



Original Article

Exploring the Role Performance for Principalships and Related Challenges in Nursing Academia

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ABSTRACT

Nursing leadership makes people feel inspired and motivated to realize their potentials by thinking critically when managing teams, thus experiencing an association between daily operations on the ground with the overall objectives of education. **Objectives:** To explore the effectiveness of the performance of the principals and vice principals in nursing institutions. **Methods:** The qualitative study design was an exploratory and descriptive one. Purposive and snowball sampling were used to select the participants. A face-to-face interview was utilized in collecting the data; a semi-structured interview guide was used. The collected data were analyzed by means of content analysis. The Ethics and Research Board accepted this study. **Results:** 12 interviews were held, nine of them were women and three were men. Two participants consisted of the vice principals, and the rest were principals. The analysis of data established three broad categories and 12 subcategories. These were role performance during Principalships, role preparedness challenges, and recommendations of participants. Each category was again separated into subcategories. **Conclusions:** Academic planning, capacity building, quality assurance, and program excellence are controlled by principals and vice-principals. The lack of knowledge and experience of educational management exposes them to challenges in matters related to do with budget, financial management, operation, and resource limitation.

INTRODUCTION

In developing countries, the position of a principal remains very limited, as it is typically an administrative office operating within strict and centralized education systems. Some leaders usually have very little autonomy, and therefore, they are limited to effecting meaningful institutional change [1]. They are more concerned with daily managerial tasks and the status quo, and not pedagogical innovation or strategy building [2]. Such a working condition often encourages an autocratic style of leadership where decision-making is top-down and teamwork contribution is minimal. As a result, principals in such settings usually exhibit an aversion to change and offer little teaching directions to their teaching personnel,

which disrupts the general education development and adaptation to new demands [3]. At the same time, the worldwide nursing profession has been experiencing a dramatic academic change during the last 30 years, with the focus on the necessity of further education. Clinical settings are getting more challenging, and nurses should be ready to address future circumstances and react to them adequately. The change of education has already been identified by many researchers and is brought by numerous factors, including the change of disease patterns and the transformation of society across the world [4]. The nursing workforce is highly trained and educated to meet the growing demands, and these



demands require the reevaluation of nursing as a practice discipline [5]. This involves a cautious and enhanced blend of theoretical learning and practical and clinical practice in an attempt to enhance patient care outcomes [6]. The Master of Science in Nursing (MSN) degree has been the key to this change and has long outgrown being an advanced degree in general. These programs now have many specializations to offer, so that nurses have the freedom to choose to specialize in a specific occupation, as an administration manager, an educator, a clinical leader, or an advanced practice nurse [7]. This career development will provide the nurses with advanced clinical capabilities and a scientific research foundation to present them with top-level jobs [3]. The ultimate product of this advanced learning education consists of improvement in the care provision and capability to address the complex needs of the individuals, their families, and communities, and thereby elevate the profession overall [8]. Compliance has remained challenging in many institutions, which means that there is a serious gap in the implementation process of the national nursing education system [7]. This policy is also compatible with the increased contemporary roles of nurses who currently take on advanced clinical practice, senior hospital management, and key administrative and teaching roles in college. This rule is important to professionalize leadership in nursing education and make institutions led by people who have the inherent knowledge of the specific demands and standards of the nursing profession [9]. One of the most important, yet least studied, issues of such an educational ecosystem is the specific role of the nursing principal in bringing desired educational outcomes [10]. Even though master's programs pay more and more attention to the competencies of leadership and evidence-based practice, the transfer of developed skills into a successful practical application in academic institutions is yet to be examined [11]. To ensure the success of nursing higher education, one of the basic anticipated outcomes should be the establishment and sustenance of robust leadership and managerial skills in the field of academia as well as within the clinical setting [12]. The Pakistani situation is a special case where the role of higher education in nursing is becoming more prominent following the national shift in the programs of higher education from diplomas to degrees [13]. This change, which was facilitated by both the PNC and the Higher Education Commission (HEC), now officially mandates an MSN degree for those people who are employed as nursing principals. This regulatory transformation has, in turn, spawned a demand upsurge of candidates who are qualified to hold this particular advanced credential [14]. This change, though good, has created a desperate predicament in the nursing education sector, and it points to a conflict between the aspirations

regarding regulations and the ready supply of prepared leaders [15]. The study is thus meant to fill a gap that is evident in the literature because it seeks to find out the role of performance of principals in the undergraduate nursing institute in Pakistan. The available literature experience shows that there is a sharp gap in research in this particular role of leadership, especially at the non-clinical level and in local contexts such as Pakistan. The research is expected to offer long-overdue information on how principals implement their roles in this changing education environment, where qualified leaders might fail to have the required degree, and qualified graduates might fail to have meaningful leadership practice.

This study aims to investigate the role performance of principals and vice principals in nursing institutions.

METHODS

This study adopted an exploratory qualitative descriptive design, because an exploratory design was used to explain the experiences, such as the role of principal and vice principal, while this study was conducted to explore the phenomenon of Principalship in nursing. The design was chosen because it provides insight into participants' experiences and perceptions within their real-life contexts. The study was conducted between July to November 2023 at undergraduate nursing institutions in Islamabad and Rawalpindi. The Institutional Review Board of Shifa International Hospital (IRB # 0157-23) provided the ethical approval. Participants signed an informed consent form, had their confidentiality guaranteed by using coded identifiers, and data were stored safely in locked cabinets as well as in digitally-protected files. This population size was used because it included only principals and vice principals who work in these colleges; thus, the individuals studied were those who are actually involved in the leadership activities. Purposive and snowball sampling methodology was used, which allowed identifying respondents who would be able to give pertinent data. Those who had a minimum of three months of experience as principals and vice principals were included; interim and acting positions were excluded. A visit to nursing colleges was employed in the recruitment, and the information sheets were distributed to the qualified participants. Data were collected through semi-structured, face-to-face interviews conducted in private settings to ensure confidentiality. A semi-structured interview guide was used for data collection, and interview questions were developed in light of the reviewed literature, keeping in view the objectives of this study, which lasts 40-45 minutes. Open-ended questions were used to get in-depth information from the participants. Face-to-face individual in-depth interviews were conducted with participants. Interview questions were reviewed by the research team, including the immediate supervisor, Co-Supervisor, and

committee member. Data analysis was conducted manually using content analysis. First of all, the recorded interviews were transcribed, and those interviews conducted in the Urdu language were then translated into English through a language expert having command of both English and Urdu. The interviews translated from Urdu to English were retranslated from English to Urdu by another language expert to ensure the meaningful essence of the participants' descriptions was preserved. The primary investigator read the transcribed descriptions several times to develop an in-depth understanding. Meaningful units within the descriptions of the participants were highlighted and coded. Both Latent and manifest coding were carried out to make useful data from the participants' descriptions. Similar codes were categorized and sub-categorized as well, and themes were developed based on the similarities of categories. The framework ensured rigor through credibility, Transferability, dependability, and conformability.

RESULTS

A total of 12 participants were involved: nine female and three male. Out of these, 10 were from private institutions and two from public institutions. Eleven participants held a Master of Science (MSN), with eight pursuing an education track. The results present the demographic characteristics of the participating principals and vice principals (Table 1).

Table 1: Demographic Characteristics of Principals (n=12)

Participants	Gender	Qualification	Experience (Years)	Institute Type
1	Female	MSN-E	04	Public
2	Female	MSN-E	1.5	Private
3	Male	MSN-E	03	Private
4	Female	MSN-E	02	Private
5	Male	MSN-C	04	Private
6	Male	MSN-C	1.5	Private
7	Female	MSN-E	03	Private
8	Female	MSN-C	01	Private
9	Female	PRN-BSN	04	Public
10	Female	MSN-E	01	Private
11	Female	MSN-E	01	Private
12	Female	MSN-E	1.5	Private

According to Lincoln and Guba's trustworthiness, all four steps were followed and described. Participants and experts review the results, validate and confirm them; moreover, members check and extend engagement, which helps to maintain credibility. The Transferability is the degree to which findings are useful to an individual in other settings, which depends on the readers. In the current study, the application to people from various contexts was addressed, which will be helpful for the readers. Dependability was trustworthy, which built their

confidence and established trust between both the researcher and the reader. The feature of dependability was consistently examined in this study, and the majority of participants' experiences and responses were remarkably similar. Conformability was to achieve the highest degree of objectivity; therefore, in the findings and conclusions, there was no disagreement. Participants shared their views on their principal roles, covering academic planning and management, capacity building, quality assurance, creating a positive academic environment, striving for program excellence, and leadership. This subcategory outlines the roles of principals and vice principals, including academic oversight, planning, reporting, and workload management. Most principals emphasized the importance of enforcing strict adherence to academic disciplines, as one principal noted, *"I oversee faculty and students, ensuring adherence to rules, regulations, and discipline"* (5P). A vice-principal expressed *"I have to maintain academic discipline, attendance, teaching responsibilities, students, academic activities, and reporting to the higher management"* (3VP). This suggests that principals and vice principals in nursing institutions have a managerial role. Most principals highlighted their efforts in capacity building for faculty and students through workshops and seminars. One principal said, *"I work to enhance critical thinking through in-house workshops for teachers and students"* (1P). Another shared, *"We conducted a seminar on IV drug calculation and communication skills, and planned a faculty development project"* (10P). Most participants reported that organizational quality assurance was achieved by assessing the timely completion of tasks, as noted by one vice principal, *"I always try to ensure the students are having up to the mark content or knowledge related to the profession"* (2VP). Likewise, a principal stated *"I try to ensure to the quality of teaching and clinical activities related to the students, are they going well, I used to take the round of the classes often"* (11P). The principal emphasized that creating a supportive learning environment is essential for the well-being of both faculty and students. *"I try to maintain a caring and conducive environment in the institute for the faculty in terms of workload and students' betterment."* (7P). Likewise, the other vice principal also admitted that *"I used to try to overcome faculty problems, workload-related conflict to feel my faculty comfortable, stress-free, and less burdened"* (2VP). This category arose from the challenges principals faced in their roles, including budget planning and financial management, operational obstacles, and resource limitations. Most principals and vice principals admitted insufficient knowledge about financial management, particularly budgeting. One principal shared that *"I faced financial management difficulties like students' fees and*

salaries, the university's financial process in my initial period of job, because I was not aware of budgeting." (4P). Likewise, a vice principal stated that "as a principal, I have to manage our financial budget, but it was difficult for me to ensure the timely completion of tasks within the institute due to the lack of knowledge." (2VP). Numerous challenges arise from administrative constraints, such as approval issues for faculty recruitment and decision-making delays from higher management and business-oriented institutes. A principal expressed that "I have issues with my management because they have always delayed the approval process regarding any issue. I don't know what their concerns are, but still, approval is pending for two teachers' hiring" (6P). Further elaborated by another principal, "I face resistance to my decision from the administration regarding the hiring of faculty, they said, if you hire more faculty members, then how will we pay" (11P). Some principals expressed concerns that healthcare institutions prioritize revenue over quality education, making them feel like businesses. As one of the principals expressed, "I came to know after joining the job that private institutes are just like business-oriented people, sometimes the unnecessary pressure of owners about hostel rates and transport rates puts me in trouble" (11P). Various principals have discussed the persistent challenges of resource limitations and the shortage of highly qualified faculty. As a principal shared, "We have a shortage of highly qualified teachers, as well as resources in government. If I require 16 teachers, I have 8 teachers. So, 8 teachers are missing" (1P). Similarly, the other principal shared "Ideally need the MSN faculty, but due to limited resources, we are not in the position to hire the MSN highly qualified nurses" (10P). This category emerged from the recommendations of the principals, such as hiring criteria and eligibility, training and preparation, and the required soft skills. Several principals shared their suggestions regarding the hiring process and eligibility criteria, as noted by the vice principal. "There must be, you know, written clear guidance from the Pakistan nursing council to avoid the upcoming of new and fresh principals who are ruling the institution without experience, without an educational qualification" (2VP). Likewise, another principal discussed "There should be defined criteria for the role of principal, both experience and qualification should be considered for hiring a principal, and this should be strictly implemented in the institute" (12P). Similarly, another principal affirmed, "One should follow steps such as lecturer, senior lecturer, assistant professor can be suitable for the role of principal" (8P). Some of the principals shared about some required significant soft skills for the role of Principalship's such as a vice principal expressed "A principal must have the confidence to take initiative for students' learning, teaching responsibilities, and organizational responsibilities" (2VP).

While other principals stated "The principal should be competent enough for their curriculum and course management, ethical, professional, and personal management as well" (6P). Similarly, another principal affirmed, "I experienced the political influence in my role as a principal, so a principal must have the problem-solving, communication skills, conflict management skills, and political awareness to deal with all these things" (4P). This study summarized the main categories and subcategories identified through content analysis (Table 2).

Table 2: List of Categories and Subcategories

Categories	Subcategories
Role Performance for Principalship's	Academic Planning and Management
	Capacity Building/continuous professional development
	Fostering Academic Environment
	Quality Assurance
	Leading by Example
	Program Excellence
Challenges Related to the Role Performance	Budget Planning and Financial Management
	Operational Hurdles
	Resource Limitations
Participants' Recommendations	Hiring Criteria and Eligibility
	Training and Preparation
	Required Soft Skills

DISCUSSION

The findings yielded three primary categories and 12 corresponding subcategories. Participants included nine female and three male. Eleven of them held a Master of Science in Nursing, while one principal held a Master' in Health Research. Nine principals had graduated with an education track MSN, and three with a clinical track MSN. Regarding Principalship's experience, seven principals had 1-2 years, and five had 3-4 years. The demographic findings show that MSN-clinical track prepared nurses with limited experience still accept principal roles, despite being intended for clinical leadership positions. The main goal of the clinical track in MSN is to prepare leadership skills for clinical nursing management. Perhaps it is presumed that there are more opportunities in nursing education than in clinical settings. Furthermore, it is also presumed that the possible cause of the current study findings could be high salary packages, other benefits, and incentives that directly help them to strengthen financially. The study's key findings highlight the roles and responsibilities of vice principals and principals, including academic planning and management, in alignment with existing literature [16]. The duties involve upholding discipline, designing task sheets and schedules, attendance checks, and frequent staff meetings to discuss education and administrative issues, which are in line with the past literature [17]. The other duty

is the professional growth of the students to sustain the quality and accountability in the educational standards, as it was in the earlier research [18]. In addition to their educational functions, these leaders play an important part in promoting professional socialization, communication between departments and professional groups. Their duties involve the implementation of the curriculum, the effective delivery of the program, and the sufficient staff and resources management in consistency with [19]. Their needs are budgeting and reporting to maintain financial sustainability and transparency, which is aligned with their responsibilities of supporting teachers in emphasizing high academic standards and expectations as they concentrate on the numerous activities involved in the proper management of the institution. The results presented in the current study are in agreement with what the literature on school principals has to say [20]. The literature available is primarily related to non-nursing fields and European nations. Nevertheless, this is a well-known phenomenon, and the functions of principals are always established in different fields, levels of education, and geographical areas [21]. Principals have to make decisions daily with minimal margin of error, time, and unpredictable situations. Most of them have many responsibilities, yet they do not have time to adjust to educational leadership. Other challenges that affect some of the principals include recruitment and hiring approvals. They are also constrained by organizational limitations, pressures from authorities, as well as interference by owners, making them part of decision-making [22]. Principals and vice principals also have a number of recommendations in the study. They propose setting up certain hiring requirements of principals, where the priority should be given to the applicants who have an MSN degree and an education specialty. Other principals suggest the use of a career ladder in hiring with a greater focus on relevant qualifications of an MSN and extensive educational experience [23].

CONCLUSIONS

According to the results, the roles of the principals and the vice principals in the nursing institutions are very diverse and they involve ensuring discipline, academic planning, schedules, and leadership. They strive towards academic discipline in planning clinical, teaching quality, and supportive learning environments to promote the growth of the staff and students through workshops and training programs. Furthermore, due to the upholding of rules, regulations, and policy execution as suggested by the Pakistan Nursing and Midwifery Council, the university and Higher Education commission but the nursing administration still experiences problems such as a lack of authority in the company of the institute owners or non-

professionals, insufficient resources, and absence of financial management.

Authors Contribution

Conceptualization: FA, GV

Methodology: FA, GV, FM

Formal analysis: GV, FM

Writing review and editing: FM

All authors have read and agreed to the published version of the manuscript.

Conflicts of Interest

All the authors declare no conflict of interest.

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