on career women in order of juggling the multi-roles.

Figure 6 (b): Nurses reason for delay in career progression (%)



Source: Charted from Field Data, 2008

In figure 6 (b), female nurses respectively cited reasons for their career retrogression as 26%, 16%, 37%, 5% and another 16% for motherhood, commitment to spouse, disadvantageous work conditions, double standard in male/female promotions, and commitment to extended family in that order. Contrastingly, male nurses put the percentages for some of the same reasons as 50% disadvantageous work conditions, 25% double standard male/female promotion policies and the remaining 25% as commitment to extended family. All these variables were later shown to have varying degree of effects on female and male career progression/retrogression in Nigeria.

It was interesting to note again that in figure 6 (b), no male member of the sampled nurses picked parenthood /fatherhood or commitment to spouse as distracters in their career pursuit and this resembled the case for academics. Nigerian society somewhat lay a lot of emphasis on the man making provisions for most of family needs; unfortunately when the role reversed and the woman was in a better/higher demanding job and became the family's breadwinner, she would rather have to combine this with the other pressing roles, resulting in too many full time jobs rolled into one person.

Table 3 (a):

Academics' Responses to whether Spouses' Professional Status is Higher (%)

	Male	Female	Total
Yes	0	59	59
No	30	11	41
Total	30	70	100

Source: Field Survey, 2008

Table 3 (a) showed that 59% female academic members of the sample reported that their spouses professional status was higher than theirs with 11% responding to 'no'. 30% male rated their partners' professional status higher than their own. Conversely, in table 3 (b) only 42% of female nurses agreed that their spouses' professional status was higher, with 19% male and 39% female nurses disagreeing that their spouses' status was higher. In essence, a higher percentage of female academics than nurses had spouses who were at a higher professional status.

Table 3 (b):

Nurses' Responses to Whether Spouses Professional Status is Higher (%)

	Male	Female	Total
Yes	0	42	42
No	19	39	58
Total	19	81	100

Source: Field Survey, 2008

Table 4 (a):

Academics Responses to Whether People Expected Their Profession to be Easily Adaptable to Private Life (%)

	Male	Female	Total
Yes	21	57	78
No	7	15	22
Total	28	72	100

Source: Field Survey, 2008

In table 4 (a), 57% of female academics as opposed to 21% male counterparts noted that, as professionals, the society expected them to be able to cope comfortably with the extra burden from the other life-roles; in nursing, though, an even higher 63% female compared with 15% of their males colleagues reported so on societal assumption/expectation to cope with the extra responsibilities.

Table 4 (b):

Nurses Responses to Whether People Expected Their Profession to be Easily Adaptable to Private Life (%)

	Male	Female	Total
Yes	15	63	78
No	3.6	18.4	22
Total	18.6	81.4	100

Source: Field Survey, 2008

Correlations:

Table 5 (a): Correlations between Variables

		Number of children	Proportion of Time Committed to Career Development	Length of Time Between Promotion
Number of children	Pearson Correlation	1	.382	.468*
	Sig. (1-tailed)		.040	.034
	N	79	22	16
Proportion of Time Committed to Career Development	Pearson Correlation	.382	1	
	Sig. (1-tailed)	.040		
	N	22	26	0
Length of Time Between Promotion	Pearson Correlation	.468*		1
	Sig. (1-tailed)	.034		
	N	16	0	19

* Correlation is Significant at the 0.05 level (1-tailed).

From tables 5 (a) and (b), the following were the results of the hypotheses tested for relationships between each pair of variables:

Number of children and delay in most of the stages of promotion for the academics were positively correlated at $r = 0.47$, $p < 0.05$ (table.5a). This indicated that the more the number of children an academic had, the more his/her promotion got delayed. Marital status and societal expectation that academics and nurses must necessarily be able to cope with the pressures of other life responsibilities also positively correlated at $r = 0.36$, $p < 0.01$ (table.5b); the implication was that once you are married, especially women, society expected that the nurses shift duties and academic roles should not prevent them from performing those duties outside of your careers.

A Spouses' higher professional status and societal expectation that the professionals should accept and just get on with all the added responsibilities returned a significantly correlation of $r = 0.35$, $p < 0.01$ (table.5b). In Nigeria, a female academic or nurse whose spouse was higher in status must of necessity take on the extra burden without complaints, otherwise she would be labelled. Lastly, the number of academic publications and involvement in private-life roles showed significant relationship at $r = 0.49$, $p < 0.01$ (table.5b); here more involvement in activities other than career obviously reduced the number of publications for academics and the female gender was worst hit. All relationships returned positive correlation, though relationship between academic publications and other roles appear to be not too strong, nonetheless positive; other relationships could also be identified from the two tables.

Table 5 (b): Correlations between Variables

		Marital Status	Expectation to Adjust Career to Cope with Other Roles	Number of publications	Private life slows down career progression	Level of Spouse's professional status
Marital Status	Pearson Correlation	1	.359*	-.144	.026	.107
	Sig. (1-tailed)		.000	.164	.409	.172
	N	87	83	48	79	80
Expectation to Adjust Career to Cope with Other Roles	Pearson Correlation	.359*	1	.166	.386	.354*
	Sig. (1-tailed)	.000	.	.129	.000	.001
	N	83	85	48	80	81
Number of publications	Pearson Correlation	-.144	.166	1	.492*	.182
	Sig. (1-tailed)	.164	.129	.	.000	.113
	N	48	48	49	47	46
Private life slows down career progression	Pearson Correlation	.026	.386	.492*	1	.112
	Sig. (1-tailed)	.409	.000	.000	.	.167
	N	79	80	47	81	77
Level of Spouse's professional status	Pearson Correlation	.107	.354*	.182	.112	1
	Sig. (1-tailed)	.172	.001	.113	.167	.
	N	80	81	46	77	82

** Correlation is Significant at the 0.01 level (1-tailed).

7. Conclusion:

Career building challenges in a developing nation like Nigeria is enormous; managing career therefore could be very concerning within an environment increasingly susceptible to societal stereotypes in defining gender roles. Parenthood, spouses, family and community roles constituted major obstacles to Nigerian academics and nurses' careers with a detrimental effect on these professionals, particularly the female members.

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The more involved the professionals were in these other roles, the more daunting time management and moving up the career ladder became. Women were more adversely affected by commitment to parenthood and their spouses such that most were late career starters or for early starters, career took second place to other roles. It was therefore high-time that these professionals sit-up and find a way of making their careers a priority while not totally neglecting the other roles; adequate time-management would be a great assistance to these groups. The society also needed to be educated that having a career would not be enough but what individuals make of it justify being part of that profession; people should there not be pressurised or labelled for given their careers a priority at certain times in their existence.

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