

Perspectives of Ward In-Charges on Strategies to Control Nurse Emigration in Selected Hospitals in Tamale, Ghana: A Qualitative Study.

Abstract

Introduction: Nurse migration remains a significant concern for healthcare systems in low- and middle-income countries, including Ghana, as it exacerbates workforce shortages and affects healthcare delivery. Despite its impact, limited research has explored the underlying factors driving migration intentions among nurses in these settings. The aim of the study is to explore the perspectives of ward in-charges on the strategies to control nurse emigration in selected hospitals in Tamale, Ghana.

Methods: A qualitative study design was employed. Eleven nurses were recruited using convenience sampling, with interviews conducted until data saturation was reached. Data collection involved semi-structured interviews lasting 10–20 minutes, guided by an interview guide pretested and validated through cognitive interviews. Interviews were recorded with participant consent, transcribed verbatim, and analyzed thematically to identify key factors contributing to migration intentions.

Results: The findings revealed that poor working conditions, including resource shortages and excessive workload, were significant contributors to migration intentions. Nurses expressed dissatisfaction with inadequate remuneration and limited opportunities for career advancement. Insufficient management support further fueled their intent to migrate. Participants emphasized the lack of institutional incentives and professional growth opportunities as major barriers to retention within the healthcare system.

Conclusion: The study highlights systemic issues within the healthcare environment that drive nurse migration intentions. Addressing these challenges through improved working conditions, competitive remuneration, and enhanced career development opportunities is critical to retaining nurses and ensuring sustainable healthcare delivery.

Keywords: Nurse emigration, ward in-charges, strategies, healthcare, Tamale, Ghana, nursing workforce, retention, healthcare policy.

Introduction

Nurse emigration is a global phenomenon that has significant implications for healthcare systems, particularly in low- and middle-income countries (LMICs) where healthcare resources are already scarce [1–3]. The health workforce is a critical pillar of any effective health system. Achieving appropriate staffing levels, characterized by both adequate numbers of healthcare workers and a balanced skill mix, is essential for enhancing patient safety and improving nursing job outcomes, which in turn contribute to the achievement of the Sustainable Development Goals (SDGs) [4, 5]. Within this workforce, nurses form the largest individual group, playing a central role in delivering quality healthcare [3]. Among them, specialist nurses (SNs) are particularly vital, as they contribute significantly to advanced nursing activities, providing specialized care, education, and leadership in clinical settings. Their expertise is

indispensable for managing complex health conditions and ensuring the delivery of safe and efficient care, making them integral to achieving optimal health outcomes and strengthening the healthcare system.

According to the World Health Organization [6] the migration of healthcare professionals, including nurses, has become one of the most pressing challenges facing healthcare systems worldwide. As nurses migrate in search of better wages, improved working conditions, and enhanced professional development opportunities, many LMICs experience severe shortages of healthcare workers, which directly impacts the quality of patient care and access to essential health services [7–9]. For instance, a most studies highlighted that high-income countries, particularly those in Europe and North America, are primary destinations for healthcare migrants, further exacerbating workforce shortages in their countries of origin[7, 10–12].

In Africa, nurse migration is particularly concerning, with countries like Ghana grappling with the dual burden of insufficient healthcare workforce numbers and increased healthcare demands. Mudasir et al., [10] note that Ghana has seen a rise in the number of healthcare professionals migrating abroad, particularly to high-income countries, which offer more attractive financial incentives and better working conditions. As a result, healthcare institutions in Ghana, especially in the Northern Region, including Tamale, are facing significant staffing shortages, leading to an overburdened workforce and increased stress levels among the remaining staff. These shortages undermine the quality of care provided in public hospitals and contribute to a growing healthcare crisis. Factors contributing to nurse emigration from Ghana include low wages, limited opportunities for career advancement, poor working conditions, and a lack of professional recognition [13–17].

Despite the growing body of literature on nurse migration, limited research has focused on exploring the perspectives of key healthcare personnel, particularly ward in-charges, who play a critical role in managing nursing teams and ensuring the delivery of quality care. Ward in-charges have firsthand experience in overseeing the impact of nurse emigration on staffing levels and the quality of care, making them well-positioned to provide insights into the challenges faced by hospitals and potential strategies to mitigate nurse migration. While studies have examined factors that influence nurse migration, such as financial incentives and professional development opportunities[3, 15], there is a gap in understanding the specific strategies that hospital leaders, including ward in-charges, believe could help reduce nurse emigration in Ghana.

This study aims to explore the perspectives of ward in-charges in selected hospitals in Tamale, Ghana, regarding strategies to control nurse emigration. By examining their views, this study seeks to provide a deeper understanding of the factors influencing nurse retention and offer recommendations for improving nurse retention strategies in Ghana's healthcare sector. The findings of this research will contribute to the existing body of knowledge on healthcare workforce migration and provide valuable insights for policymakers, hospital administrators, and other stakeholders working to strengthen healthcare systems in LMICs.

Methods

Study design

The study uses a qualitative descriptive design, which focuses on understanding participants' experiences, perceptions, and viewpoints in a natural setting. This design allows for an in-depth exploration of the factors influencing nurse emigration, particularly emphasizing the perspectives of ward in-charges in selected hospitals. The philosophical approach underpinning this study is Interpretivism. This philosophy emphasizes understanding the subjective experiences and meanings that individuals attach to their social worlds. In this study's context, interpretivism supports

exploring the personal and professional factors that influence nurse emigration by interpreting the participants' perspectives.

Study Settings

The Tamale Metropolitan Assembly (TMA) is one of Ghana's 261 MMDAs, located in the Northern Region. Elevated to a Metropolis in 2004, Tamale serves as the regional capital, situated between latitudes 9.16° and 9.34° North and longitudes 00.36° and 00.57° West, at 180 meters above sea level. The area features rolling terrain with shallow valleys and isolated hills. It shares boundaries with Savelugu, Yendi, Tolon, Central Gonja, and East Gonja. The 2021 population census recorded 374,744 residents, with 185,051 males and 189,693 females.

Study population

The study population consists of healthcare workers, specifically nurses and hospital management staff, within selected hospitals in Tamale, Ghana.

Inclusion and exclusion criteria

Inclusion Criteria:

- Nurses employed in selected hospitals within Tamale Metropolitan area.
- Ward In-charges and hospital management staff working in the same hospitals.
- Nurses with at least one year of experience in the healthcare facility.
- Nurses willing to participate in the study and provide informed consent.
- Nurses who are currently employed (not on leave or retired).

Exclusion Criteria:

- Nurses not currently working in the selected hospitals.
- Nurses with less than one year of professional experience.
- Non-healthcare staff in the hospital.
- Nurses who are on long-term leave or have retired.
- Nurses who refuse to participate or provide consent.

Sampling

The study recruited 11 participants. This sample size was deemed adequate for the research design, aligning with the principle of data saturation. Saturation occurs when no new themes or insights emerge during data collection, indicating that the sample size is sufficient to represent the phenomenon under investigation. This study achieved saturation after conducting 11 interviews, as the data collected did not yield additional information beyond the existing patterns and themes. To select participants, a convenience sampling technique was employed. This method involves choosing participants based on their availability and willingness to participate, which is often practical and cost-

effective in qualitative research. By using convenience sampling, the study gathered insights from ward in-charges with relevant knowledge and experience related to nurse emigration and retention strategies.

Data collection tools and procedures

The primary data collection tool for this study was an interview guide, which was developed to explore the perspectives of ward in-charges regarding strategies to control nurse emigration. To ensure the clarity and relevance of the interview guide, it was pretested through cognitive interviews with four qualitative experts from the University for Development Studies and the University of Ghana. Their feedback was instrumental in refining the questions to ensure alignment with the study's objectives. The interview guide was then pretested among two nurses to further assess its practical application and to make any necessary adjustments. This pretesting allowed for fine-tuning the phrasing of questions to ensure clarity and ease of understanding for the participants.

Data collection procedures commenced with outreach to potential participants—ward in-charges at selected hospitals in Tamale. Formal invitations were sent, outlining the study's purpose, the voluntary nature of participation, and the confidentiality of the data collected. Once participants agreed to take part, interview appointments were scheduled at times convenient to them, minimizing disruption to hospital operations. To ensure consistency and reliability in the data collection process, only two of the authors conducted the interviews, reducing any potential variations in the way questions were posed or followed up. Each interview lasted between 10 to 20 minutes, offering enough time for participants to express their views comprehensively.

Informed consent was obtained from all participants before the interviews commenced. This ensured that they were fully aware of their rights, including the option to withdraw from the study at any point without any repercussions. Participants were assured that their responses would remain confidential and anonymized. The interviews were audio-recorded with the participants' consent, which allowed for accurate transcription and ensured that all verbal data were captured. This also enabled the researchers to focus on engaging with the participants and following up on responses in real-time without the distraction of notetaking. The use of voice recording ensured that the data could be revisited during analysis for accuracy and consistency.

Throughout the interviews, the researchers employed active listening techniques, prompting participants with follow-up questions when necessary to clarify or expand on their responses. This flexible approach, which allowed participants to elaborate on their answers, helped ensure that the data collected were rich and contextually relevant. The study adhered to qualitative research best practices, which recommend the use of semi-structured interviews to explore participants' perspectives in-depth. The flexibility of the interview process, combined with the structured guide, enabled the study to capture participants' authentic views while maintaining consistency. The data collection continued until saturation was reached, which signified that no new themes or insights were emerging from the interviews. This confirmed that the sample size was sufficient and that the data collection process was effective in capturing the necessary information to answer the research questions.

Methodological rigor

The study ensured methodological rigor by adhering to qualitative research principles of credibility, transferability, dependability, and confirmability[18]. To establish credibility, the interview guide was refined through cognitive interviews with four qualitative research experts from the University for Development Studies and the University of Ghana and pretested with two nurses to ensure clarity and relevance.

A consistent data collection process was maintained, with only two authors conducting all interviews to minimize variability. Data saturation was achieved after interviewing 11 participants, with no new themes emerging. Transferability was ensured through detailed descriptions of the study context and participants, allowing applicability to similar settings.

Confirmability was strengthened through reflexivity, where researchers continuously examined potential biases. Field notes were taken to capture non-verbal cues and contextual observations, enriching the data. Member checking was employed by sharing summarized findings with participants to ensure accurate representation of their perspectives.

Interviews were recorded, transcribed verbatim, and analyzed using a rigorous thematic approach with peer review to validate findings. These measures ensured the study's trustworthiness and reliability, producing credible and meaningful results.

Data analysis

Data analysis was conducted using thematic content analysis, a rigorous and systematic approach to identify, analyze, and interpret patterns or themes within the data. Audio recordings of interviews were transcribed verbatim, and the transcripts were reviewed multiple times to ensure accuracy and familiarity with the data.

The analysis followed Braun and Clarke's six-step framework, starting with data familiarization, where transcripts were read repeatedly to gain a deep understanding of the content. Initial codes were generated inductively, focusing on meaningful segments of text relevant to the research objectives. These codes were then collated into potential themes, ensuring they reflected the underlying patterns in the data.

Themes were reviewed and refined to ensure they were coherent, internally consistent, and distinct from one another. Data extracts supporting each theme were carefully examined to confirm alignment with the overall narrative. Throughout the process, peer debriefing was employed, with another researcher reviewing the themes to enhance credibility. Reflexivity was maintained to minimize researcher bias during coding and interpretation.

The final themes were defined and named, providing a clear narrative of the participants' experiences and perspectives. A detailed description of each theme was presented alongside representative quotes to highlight the voices of participants and substantiate findings. This rigorous analytical approach ensured that the study captured the depth and complexity of the data while maintaining methodological integrity.

Ethical consideration

The study adhered to ethical principles outlined in the Declaration of Helsinki. Ethical approval was obtained from the Institutional Review Board of the University for Development Studies. Permission was also secured from the Tamale Teaching Hospital management. Participants were informed about the study's purpose, and written consent was obtained before participation. Confidentiality and anonymity were ensured, with data securely stored and accessible only to the research team. Participation was voluntary, and participants were free to withdraw at any time without consequences. Interviews were conducted in private, with care taken to minimize distress and ensure respect for participants' rights and dignity.

Results

Demographics characteristic of respondents

Table 1 shows the characteristics of 11 interview participants, comprising 6 females and 5 males, aged between 25 and 50. Participants have varying levels of work experience, ranging from 5 to 18 years, with an average of 9 years.

Their years in the current position range from 3 to 12 years. Only one participant has previous emigration experience, while the majority (7 out of 11) expressed an intent to emigrate.

Table 1: Demographics characteristic of respondents

Interview Number	Gender	Age Range	Work Experience	Years in Current Position	Previous Emigration Experience	Intent to Emigrate
1	Female	30-40	7	5	No	Yes
2	Male	40-50	15	10	No	Yes
3	Female	25-35	5	4	No	No
4	Male	35-45	10	7	No	Yes
5	Female	30-40	12	6	No	No
6	Male	25-35	6	3	No	No
7	Female	35-45	10	8	No	Yes
8	Female	30-40	8	5	No	Yes
9	Male	40-50	18	12	No	No
10	Female	30-40	9	6	No	Yes
11	Male	25-35	5	4	Yes	Yes

Themes and sub-themes

The main themes identified include Nurse Emigration Trends, which covers increasing nurse emigration, its impact on staff composition, and the influence of external opportunities. The impact of nurse emigration on operations and service delivery involves strained staff and increased workload, reduced quality of patient care, and decreased morale among remaining nurses. Key drivers of nurse emigration include financial incentives, professional growth opportunities, stressful working conditions, and lack of recognition and support. Workplace challenges contributing to emigration are staffing shortages, insufficient resources, leadership and management issues, and high levels of stress and burnout. Retention strategies focus on creating a supportive work environment, mentorship, professional development, recognition, motivation, and improved work-life balance. Hospital management's role in nurse retention emphasizes financial incentives, better working conditions, career growth opportunities, and leadership support. The role of national policies in nurse emigration highlights policy gaps, solutions for retention, and the need for policy coordination. Finally, government support and intervention stress investment in healthcare facilities, collaboration with healthcare facilities, and financial and structural support (Table 2).

Table 2: Themes and sub-themes

Theme	Sub-theme
1. Nurse Emigration Trends	1.1 Increasing Nurse Emigration
	1.2 Impact on Staff Composition

	1.3 The Influence of External Opportunities
2. Impact of Nurse Emigration on Operations and Service Delivery	2.1 Strained Staff and Increased Workload
	2.2 Reduced Quality of Patient Care
	2.3 Decreased Morale Among Remaining Nurses
3. Key Drivers of Nurse Emigration	3.1 Financial Incentives
	3.2 Professional Growth and Career Opportunities
	3.3 Stressful Working Conditions
	3.4 Lack of Recognition and Support
4. Workplace Challenges Contributing to Nurse Emigration	4.1 Staffing Shortages
	4.2 Insufficient Resources
	4.3 Leadership and Management Issues
	4.4 High Levels of Stress and Burnout
5. Retention Strategies and Initiatives	5.1 Creating a Supportive Work Environment
	5.2 Mentorship and Professional Development
	5.3 Recognition and Motivation
	5.4 Improved Work-life Balance
6. Hospital Management's Role in Nurse Retention	6.1 Financial Incentives and Benefits
	6.2 Better Working Conditions
	6.3 Career Growth and Development Opportunities
	6.4 Leadership and Support
7. Role of National Policies in Nurse Emigration	7.1 Policy Gaps and Ineffectiveness
	7.2 Policy Solutions for Retention
	7.3 Need for Policy Coordination
8. Government Support and Intervention	8.1 Investment in Healthcare Facilities
	8.2 Collaboration with Healthcare Facilities
	8.3 Financial and Structural Support

Nurse Emigration Trends

This theme explores the current trends in nurse emigration, the frequency of nurses leaving the ward, and the factors contributing to these trends.

Increasing Nurse Emigration

Interviewees reported that nurse emigration has increased significantly over the years, with more nurses leaving for better opportunities abroad. The rising appeal of international job prospects is seen as a key driver of this trend.

"In recent years, it seems like more and more of our nurses are leaving, especially the younger ones. They find better pay and living conditions outside the country." (Interview 5)

"The trend is definitely increasing. Nurses are now more inclined to leave due to better work and life prospects elsewhere." (Interview 3)

Impact on Staff Composition

With the rise in nurse emigration, hospitals have seen a reduction in experienced staff. This results in a younger and less experienced workforce, leading to challenges in maintaining high-quality care.

"We lose more experienced nurses, which affects our team dynamics and patient care. New nurses struggle to keep up with the workload." (Interview 2)

"The quality of care is impacted because we don't have enough senior nurses to guide the juniors. Many times, we are just doing the bare minimum." (Interview 7)

The Influence of External Opportunities

Nurses are often drawn to better financial rewards and career prospects abroad. These opportunities seem more promising, and this is a major motivating factor for many to leave.

"The nurses often talk about how much more they can earn abroad, and the idea of professional growth there is very appealing." (Interview 8)

Impact of Nurse Emigration on Operations and Service Delivery

This theme highlights the operational impact of nurse emigration on the hospital, particularly its effect on service delivery and patient care.

Strained Staff and Increased Workload

The departure of nurses leads to understaffing, putting a significant strain on the remaining workforce. This results in long shifts, high pressure, and emotional exhaustion.

"We have fewer nurses now, and the remaining staff are stretched thin. This results in longer shifts and more stress on everyone." (Interview 9)

"Nurses are exhausted; we have to handle more patients with fewer colleagues. It's physically and emotionally draining." (Interview 11)

Reduced Quality of Patient Care

With fewer nurses available to provide care, the quality of service often suffers. Patient care is compromised as nurses struggle to balance the needs of multiple patients.

"We sometimes don't have enough time to attend to each patient properly. The workload keeps increasing, and we can't give the attention every patient deserves." (Interview 3)

"The number of patients we handle daily is too high for the few nurses available. This leads to a reduction in the quality of care we can provide." (Interview 2)

Decreased Morale Among Remaining Nurses

The emigration of colleagues often leads to low morale among those who remain. Feelings of frustration, burnout, and emotional exhaustion are prevalent as staff members witness their colleagues leave for better opportunities.

"Morale is low; some nurses are even considering leaving because they see their colleagues leaving, and they feel like they don't get enough support from the management." (Interview 6)

Key Drivers of Nurse Emigration

This theme focuses on the specific factors that influence nurses' decisions to emigrate, including financial, professional, and environmental factors.

Financial Incentives

Financial incentives, such as higher salaries and better living conditions abroad, are frequently cited as the primary motivators for nurses to seek employment overseas.

"The salary here is very low compared to what nurses can earn abroad. Nurses feel they have to leave to secure their financial future." (Interview 4)

"When you compare the wages here with what nurses can get abroad, it's clear why they're leaving. Money plays a big role." (Interview 9)

Professional Growth and Career Opportunities

Many nurses feel that their opportunities for career development are limited in their current positions. The prospect of better professional growth abroad is a strong pull factor.

"I have talked to some nurses who left because they felt there were no opportunities for growth. They see more career advancement abroad." (Interview 7)

"The opportunities abroad are just better, not just financially, but in terms of career development and specialization." (Interview 5)

Stressful Working Conditions

The high stress levels resulting from heavy workloads, long hours, and insufficient resources are a significant driver of nurse emigration. Nurses often leave to find less stressful environments.

"The working conditions here are stressful. There is always too much work and too few resources. Some nurses leave because they can no longer cope." (Interview 11)

"Nurses are leaving because they are overwhelmed with the workload and stress. It's unsustainable, and many don't see a way out here." (Interview 10)

Lack of Recognition and Support

Many nurses feel underappreciated, and the lack of emotional and professional support can make the decision to emigrate more appealing.

"There is little recognition for the work we do. Nurses feel unappreciated, and this affects their decision to stay or leave." (Interview 1)

"Support from management is lacking. Nurses feel like they are working tirelessly with little acknowledgment or encouragement." (Interview 8)

Workplace Challenges Contributing to Nurse Emigration

This theme highlights specific workplace challenges that drive nurses to emigrate.

Staffing Shortages

Staff shortages are a significant challenge, contributing to high levels of stress, dissatisfaction, and burnout among nurses, leading to emigration.

"We don't have enough nurses, and the ones that leave are not being replaced quickly enough. This makes it harder for those of us who remain." (Interview 2)

"The shortage of staff makes everything harder. Nurses leave because they don't see how things will improve." (Interview 6)

Insufficient Resources

Inadequate medical supplies and outdated equipment are often mentioned as challenges that make the workplace frustrating and unattractive to nurses.

"The ward has limited resources. Sometimes, we are forced to make do with outdated equipment. Nurses get frustrated with this situation." (Interview 6)

"It's hard to deliver quality care when there aren't enough supplies or proper equipment. Nurses leave because they can't work under these conditions." (Interview 5)

Leadership and Management Issues

Weak leadership and lack of support from management contribute significantly to nurse dissatisfaction and the decision to emigrate.

"Poor leadership contributes to low staff morale. When management does not support us, it's easy for nurses to consider leaving." (Interview 4)

"Management needs to show more empathy and support for the staff. Many nurses leave because they don't feel the leadership understands their struggles." (Interview 3)

High Levels of Stress and Burnout

The chronic stress and burnout experienced by nurses due to heavy workloads are major contributors to the decision to emigrate.

"Nurses are burnt out. Many leave because they can't handle the stress any longer. It's physically and mentally exhausting." (Interview 9)

"Burnout is real. Nurses can only handle so much before they start looking for other opportunities." (Interview 7)

Retention Strategies and Initiatives

This theme focuses on the strategies employed to retain nurses and enhance their job satisfaction.

Creating a Supportive Work Environment

Some hospitals focus on creating a supportive and collaborative work environment to help nurses feel more comfortable and reduce turnover.

"We've tried to create a more supportive environment where nurses can communicate openly, and everyone works together to manage the stress." (Interview 7)

"Fostering good relationships between nurses and other healthcare professionals helps build a supportive work environment." (Interview 8)

Mentorship and Professional Development

Providing mentorship programs and professional development opportunities is one way hospitals aim to improve job satisfaction and encourage nurses to stay.

"We offer mentorship programs for new nurses. This helps them feel supported and can guide them toward career development." (Interview 10)

Recognition and Motivation

Nurses appreciate recognition for their hard work. Simple acts of acknowledgment can go a long way in boosting morale and preventing emigration.

"Nurses should feel valued. Simple acts of recognition can go a long way in keeping them motivated and loyal." (Interview 8)

Improved Work-life Balance

Flexible working conditions, including better shift patterns and more leave options, are recommended to improve work-life balance.

"We have introduced flexible shifts to help nurses with work-life balance. It has made a difference in how they feel about their jobs." (Interview 11)

Hospital Management's Role in Mitigating Nurse Emigration

This theme discusses how hospital management can influence nurse retention through policy changes and strategies.

Improving Nurse Salary and Benefits

Enhancing nurse salaries and benefits packages is an essential factor in preventing emigration.

"If management improves salary and benefits, more nurses would be inclined to stay here." (Interview 6)

Providing Adequate Training and Development

Ensuring that nurses have opportunities for further education and professional growth can make them more likely to stay.

"Continued professional development is key. Nurses should have access to training that helps them grow in their careers." (Interview 4)

Offering Better Work Conditions

Management needs to address issues such as understaffing, poor working conditions, and lack of resources to reduce nurse emigration.

"Hospitals need to improve the work environment and conditions. If we want nurses to stay, we need to make sure they feel supported." (Interview 2)

Role of National Policies in Nurse Emigration

This theme examines how national policies influence nurse emigration and explores the perceived inadequacies and suggested improvements for policy frameworks aimed at retaining nurses in Ghana. The participants highlighted gaps in existing policies and shared their thoughts on more effective strategies to prevent nurse migration.

Policy Gaps and Ineffectiveness

Interviewees emphasized that national policies are often insufficient in addressing the real reasons behind nurse emigration. While policies exist, they are generally seen as ineffective in solving the challenges nurses face, such as low salaries, lack of career advancement, and poor working conditions. These gaps, according to the interviewees, contribute significantly to nurses' decisions to leave the profession or emigrate.

"While the policies are in place, they are not solving the main problems, like low salaries and poor working conditions. Nurses are still leaving because they feel they are not being adequately supported." (Interview 3)

Policy Solutions for Retention

Participants proposed various policy solutions that could help retain nurses. These included increasing financial incentives such as higher salaries and allowances, introducing career development programs, and improving workplace conditions. Many interviewees also suggested providing targeted programs that focus on the professional growth of nurses, offering mentorship, and facilitating continuous training.

"To retain nurses, policies must focus on better compensation and career development programs. A salary increments and more opportunities for professional growth would make a significant difference." (Interview 6)

Need for Policy Coordination

A recurring theme among the participants was the need for greater collaboration between policymakers and healthcare facilities. Interviewees emphasized that policy formulation should be guided by input from healthcare providers to ensure that the policies are realistic and address the real challenges nurses face.

"There is a disconnect between policymakers and healthcare facilities. Policies need to be crafted with input from those working in the wards to be effective." (Interview 2)

Government Support and Intervention

This theme addresses the role of government intervention in providing the necessary support to healthcare facilities and nurses. Interviewees discussed how government investments, collaborations, and financial support could help improve the working conditions for nurses and reduce the migration trend.

Investment in Healthcare Facilities

Participants underscored the need for substantial investment in healthcare facilities as a key factor in retaining nurses. They pointed out that many healthcare facilities, especially in under-resourced regions, lack essential equipment and adequate infrastructure, making the work environment less appealing. Increased government investment would not only enhance patient care but also improve nurses' morale and their decision to stay in the country.

"If the government invests in improving the infrastructure, it will not only help the patients but also reduce the reasons why nurses seek better opportunities elsewhere." (Interview 5)

Collaboration with Healthcare Facilities

Respondents emphasized the importance of stronger collaboration between the government and healthcare facilities to create policies and programs that directly address the challenges nurses face. They suggested that closer collaboration could lead to more practical solutions, such as tailored retention strategies and improved conditions for healthcare workers.

"There needs to be closer collaboration between the health ministry and hospitals. The government should understand what we, as healthcare workers, go through to make informed decisions."
(Interview 7)

Financial and Structural Support

The need for financial and structural support from the government was a significant point raised by the interviewees. This includes financial incentives such as bonuses, allowances, and better salaries, along with structural support like better career pathways, job security, and mental health support for nurses.

"Financial support and career stability are key factors. If nurses are offered bonuses, allowances, or better pay, they will be more likely to stay in Ghana rather than seek work abroad." (Interview 4)

Discussion

Nurse emigration has become a growing concern for healthcare systems, with many nurses seeking better opportunities abroad due to various factors such as low salaries, poor working conditions, and limited career growth. This study aims to explore the perspectives of ward in-charges on the strategies that can be implemented to control nurse emigration in selected hospitals in Tamale, Ghana.

The study findings indicate a significant rise in nurse emigration, primarily driven by the appeal of higher financial rewards, improved career opportunities, and better living conditions abroad. Nurses are leaving due to push factors, including low salaries, limited career advancement, and challenging working conditions, such as understaffing and inadequate resources. As a result, the remaining nurses face increased workloads, longer shifts, and emotional exhaustion, which negatively impact patient care. This trend is consistent with Adjei-Mensah, [7] who identified global nursing shortages in high-income countries as a major driver of migration from low- and middle-income countries (LMICs), with economic disparities, poor working conditions, and limited professional growth opportunities being consistent drivers of emigration[19–21]

The impact of nurse emigration is profound, leading to understaffing, higher patient volumes, and reduced morale among remaining staff. Nurses in understaffed hospitals are often forced to work longer hours, which increases the likelihood of burnout and diminishes the quality of patient care. This finding aligns with Bae [22], who reported that nurse shortages directly correlate with increased workloads and lower patient safety. Furthermore, Kelly et al., [23]highlighted the emotional toll on remaining staff, including stress and reduced job satisfaction, while other literature emphasized that understaffing undermines healthcare system efficiency and compromises patient outcomes[23–25]. The emotional toll on the remaining staff, exacerbated by the loss of colleagues, leads to job dissatisfaction and heightened turnover rates.

Several factors influence the decision for nurses to emigrate. Financial incentives, particularly higher wages and better living conditions abroad, remain a dominant driver. Nurses in countries like Ghana often face insufficient salaries that fail to meet their personal and professional needs. This financial disparity underscores the need for competitive remuneration packages to retain skilled nurses. Similar trends have been highlighted by Aiken et al. [26] and Bismal et al. [27], who noted that economic pressures are a primary reason for nurse emigration, with financial disparities between local and international wages driving the migration trend.

Additionally, limited opportunities for career development, specialization, and further training in many healthcare settings contribute to nurses' decisions to seek better opportunities abroad. Nurses often perceive that their professional prospects are more favorable in destination countries, where they can access advanced education and specialization. This perception is supported by Chan [28], who found that limited professional development and career stagnation lead to dissatisfaction and higher turnover rates. The migration of nurses for professional growth is thus not just about economic gain but also about the pursuit of a fulfilling and dynamic career.

Working conditions, such as long hours, heavy workloads, and insufficient resources, also contribute significantly to nurse emigration. Nurses in under-resourced healthcare systems face high levels of burnout, which erodes job satisfaction and increases the likelihood of leaving the profession. Similar studies have noted that poor working conditions and burnout are often primary causes for nurse migration, as nurses seek less stressful work environments[10, 15, 29, 30]. A lack of necessary medical supplies and outdated equipment further compounds these issues, leading nurses to seek less stressful work environments.

The absence of recognition and support from management also plays a pivotal role in nurse emigration. Many nurses report feeling undervalued by their institutions, which contributes to feelings of frustration and dissatisfaction[9, 31]. This lack of emotional and professional support exacerbates burnout and prompts many nurses to explore opportunities abroad. Livingstone[32] also identified recognition and support as critical factors in nurse retention, as these factors help maintain job satisfaction and reduce turnover.

Workplace challenges, particularly understaffing and inadequate resources, are key drivers of nurse dissatisfaction. Nurses in understaffed hospitals face overwhelming workloads, which lead to burnout and decreased job satisfaction[33, 34]. This issue is compounded by insufficient resources, such as outdated equipment and limited supplies, which further undermine nurses' ability to deliver high-quality care. This finding aligns with Senek et al. [14], who noted that poor infrastructure and inadequate resources are key factors influencing nurse retention and migration. Addressing these workplace challenges is crucial for improving nurse morale and retention.

Leadership and management also play a significant role in nurse emigration. Weak leadership, poor communication, and a lack of support from hospital management contribute to a negative work environment. Nurses often report feeling unsupported and undervalued due to ineffective leadership, which leads to frustration and burnout[13]. Effective leadership is essential for fostering a supportive work environment that promotes job satisfaction and retention[35]. Studies have highlighted the importance of leadership in reducing nurse turnover and improving staff morale[35–38].

In response to these challenges, hospitals have implemented several strategies to improve nurse retention. Creating a supportive work environment, providing mentorship programs, and offering professional development opportunities are key initiatives. Nurses who feel supported in their careers are more likely to stay in their roles, which emphasizes the importance of career growth and job satisfaction in nurse retention. Recognition, through simple gestures of appreciation, can also significantly boost morale and reduce the likelihood of emigration. Furthermore, improving work-life balance through flexible shifts and leave options is a crucial strategy for retaining nurses in the long term. Hospital management plays a critical role in addressing the root causes of nurse dissatisfaction. Improving salaries and benefits, along with providing training and development opportunities, are key factors in preventing nurse emigration. Nurses often leave for better financial opportunities abroad, and competitive salaries can reduce the appeal of migration. Professional development opportunities, such as mentorship and advanced education, also enhance nurse satisfaction and retention. Improving working conditions, including addressing understaffing and providing adequate resources, is essential for creating a conducive work environment that supports nurse retention.

This qualitative study offers a deep, context-specific understanding of nurse emigration in Ghana, providing insights into the financial, professional, and emotional factors driving migration. Its strengths include the ability to explore complex, interrelated factors such as poor working conditions, lack of career advancement, and low salaries, along with capturing the human aspect of the issue through direct interviews with ward in-charges. However, the study's limitations include its limited generalizability, researcher bias, reliance on self-reported data, and the time-intensive nature of qualitative research. Additionally, issues like participant fatigue and ethical concerns around discussing sensitive topics may affect the reliability and consistency of the data. Despite these weaknesses, the study provides valuable insights that can inform policy and practice improvements to address nurse emigration and retention.

Conclusion and recommendation

The study reveals that nurse migration from the Tamale Teaching Hospital is influenced by various factors, including poor working conditions, lack of career advancement opportunities, and limited access to resources. Additionally, challenges such as low remuneration, excessive workload, and inadequate management support exacerbate the desire to seek better opportunities abroad. These factors highlight systemic issues within the healthcare system that affect nurse retention.

To address the issue of nurse migration, hospital management and policymakers should focus on improving working conditions by providing competitive salaries, reducing workloads, and offering professional development opportunities. Additionally, fostering a supportive work environment through adequate resources and better management practices could enhance job satisfaction and reduce migration intent. Stakeholder collaboration at both local and national levels is critical to creating sustainable retention strategies and strengthening the healthcare system.

Consent for publication

Not applicable

Data Availability

Data used to support this study are available from the corresponding author upon request.

Disclaimer (Artificial intelligence)

Authors at this moment declare that generative AI (ChatGPT) has been used during the editing of manuscripts.

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