

## DICHOTOMY IN BACHELOR OF SCIENCE (B.SC. NURSING) AND DIPLOMA IN NURSING AND ITS ANEMIC EFFECT ON THE NURSING PROFESSION IN NIGERIA

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**ABSTRACT:** *The Nigerian nursing profession for long has suffered from a dichotomies relationship between the holder of B.sc and Diploma in nursing. This unhealthy relationship is inherent in the system and a product of menaces such as faulty definition of boundary line separation, poor job differentiation, and administrative lapses, imbalance in harmonizing a formidable relationship between knowledge and experience. The study attempted to examine the dichotomies relationship among the diverse class and its anemic effects on the profession in Nigeria. The secondary data of the study were generated from an array of both published and unpublished materials such as textbooks, journal papers, newspapers, magazines, handbook of the organization, and internet materials among others. Interview was the major instrument used to elicit data for the study. It was discovered that administrative lapses, faulty line separation among class in the profession and the non-unified curriculum has contributed to the dichotomies relationship among the diverse class in the profession. Recommendations such as need for clear boundary separation among the diverse class divide in the profession, need for a unified and defined curriculum, balancing of a health relationship between qualification (Knowledge) and experience, Job differentiations and a lot of others.*

**KEYWORDS:** B.sc and Diploma Dichotomies relationship, anemic effect in the Nursing Profession, administrative lapses and experience versus qualification

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### INTRODUCTION

Nursing as a profession in Nigeria came to lamb light right from the pre-colonial period and was fully institutionalized during the colonial period. This is because the colonial governments in the past give higher premium to the establishment of hospitals (Saleh, 2010). The practitioners were mostly the white men and later, few blacks that were trained on the practical aspect of the profession were absorbed and allowed to practice. After the departure of colonial days, the profession was integrates in the Nigeria public service along with the Nigeria police and some other government agencies and departments (Stephenson, 2010).

The profession became more prominent in the early of part of 1970(s) and this was as a result of the regards which the wife of the then president (Yakubu Gowon) who was also a practitioner in the field help to play a role in upgrading the pay structure and the welfare package of the Nigeria

Nurses. Nursing profession at the time was not practiced as it was being done in already developed societies (Abraham, 2008). Personnel in the field are only trained for a period of a year and emphasis were mostly laid on the practical aspect of the field than the paper work. As time kept moving, and more specifically in the later part of the 1970 (s), the Nigeria Nursing Council which was the only regulatory body entrusted with the will power to, examine, register and license practitioners in the field approved the formation of the 3 years schooling to help in the training of nurses in line with the contemporary practice in the country (Saleh, 2013). Entrance into the school is mostly based on interest and graduands are holders of diploma. This development thus leads to the upgrade and the wipe out of centres that produces practitioners with ordinary certificate as qualification and those who undergo training through apprenticeship (Smith, 2015).

In the later part of the 1980(s), four universities, i.e.: A B U Zaria, University of Ibadan, university of Lagos and UNN commenced Bachelor of science programmes in nursing and the entry requirement was strictly science. This development further laid ground in compounding the issue (Muffet, 2000). What turned to be a lull was that both the diploma holder from other school of nursing or school of midwifery and the person that underwent the degree programme would sit for the same exams? The syllabus and curriculum of learning is the same and given by the same body (Saleh, 2010).

It is the passage of the examination that determine who is qualified and who is not. It is the same exams that will be used for the issuance of license of practice for both the degree holder and the person from the diploma awarding institutions. What often led to the disparity are as well those factors that often create the confusions in the working place (Stephenson, 2010). The issue of dichotomy between Diploma and Bachelor of Science in the Nursing profession in Nigeria has become a serious problem. The contention is that one is called a degree holder and the other a diploma holder whereas it is the same council examination they all pass through (Saleh, 2010).

The major differences are in the names of the schools but at the tail end, the examination to determine the qualification is the same irrespective of the differences in the names of school attained. This has often led to abuses and confrontational relationship between the holders of degree and diploma in the profession (Stephenson, 2010). It does not stop at that; it has also appeared in the area of promotion and consideration for appointment. The degree holder is employed at level 8, steps (2) while the holder of diploma is employed at level 8, step 1(Stephenson, 2010). At the starting, the two enjoyed the same privilege and advantages. This development thus affects the patronage of the degree programme since it has no differences with the Diploma in area of practice. In the early part of 1990(s), the Nigeria Nursing council then created some differences by making a mandate that degree holders are to head all the nursing section and also place the ceiling that a diploma holder can attain (Smith, 2015). The essence of this is to encourage the growth of knowledge in the field in the federal civil service. The holder of first degree can attain the status of a director and permanent secretary while the holder of the diploma cannot reach such cadre (Sule, 2015).

The bust stop of a diploma holder is level 14 while that of a degree holder was level 17. This development does not seem to cure the problems that exist between the degree holder and the

diploma holder at work (Smith, 2015). The usage of experience re-appeared. The diploma holder laid emphasis that their schools are more practical oriented and holders of diploma have wealth of experience than those with the degree certificates. This opens another window for a new confrontation at work and on the job (Sule, 2015)

### **Statement of the Problem**

One of the basic problems which prompted this study is the weak nature of the modus operandi that is used to determine the qualification of the practitioners in the Nigeria Nursing profession and the attendant problems associated with it at work (Smith, 2015). The yardstick for the determination of qualification is the same while there are values attached to institution of graduation. What is raising eye brow is that which syllabus and examinations is used for the class separation in the profession? (Sule, 2015)

Another problem which also motivated the study is the administrative lapse which often appeared in terms of recruitment, levels of entrance, ceiling attached with qualification and the subject of experience (Sule, 2015). It is in line with this backdrop that the following research questions were posited to guide the study:

- a. What is the particular criterion for consideration for practice in the Nigeria Nursing profession?
- b. In what ways do the administrative lapse associated with the Bachelor of Science and Diploma dichotomy affects the nursing profession in Nigeria.

### **Objective of the Study**

The main objective of the study is examined the dichotomy between Bachelor of Science and Diploma in Nigeria nursing profession and its attendant effects. The specific objectives are

- a. To examine the criterion use for the line separation between Bachelor of Science and diploma in the Nigeria Nursing profession
- b. To ascertain the effect of the administrative lapse on Nursing profession in Nigeria

### **Assumption of the Study**

- a. The standard for judging the qualification of practice as a nurse in Nigeria has help in building the dichotomy between Bachelor of Science and diploma in the nursing profession.
- b. The administrative lapse associated with the dichotomy has a significant effect on the nursing profession in Nigeria.

## **METHODOLOGY**

The research approach to this study is the documentary research design. It mainly entails the study of documentary materials. The research relied on secondary data drawn from an array of published and unpublished materials relevant to the study such as books, journals, magazines, conferences and seminar papers and newspapers. Other sources of secondary data were reports, white papers of investigation and other quantitative publications related to the problem of the study were all systematically analyzed.

The method by which data were generated for this study is the secondary source. There were qualitative soft publication and entries in recognized and official websites. Others include online

version of international dailies, books, journals, reports, seminar and conferences paper, national newspapers etc. Being a non-experimental research, the use of qualitative descriptive analysis is employed for the analysis of the generated data. This is done through careful analysis of the formulated hypotheses in line with the reviewed literature. Thus, under the findings and discussions, each discourse is based on some background assumption presented in the form of hypotheses. The postulated assumptions are subsequently upheld.

In interpreting our data, the relationship between the dichotomies classes and the anemic effects on the nursing profession in Nigeria was established at both theoretical and empirical levels. Empirically, we used a qualitative and historical method that was critical and analytical in providing descriptive and historical details. This was also complemented by descriptive quantitative analysis. The qualitative and historical method provided us with clear perspective into our research problem by giving us the opportunity to understand the historical details and accurate account of the past and to use the past to discuss the present.

## CONCEPTUAL EXPLICATION

### Concept of Nurse, Nursing and Administrative Lapses

The word nursing is a derivation of the word *nourice* and this denote to give medical and other care for the sick, the task of looking after people who are sick as injured. Nursing is the process of caring for or nurturing another individual. According to Carruthers (2010) nursing refers to the functions and duties carried out by person who have had formal education and training in the art and science of nursing. In the word of Saleh (2010), nursing is a profession of trained experts who look after patients in the hospital setting. A nurse on the other hand is the personnel or the very person that is trained to take care of the sick person.

Professional nurses are versatile in a lot of areas such as psychology, biology anatomy and a lot of other area. The essence of their versatility is to aid them to help in the restoration and maintenance of health in their clients'. There is two categories of nurses. We have the licensed practical nurse and the registered Nurses. The profession has a lot of specialties such pediatric, anesthesia, community nurse and nursing research (Saleh, 2010).

*Administrative lapse* is a word which is use to denote error or a gap in the practice of administration. It also deals with blunder, failure or slips that are committed while carrying out an administrative task. In the word of Stephenson (2010), it is a falter as drift from the normal and conventional administrative practices. *Dichotomy* on the hand is the contrast, the irreconcilable difference or the contradiction that is associated with a particular function. In the word of Ahmed (2010), Dichotomy is a kind of separation and disharmony that is associated with particular work, activities or profession. From this, it can be deduced that it is a kind of gulf that is associated with two contending forces.

### History of Nursing and Nursing Profession in Nigeria

In the early part of man's history, nursing care was usually provided by volunteers who had little or no training. It was later seen as a profession for poor and indigene women due to the fact that hospitals in those days were dirty and pestilent place where patients usually die. As a result, those

who provide the services were common person who had been imprisoned for drunkenness or person without work (Muffet, 2015). Modern nursing began in the mid 19<sup>th</sup> century with the advent of the Nightingale training school for nurses. In the U.S.A, the Spanish – American war and later World War 1 established the need for more nurses: As a result of this, nursing school increased and their enrolment (Bello, 2010).

The Rockefeller formation and its publication on the need to detach nursing school from hospital in 1920 lay the foundation upon which university began the studying of nurses. In Nigeria, the nursing profession is as old as the history of the advent of missionaries in the country. It was later broadened with the starting of colonial rule and the British nurses trained the Africans on the act and its practice (Saleh, 2013). With the amalgamation of North and south, it became part of the colonial civil service and training is by mode of apprenticeship. At the independent of the country, hospital and some faith base group began to train persons and at the end of their training, they are awarded with certificate in nursing (Saleh, 2013). Then in the early part of 1970 (s), Nigerian government started to build specialized schools known as school of nursing for the training of nursing personnel. At the end of the training, they will be awarded with diploma and license of operation (Smith, 2015).

In the later part of 1970 (s) five universities in Nigeria have introduced the courses and at the completion, graduates are awarded with B.sc in nursing. It is expected of every student to pass the Nursing Council exams and with the pass; license of operation will be awarded to them for practice. It is at this time, professional fields were further introduced and are known as post basic (Smith, 2015). Ranges of course are studies such as: pediatric, community nursing, anesthesia, theater nursing, and a lot of other. The Nigeria Nursing council is in charge of the regulation, administration and control of the nursing profession. It is the only body that registers and gives license of operation (Stephenson, 2010). The Nigeria Nursing council also conduct the examination of certification in the nursing profession and also as the right to withdraw or bar anyone from practice if found wanting.

## **DICHOTOMY IN THE NURSING PROFESSION**

The practice of nursing or the nursing profession in Nigeria began during the colonial period. Most of the trained personnel do not pass through formal training such as schooling. A lot do not pass through formal training as it was done in Western countries (Nwachuku, 2001). In Nigeria, nurses in the past were only trained on the practical aspect and application of the field. In the past, entrance into the vocation is chiefly based on interest and nothing else. Toward the elapse of the colonial era, they were sent for short term courses and at the end are awarded with certificate of practice (Aye, 2004). With the continuous demand of their service and the expansion of health institution in almost every state across the country, a lot of the schools surfaced such as school of nursing and school of midwifery. The essence of their formation is to encourage their spread in virtually every nook and crannies of most states (Aye, 2004). Diploma were awarded in the specialized schools and the holders were much respected than the holders of certificate.

It was seen as more honorable but has no any special preference in the working place. Experience was what matters and is highly cherished. The advent of Bachelor of Science (B.sc Nursing) has also opened way to the problem of dichotomy in the nursing profession. At the starting, four

universities in the whole of the country began the field in the later part of 1980s (Lasky, 2002). These universities are: ABU, Zaria, University of Ibadan, University of Nigeria, Nsukka and University of Lagos. With the continuous growth in awareness, other universities across the country later incorporated the discipline as field of study. This Development further created a serious imbalance and skirmish in the profession (Bello, 2010). In the 1990s, the entry point of a degree holder (B.sc) and Diploma holders are the same, which is great level 8. What often created the difference are their steps. Throughout the 1990s to the later part of the millennium era, the duo enjoys the same privilege and height (Bello, 2010). Some noticeable differences are that the holder of degree (B.sc nursing) would head a department while the other will not and none is answerable to the other because emphases are mostly built on experience (Aye, 2004).

This development further generates controversy in the profession. The diploma holders often bragged of experience while the B.sc holders use paper qualification as their strong hold. This feud continues to exist and is still in existence (Bello, 2012). The major problem which continues to fuel the problem is the faulty plans laid for the profession and this often manifested in the form of the standard and prescribed by the national Council of Nursing for the professional examination which must be taken and pass by all and sundry in the profession (Smith, 2015). The syllabus and the exams are the same and are mostly written at the same period. What often raises the eye brow is why is the different when all are the end product of the same professional exams that guarantee license of practice. The exams which a B.sc holders will do at the final year (fifth year of studying) and the one which the diploma hold will do in his third year of studying are the same and at the same time (Sule, 2015). The only differences are the name of the institution attained and where one is being trained. With the continued growth and the widening of the problem, line separation was created and thus the changes in some practices that were so common in the past. Some of them are, the holder of first degree can attain the rank of a director (that is level 17) while the bus stop of a diploma holder is level 15 (Sule, 2015).

Another challenge that further widens the feud is that the diploma holders were mostly being taught by persons with weaker qualifications such as diploma and degree whereas those who passes through the B.sc programmes were taught by ample of person who have attain different academic height (Ahmed, 2010). But this is only the theoretical aspect of the argument. The holder of diploma often backed their stands with wealth of experience in which most of them claimed that the university's graduates do not have and often come and learn the practical sphere of the work under their watch (Abraham, 2008). They often use experiences and the professional examination which they all attain from the Nursing council as yardstick of their justification.

### **Administrative Lapses in the Nigerian Nursing Profession**

The lapse associate with the profession was majorly laid by the Nigeria Nursing Council (NNC) and the overt influence of politics on administration in the council. The Nigeria Nursing council shows from its practice that the B.sc in Nursing is nascent unlike the others- Diploma and certificate. The Nigerian Nursing Council is the only institution with the veto power to determine who is qualified to practice or not (Ademolegun, 2002). The standard and channel at which the holder of degree and diploma pass through are the same examination that guarantees their qualification to practice. This development does not show a kind of balance in the profession. Worse of it is that there is no kind of detach in form of line separation from the council. This would

have help to create the needed differences than to allow the practitioners in total disarray (Smith, 2015).

What should be used as a determiner or use to issue out license is not clearly defined. Is it the certificate obtained from the university? Or the license which are given after undergoing the Nursing Council examination? Another lapse that is associated with the field as a profession is the creation and handy work of the ministry of health (Stephenson, 2010). History has it that the jumbo pay which the practitioner of the profession were earning emanated in the early 1970(s) when the wife of the then president (Yakubu Gowon) who was equally a practitioner of the field influence the administration to consider a high pay to the profession due to the risk associated with the work itself (Stephenson, 2010). It was at this juncture that what amount should be given to the holder of certificate and a diploma became an issue. This thus led to the harmonization. Experience was given premium and the holder of diploma were given administrative consideration such as headship of unit, job enlargement and were further exposed to training unlike the holder of certificate who do not underwent a formalized training and school chore (Smith, 2015).

The weakness kept on moving and the ministry in its little imagination thought that the holders of the certificate are elderly and with time, they would all retire. But there was more to it, as the holder of certificate give out due to factors such as retirement and societal awareness (Aye, 2004). Centers that trained people at that path faded away and as it fade, the Bachelor of Science in Nursing profession reappears and thus the beginning of the feud between the diploma holder and holder of B. sc in the profession. There were serials attempt to enclose the differences such as placing a ceiling for the height of a diploma holder at great level 14, heading of the department by the holder of degree but all to the contrary (Sule, 2015). This is because what often emerged in the working place is the quality of the service rendered, experience and wealth of experience which were not reconciled in the administrative setup of the profession.

Another lull that is also a migraine in the administrative practice of the profession is that there is a growing emphasis on area of specialty and the feud of the diploma and B.sc in nursing dichotomy which has forced a lot of the diploma holders to aspire for the B. sc qualification (Ahmed, 2010). Those with science background do not have hitches in their quest of satisfying the quest whereas those with background of art and social science were left to either be contented with it or look for ways to obtain the science (O'level) in order to secure admission in the universities (Sule, 2015 ). Those that tried to correct the O'level issue and fail sees the implant of the science O 'level as an attempt to frustrate them at work. This development then opened way for the mass rush for other openings - post basic nursing in fields such as theatre nursing, Midwifery, anesthesia, Pediatric, community nursing, research in Nursing and general nursing. These are all in the name of satisfying their quest for elevation (Ahmed, 2010). The post basic nursing are professional leaning and mostly considered. Persons who attended it courses are give special preference and some certain allowances as a result of their job enlargement. However, this does not make it to look like a B.sc or Master of Science in its deep and operation. The starting point differs (Stephenson, 2010). The holders of B.sc are employed at level 8 step 2 while those who holds certificate of post basic nursing are still at level 8 step 1.the only differences is in their allowances and bonuses. The imbalances in the act of administration in the profession continue to affect performances and as well, creating variance and fracas among the practitioners of the profession (Bello, 2010). There are others issue such as absent of job mutability and plasticity. These are as a result of the lapses

that are inherently built in the system. This will continue to exist because; the profession in itself was not started on the basis of paper qualification but practical orientation (Smith, 2015). There was no class room preparation and curriculum to create a kind of detach and professional separation between various classes in the profession. Its training at the start of time was based on apprenticeship with older persons teaching the younger ones on how to care for patients (Ahmed, 2010). The justification was on experience, expertise and best service delivery which in modern time are seen as obsolete and outmoded.

### THEORITICAL UNDERPINING

Dialectic theory was adopted as the theoretical underpinning of the study. It was propounded in 1993 by Barbara Montgomery. It was later developed by scholars such as Irwin Altman, Barter and Werner in 1994 (Stephenson, 2010). The theory stated that the central concept that often prompts reaction in a system is contradiction. It further buttressed that a contradiction is the dynamic interplay between unified opposites. Three terms are important in understanding this concept. Central to the notion of opposition is mutual negation. Another variant of the theory is that when a society or a system is stratified into class and there is no proper definition of boundaries and role, contradiction in different forms are bound to surface.

The theory has the following tenets:

- (a) Where there is contradiction, progression is a problem in a system
- (b) Contradiction are product of class formation
- (c) When there is no boundary and line separation in a system with strata of class, conflict often surface
- (d) Lapse and conflict are common feature of a system with no define class boundary.

The theory is applicable to the study in the following directions:

(a) **Weak Boundary and Class Separation:** The nursing profession in Nigeria is characterised by weak boundaries and the existence class do not have proper clear line separation. The holders of B.sc and diploma in the nursing profession normally undergo or pass through the same examination and it is at the same time. It is this qualifying exam that is used to register practitioners in the field. There is as well no clarity as in term of the syllabus and curriculum that is set for a particular class. Class in term of B.sc and Diploma in the profession are the function of the school which the individual attained

(b) **Administrative Lapses:** In the Nigerian nursing profession, there are a lot of lapses which often arises from administrative practice and functions. The contradiction that are inherent in the system has exposes the system to administrative crisis. This mostly manifested in the form of act such as the inability to define a proper demarcation between classes of qualification in the profession, skirmish in defining content and curriculum of studies, poor and weak criterion for registration and issuance of license of practice among many others.

(c) **Poor relations among diverse element in the profession:** The practitioners in the profession that is the B.sc, diploma, the certificate holders and holders of post basic mostly work in disarray. The holders of Diploma qualification look down on the holders of certificate just like how the holders of B.sc down casted the holders of diploma. With all this shows, it is the same qualifying exam the pass through. The place of post basic nursing is not well defined and is neither seen as a degree nor a master degree programme

(d) **Experience versus Qualification:** This is also another facet that has compounded to a lot of problems in the nursing profession in Nigeria. Those who attained Degree awarding institution



often brag of their B.sc qualification and the Diploma as well as the certificate holders often use experience as their stronghold. Despite the imbalance and disharmony in reconciling the differences, it is the professional examination that is use to determine and as well guarantee their license of practice in the profession.

## DISCUSSION AND RESULTS

a. In the course of the study, it was found out that the contradiction and the dichotomies relationship between the holder of B.sc nursing and Diploma in nursing are the creation of the system and its lack of supportive plans in tandem with the ever increasing demand and patronage of the service of the practitioners of the profession. The discipline from time memorial was conceived as more of a vocation than a career. It is the constraint associated with striking the balance between the former (what is learn) and what is taught that opened up way for the separation.

b. It was also discovered that the place of experience was relegated in the profession. At its inception, it was a vocation that is learned through apprenticeship. The wealth of experience is cherished and utilizes at the time past unlike in the contemporary time, where paper qualification supersede the experience and thus the contradiction in the B sc and Diploma in the nursing profession. This also tally with the findings of Ahmed (2010) who stressed:

During the colonial period, the nursing profession emerged through apprenticeship and not through School system. This usage of certificate is a nascent development and started in the 1970(s). It was certificate, then diploma and now is B.sc. In the days of old, promotion and headship is based on experience, year of stay and not the paper qualification that the modern society is currently using

c. The study also found that the Nigerian nursing council has also help in spreading the challenges and problem associated with the dichotomies relationship between B.sc and diploma in nursing. The body has contributed to the skirmish by the way of conducting the same qualifying examination for the B.sc and diploma holder, and issuing the same license of operation to both of them. The Nigerian nursing council has also failed to create a kind of mental separation that will help to distinguished and as well set a line demarcation between the two classes in the profession.

d. In the course of the study, it was also uncovered that the Nigeria nursing council has not in any way design a particular course of action and course outline that will also help to redefine who a diploma holder is and his differences from the holder of B .sc in the nursing profession and as well in the work setting

e. In the course of the study, it was also found out that there are a lot of administrative lapses that surfaced as a result of the faulty line separation between the holder of B.sc and diploma in nursing. This mostly manifested in the form of starting point of employment where a B.sc holder is consider at level 8 and step 2 while the holder of diploma is absorbed at great level 8 and step1. There are also other lapses such as headship of units (and this does not consider years of active service), administrative privilege such as openings for retraining on the job, on job training and a lot of others that are so common with the B. sc holder in the profession.

f. The mode of entry in the profession –school of nursing or university system, which Standard should be used for admission and the commonality of the diploma holders more than the B.sc holders is a serious factor that further deepens the conflicts in the profession. B. sc in nursing is a recent development and has not circulated like the former. Those that came into the system through the university have the Standard and contemporary requirement and with prospect for

feature studies unlike the former who some of them found themselves by providence and do not have the contemporary requirement that will encourage them for further studies.

## CONCLUSION

The contradiction associated with the Bachelor of Science and Diploma in Nursing are built from the system and this will continue to stay until a real line of separation is drawn and as well defined in term of course of action, content and standardize yardstick of comparison. Right from the inception of time, the profession was built from act of apprenticeship and not paper qualification as it is seen in the contemporary time. This over emphasis on the separation are as a result of none recognition and negation of the place of experience in the profession. Paper qualification is given higher consideration at the expenses of other facets such as experience, knowledge and active years of service.

The Nigerian Nursing Council also plays a role in fueling the growth of the contradiction that broadens the issue of Bachelor of Science and Diploma in nursing dichotomies relationship. The Failure of the Nigerian Nursing Council (NNC) to create a standard criterion as yardstick in demarcating the boundary of a Diploma Holder and how it is to be separated from the boundary of a Bachelor of Science holder has further worsened the situation. The use of the same tools such as the same examination and the over emphasizing need for class separations in itself is a contradiction. This for long continue to expose the profession to internal rift such as problem of mutuality, zest for paper qualification at the expense of experience, lack of cohesion, and flow on the job, ill of job description and enlargement among others.

The differences are not well articulated and integrated in the system and thus the emergence of administrative lapses such as what should constitute a starting point for a holder of a diploma holder and what his/her difference with the holder of B.sc. When it is the same Councils examination they all pass through. The question of headship and the placement of paper qualification over experience as well as prospect for aspiration and job satisfaction such as promotion, job redesign, job enlargement and opportunities for on the job training and preference such as open chances for aspiration unlike the ceiling associated with diploma holders, among others constitute serious setback to the nursing profession in Nigeria.

## RECOMMENDATIONS

The following sets of recommendations were proffered:

- (a) The Nigerian Nursing Council should redesign a proper and standardize yardstick of line separation which will help to clear the unseen demarcation between the holders of Bachelor of Science and the holders of diploma in the nursing profession in Nigeria. This will help to solve some of the rift in the working place that mostly surfaced as a result of the anomaly

- (b) There is the need to create a synergy and balance between what constitute a wealth of experience and the place of a paper qualification in the Nigerian nursing profession. The place of experience should not be negated at the expenses of paper qualification. This is because the former is on the path of organizational performance and productivity while the later is the creation of self esteem.
- (c) The Nigerian Nursing Council should as much as possible redesign the course of action and the content that would clearly define and as well demarcate the place of Diploma holder from the holder of first degree. This will help to reduce the friction and imbalances that are built on such stands
- (d) The administrative lapses such as starting point at enrolment, privileges such as headship, job enlargement, among others need to be harmonized and as well clearly spelt out. This will help to check friction that are inherently built by the system
- (e) There is also the need to de-emphasis and as well discontinue the learning of the profession in schools that still award diploma and certificate. This will help to bring standard, integrity and cohesion in the profession like their counterpart in medicine, pharmaceutical science, radiology, medical laboratory, among others.

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