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## Independent Practice as a Nursing Practitioner in Pakistan: “Opportunities and Misconceptions”

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Pakistan is the fifth most populous country in the world, third in Asia, and second among Muslim countries. According to World Bank data, the poverty rate was 39.3% in 2020–21 and is expected to remain at that level in 2021–22 [1]. The health care system of Pakistan includes public, private, and trust hospitals. The World Health Organization estimates that there are 7.8 doctors for every 10,000 people and 3.8 nurses and midwives for every 10,000 people [2]. The number of doctors and nurses is below the required level, and many health professionals travel to developed countries in search of a better future and professional development. In the past 5 years, the increasing number of nursing colleges in the country indicates satisfaction for the healthcare industry to overcome the deficiencies. A nurse practitioner is a specialized program of nursing practice that performs independent practice within certain limits [3]. Nursing practitioner (NP) practices were first authorized in 1960 due to a physician shortage, and in Pakistan, only Aga Khan University hospitals have begun a two-year advanced practice nursing program. The concept of health and practices in developing countries were influenced by the United States, where 26 states have fully authorized nurse practitioners and 24 states require nurse practitioners to work under the supervision of physicians. In order to task-share with physicians in the UK, mid-level practitioners (MLPs), such as physician associates (PAs) and advanced nurse practitioners (ANPs) have been employed [4]. In a developing country like Pakistan, the national assembly makes an amendment to the Pakistan Nursing Council Act, 1973, in Section 2(m) that provides an opportunity for nursing practitioners to practice independently. On one side, the news has a feeling of motivation and happiness among the nurses; instead of welcoming such a revolutionary act, unfortunately, the other health professionals have seriously criticized this act and considered this amendment “legal cover for the quacks”. A misconception is created through social media that every nurse has given the status of (NP) “Nursing practitioner”, while the amendment is very clear regarding the independent practice of nursing practitioners: they have a two-year degree in (MSN) Master of Science in nursing specialized in nursing practitioner, with a valid license from (PN&MC) Pakistan Nursing and Midwifery Council for independent practice. To provide care and practice in hospitals, nurses require a license from PN&MC, which requires a minimum qualification of a 4-year BSN (Bachelor of Science in Nursing) degree with one year of internship from a tertiary care hospital or teaching hospital. During hiring in health departments, nurses have a 4-year degree and a 1-year internship and are hired in 16 grades. They have the same qualifications as other health care professionals who have a 4-year degree and a 1-year house job and are hired in 17 grades. In the majority of health universities, nursing and other health degrees are completed under the umbrella of one administration and examination department, and each profession has its own curriculum and goals, while they also perform their clinical in the same affiliated hospitals, so how does this professional discrimination occur that one profession is superior and the other is inferior? Since independence, the majority of the nurses have been hired and retired in the same grade without promotion from government hospitals and face this professional grading discrimination. In the clinical setting, nurses work and provide care to patient's shoulder-to-shoulder with other professionals from entry to discharge; moreover, they travel and work in the Middle East and developed countries. So how

can a nurse care for and work in developed countries? It is very important to accept the existence and importance of each profession and to use our advocacy and time for patient outcomes instead of wasting energy criticizing other professions. In the last 10 years, a boom in the nursing profession has seemed to be a result of the importance of nursing at the international and national levels, which has attracted the attention of students as well as their parents towards nursing. These efforts came as a result of the active participation of nursing associations in all provinces and the sincere efforts and struggles of the regulatory authorities, but still, many steps are incomplete and require immediate attention. In the future, nursing will be among the top professionals who work overseas and become an asset to the country in their contribution to development. The authorities should permit nurses practitioners to practice independently under the supervision of the Pakistan Nursing Council and a special task force in a limited area while taking help from international organizations or nursing regulatory bodies. Currently, the world is facing a shortage of not only nurses but all healthcare workers, which does not mean restricting the nursing profession from moving forward but should increase the capacity of nursing production under the theme of "no compromise on the quality of education and clinical practice." Pakistan has a good tendency to increase the capacity of nursing professionals and can be a good contributor to the country's finances.

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