

The Effect of Employer Branding and Fair Compensation on Doctors and Nurses' Retention in Kano State Tertiary Health Centers

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Abstract

This study examines the critical role of employer branding and fair compensation in addressing the retention challenges faced by doctors and nurses in Kano State tertiary health centers. Survey research design was employed with the total population of 2649 and a sample size of 435. Data were collected through the use of questionnaires. Convenience and stratified sampling strategies were used in this investigation. Validity and reliability were carried out to determine the fitness of the instrument. With the response rate of 92%. Data were analysed using SPSS Version 25 with multiple regression techniques. Findings show a positive effect of employer branding and fair compensation on doctors and nurses' retention in Kano State with the P value of .000, .000, respectively. The study recommends that enhanced employer branding strategies and fair compensation are crucial for improving retention rate among doctors and nurses in Kano State.

1. Introduction

In recent years, the healthcare sector has faced significant challenges in retaining skilled medical doctors and nurses, a problem exacerbated by globalization and technological advancement that have facilitated the migration of health workers to more developed nations (Bolisani & Bratianu, 2017; Absalom & Alexander, 2021; Nwoke & Iyiola, 2021). Doctors and nurses are of significant value to the existence of health sector (Sveiby, 1997; Thunnissen & Buttiens, 2017). They are the heart and backbone of health sector in terms of treatment and care giving across health centers around the globe (Younas & Muhammad, 2020). Thus, the significance of retaining doctors and nurses across health centers around the globe cannot be overemphasized, as doctors and nurses' retention constitutes the foundation for health centers effective and efficient healthcare service delivery (Poorhosseinzadeh & Subramaniam, 2012; Oguegbulam, Onuoha, & Nwede, 2017; Nwoke & Iyiola, 2021). Any nation that is challenged with retaining its doctor and nurses will have challenges of sustaining its health sector effectively (Njuguna, 2014; Nwoke & Iyiola, 2021). However, doctors and nurses' retention issues are emerging as the most critical workforce management challenge of the immediate future in health sector (Rono & Kiptum, 2017).

Increasingly, globalization and advancements in technology have made it easy for doctors and nurse to migrate through international recruitment agencies in search of better opportunities across the globe. In view of this, the retention of doctors and nurses in less developed nations, like Nigeria, is becoming increasingly challenging (Kerr, Kerr, Özden, & Parsons, 2016; Sousa, 2019; Konstantinos *et al.*, 2021).

Doctors and nurses are in high demand globally (Dalayga *et al.*, 2021). In particular, there is a global shortage of 4.3 million doctors and nurses across the globe; therefore, this shortage has resulted in poor and deficient health care delivery across the globe (Atte 2020, Dalayga *et al.*, 2021). Similarly, there was an estimated

shortage of 18 million doctors and nurse across the globe by the year 2030 (Lopes *et al.*, 2017). Over the years, there has been a massive migration of African doctors and nurses to developed countries. One (1) out of four (4) doctors and one (1) out of twenty (20) nurses trained in Africa are currently in developed countries, and this accounts for a shortfall of over 1.5 million doctors and nurses in Africa (World Health Organization, 2016). Similarly, Adesote and Osunkoya (2018) reported that over the last 30 years, Africa has increasingly lost highly skilled workers to developed countries. Dohlman *et al.* (2019) also identified that over 70% of Africa's healthcare practitioners are lost to migration, where they currently make up one-fifth of physicians in developed countries. As the countries are the most affected by this shortage, given that they contain 3% of the world's health workers but are burdened by 24% of the global disease.

Nigeria is faced with the acute challenge of retaining doctors and nurses in the health sector, 1 doctor per 10,000 population as against the recommended minimum threshold of 23 doctors per 10,000 population (WHO, 2020; Daily Trust, 2023; Anetoh and Onwudinjo, 2020). In a similar view, according to the Nursing and Midwifery Council of Nigeria (NMCN), out of the 15000 nurses produced in Nigeria, 7,000 nurses left Nigeria to work abroad in 2021 alone. Furthermore, with high migration of doctors and nurses from Africa, a heavy burden is placed on the healthcare system in Nigeria, resulting in the healthcare needs of constituents not being adequately met.

Kano State, the most populous state in Nigeria, is faced with the challenge of having a limited number of health professionals as compared to its population of more than twenty million people, making the ratio of less than 1 doctor to 16529 population, 1 nurse to 60 population (WHO, 2020; Daily Trust, 2023).

Mitigating the problem of migration and retention in the healthcare sector is not an easy task. It requires increased employee's compensation, and employer branding practices. As competition for talented doctors and nurses is redefining and creating a new dynamic for retention these professionals, as such, policy makers and management of health centers are refocusing their attention to innovative new methods to attract and retain doctors and nurses (Chacko & Zacharias, 2020). Hence, employer branding has progressively become a vital factor for success within health sectors and has captured significant attention in recent years, being used to appeal to potential medical doctors and nurses while also engaging current doctors and nurses within the system (Chacko & Zacharias, 2020). Health centers that actively use employer branding are thought to benefit from increased interest from potential doctors and nurses while higher levels of loyalty and commitment from current employees (Chhabra & Sharma, 2014). Similarly, psychological factors such compensation is vital strategic tool for retaining doctors and nurses especially in Nigeria

In summary, while the retention of doctors and nurses is a global challenge, the unique socio-economic conditions in Kano State necessitate a targeted examination of employer branding and fair compensation. This study aims to fill the gap by investigating the impact of employer branding and compensation of doctors and nurses' retention in this region.

From the cradle Nigerian health sector is grappling with the challenge of retaining doctors and nurses which significantly affect the functionality of the health sector in Nigeria (Chidinma & Bright, 2018; Salau *et al.*, 2018; Dayel *et al.*, 2020). This problem was worsened in the last decade with significant impact on the health ecosystem in Nigeria (Obum & Widarman, 2022; Anlesinya *et al.*, 2019; Salami *et al.*, 2016). Furthermore, available statistics have shown that there are 74,543 doctors on the register of the Medical and Dental Council of Nigeria and registered 125,000 nurses and midwives, (Onyeaghala, 2023; MDCN 2022, Nigeria Bureau of Statistics 2022; Ezigbo, 2020 Ekepenyong et al 2018). However, only about half of these doctors practice in the country (Muanya, 2020). Nigeria may need more than 300,000 doctors and 800,000 nurses to meet the WHO's recommended doctor-to-patient ratio of 1:600 and nurse-to-patient ratio of 1:20 (Muanya, 2020). Since 2009, Nigeria has been losing an average of 700 doctors annually to developed countries across the globe (Okafor, 2016).

There are 1210 doctors in Kano State (daily trust 2023). In 2023, 163 doctors left Kano state and 789 nurses. The implication these is that in the nearest future it would be difficult for the state to meet the health demand of its citizen which will have a detrimental effect on social and economic development. The choice of northwestern region for this study was because of the lack literature that explored this particular issue couple with the population of the region and the tendency of pandemic outbreak and control. This study become necessary to ensure adequate manpower against health-related pandemic, a typical example is the covid 19 pandemic. The peculiarity of Kano State as the study area was mainly because of its socio-economic status, population and sociocultural factor. Despite effort to improve retention, the shortage doctors and nurses in Kano State continue to worsen, largely due to insufficient employer branding practices, and fair compensation. This study evaluated employer branding, and fair compensation to ascertain the retention of doctors and nurses in Kano State.

Employer branding is crucial for retention of doctors and nurses particularly in the northwestern because it would help in attracting competent doctors and nurses to the region. Similarly, compensation is a booster of moral with fair and adequate compensation most doctors and nurse will like to work in the northwestern region because of the sociocultural factors in the region and other opportunity. The long-term effect of implementing

employer branding and compensation strategy in the public health is to enhanced and ensure growth and development, and the condition of service will greatly be enhanced as the rate of migration will drastically decline.

Previous studies have explored various aspect of retention factors, there is a notable lack of research focusing on how employer branding affect the retention of doctors and nurses in Kano State tertiary health centers. Furthermore, existing studies have not sufficiently explored the combined effect of employer branding and compensation on doctors and nurse retention in Kano State. From the above-stated statement of the problem, the following research questions are formulated.

- i. How does employer branding impact the retention of doctors and nurses in Kano State?
- ii. To what extent does fair compensation influence doctors and nurses in Kano State?

The objectives of this study are to investigate the effect of employer branding and fair compensation on doctors and nurses in retention in the Kano State. The following hypothesis are stated in its null form:

- i. There is no significant relationship between employer branding and doctors and nurses in retention in Kano State.
- ii. There is no significant relationship between fair compensation and doctors and nurses' retention in Kano State

2. Literature Review

2.1 GSCM Concept of Employer Branding

The concept of employer branding was put forth by Ambler and Barrow in 1996, according to the scholars the concept is the application of the principles of branding to human resource management this is with the aim of attracting potential employees and retains current talent with the organization. Ambler and Barrow (1996) further elucidate that employer branding is a package of benefits provided by an employer during employment or as the package of functional economic and psychological benefits provided by employment and identified with the employing organization. The concept gains a wide recognition in the 1990s as different scholars contributed to the concept. Scholars such as Sullivan (2017) view employer branding is a long-term strategy to manage the consciousness and perceptions of employees, potential employees, and related stakeholders with regards to a particular organization. Sivertzen *et al.* (2013) proposed that employer branding is the development of an organization's image and reputation as a prospective employer and would affect its ability to retain employees. Employer brand encompasses the organizational value system and organizational policies towards attracting, motivating, and retaining their current and potential employees (Ahmed & Daud, 2016; Kashive & Khanna, 2017). Barik and Jain (2023) assert that employer branding can be understood as a good image of the organization in the minds of employees and all potential candidates. Organizations in the 21st century are working towards positive and viable employer branding in order to retain their employees. This practice, if properly employed in the health sector, would enhance the retention of doctors and nurses. To further understand the relation that exists between employers branding and employee's retention is evidence in the positive findings of scholars such as (Gupta *et al.* 2018; Ooko & Nzulwa 2017; Khoshnevis & Gholipour, 2017). As such employers branding is critical tool for retention of employees especially in health sector hence this study aligns with the above findings as employer branding is significant to the retention of health profession.

2.2 Concept of Compensation

Compensation is one of the core benefits of an employee's drive to enter any sort of contract or employment relationship. Hence, most employees come to the organization for financial needs and expect salaries and benefits; if they are not well compensated, they become dissatisfied (Kossivi *et al.*, 2016). Compensation has become a profound element in reducing turnover and increasing retention. Compensation is a motivating factor for the workforce to be responsible for the given tasks, which result in long-term association with the organization (Moncarz *et al.*, 2009). Scholars such as Chiekezie *et al.* (2017), Hanai and Pallangyo (2020), Eke *et al.* (2021) have found empirical evidence on the subject matter therefore, postulating positive relation.

The exchange approach views of organizations posit that individuals attach themselves to their organizations in return for certain rewards from the organizations. According to this view, employees enter the organization with specific skills, desires, and goals and expect to find an environment where they can use their skills, satisfy their desires, and achieve their goals. The perception of favorable exchanges or rewards from the employees' point of view is expected to result in increased retention in the organization. On the other hand, failure by the organization to provide sufficient rewards in exchange for employee's efforts is likely to result in high employee turnover or migration for perceived better opportunities.

The social-exchange theory suggests that employees respond to perceived favorable working conditions by behaving in ways that benefit the organization and/or other employees. Equally, employees retaliate against dissatisfying conditions by engaging in negative work attitudes such as absenteeism, lateness, and quitting the organization (Haar, 2006; Crede *et al.*, 2007). The exchange theory has also been used to explain the employee's attitudinal involvement in organizational decision-making and the employee's commitment to the organization. The theory offers a theoretical basis to explain why employees choose to become more or less involved in their job.

3. Research Methodology

Employer branding and fair compensation on doctors and nurses' retention in Kano State, tertiary health centers, was investigated using survey design approach. The study's target population included all of the medical doctors and nurses working in Kano State's tertiary hospitals. There are two thousand nine hundred and fifteen (2915) doctors and nurses working in Kano State tertiary health centers, the health centers include; National Orthopedic Hospital Dala 420 doctors and nurses and Aminu Kano Teaching Hospital 1508 doctors and nurses. Muhammad Abdullahi Wase Teaching 332 doctors and nurses and Murtala Muhammed Specialist Hospital 655 doctors and nurses Convenience and stratified sampling strategies were used in this investigation. The Krejcie and Morgan sampling table was used to establish the sample size in a scientific manner. The study's sample size is 443, which indicates that 443 copies of the questionnaire were distributed proportionately to medical laboratory scientists, doctors, nurses, and pharmacists working in tertiary health centers in Kano State, Nigeria. The primary data-gathering approach for this study was structured questionnaire use to extract data. To check the face and content validity of the instruments that were used for this study, the questionnaires were reviewed by two academics. The reliability of the items under each variable was evaluated using Cronbach's alpha. The overall reliability for the 27 items was 0.928. The researcher and his assistants distributed 443 copies of the questionnaires to medical professionals, including physicians, nurses, pharmacists, and medical laboratory scientists working in tertiary health centers in Kano State, Nigeria. Multiple regression was used to predict the relationship between independent variables and dependent variables. The hypotheses were tested using regression analysis and the f-test at the 0.05 level of significance.

4. Results and Discussion

Anova**Table 1 ANOVA table**

Model	Sum of Squares	Df	Mean Square	F	Sig.
Regression	1146.023	2	573.011	146.948	.000 ^b
Residual	1551.972	398	3.899		
Total	2697.995	400			

a. Dependent Variable: DNR, b. Predictors: (Constant), FC, EB,

The essence of the Anova is to determine the fitness of the model. Thus, Table 1 shows F=146.948, P<0.001 signifying the overall fitness of the model at p=0.000 indicating that the model is fit at 99.9%.

Table 2 Model summary

R	R Square	Adjusted R Square	Std. Error	F Change	Sig.	Durbin-Watson
.652 ^a	.425	.422	1.97470	146.948	.000	1.892

a. Predictors: (Constant), EB, FC. b. Dependent Variable: D/NR

The model summary which indicates that the two (2) independent variables (Employer branding and fair compensation) of the study explains 42.5% ($R^2=0.425$) of the dependent variable (doctors and nurses' retention). This implies that 53.2% of the level of doctors and nurses' retention in Kano State Nigeria can be determined by the independent variables while the rest 57.5% is determined by other factors not included in this research, these factors may include poor working environment and working condition, lack of innovation, sociocultural factor, insufficient security, poor motivation and job satisfaction. Norusis (1999) posited that the Durbin-Watson can be used in order to test the independence of the error terms and recommends that the general rule of thumb is between 1.50 and 2.50 which if achieved the assumption is not violated. Hence the Durbin-Watson for this study is 1.892 indicating that the rule was not violated. However, in the event of the existence of autocorrelation, the implication is that the model is mis specified indicating that some key variable or variables are missing from the model which will distort the result.

Table 3 Coefficients Table

Hypotheses	Variables	B	Standardize Coefficients		T-value	p-value	Decision
			Std. Error	Beta			
H ₀₁	Employers branding	.237	.019	.526	12.44	.000	Rejected
H ₀₄	Employees compensation	.463	.056	.218	5.147	.000	Rejected
F Value	75.356						
F Sig	.000						
R ²	.425						
Adjusted R ²	.422						
Durbin-Watson	1.892						

The regression analysis was used to determine the relative contribution of employer branding and fair compensation. The unique contribution of each independent variable to the change in the dependent variable is obtained under the beta-standardised coefficients.

The beta coefficient value for employer branding is 0.237, with a t value of 12.44 and a significant value of .000, which is lower than 0.05. The beta value indicates that employer branding has a positive contribution to make in explaining the dependent variable (doctors and nurses' retention). Hence, employer branding has a significant and positive effect on health doctors and nurses' retention in Kano State, Nigeria. Similarly, the beta

coefficient value for fair compensation is 0.463, with a t value of 5.147 and a significant value of 0.000, which is lower than 0.05. Implying that employee's compensation has a positive and significant influence on doctors and nurses' retention in Kano State.

In order to decide whether the hypotheses of this study are rejected or not, there are some preconditions that will determine whether the hypothesis null will be accepted or rejected. Hair *et al.* (2010) and Pallant (2017) suggested that the t value should be 1.96 and above for the hypothesis to be supported, and the significant value should be 0.050 and vice versa. The two hypotheses were tested based on standardised coefficients of beta with a 95% confidence level.

Based on the results of the multiple regression coefficient employer branding has a positive and significant effect on doctors and nurses' retention in Kano State, Nigeria, with a standardised coefficient beta value of 0.237, a t value of 12.44, and a P value of 0.000, which is lower than 0.05. at the 95% confidence level. Thus, the null hypothesis (H₀) is rejected. the implication of this findings is that enhanced employer branding will not only retain health professionals but also motivate them to perform better and be more committed. This finding is also consistent with social exchange theory. The theory emphasis on employer creating a conducive environment for employee to thrive with high productivity and also remain with the organization for a long time in other for the organization to gain competitive advantage and dominate the market. This finding is consistent with the findings of Barik & Jain (2023), Auditya, & Hendarman (2020), Jenitta (2020), Gupta, Kumar & Sahoo (2018). Ooko & Nzulwa (2017) Hadi& Ahmed (2018), Chacko & Zacharia (2020), Udayanga, Jayarathna, Rasheed & Dissanayake (2021) and Upandhyaya & Ayari (2019). The contribution of this study to the body of knowledge on employer branding and health professionals' retention is the peculiarity of the study environment taking cognizance of cultural and socioeconomic factors.

From the results of the multiple regression coefficient employees' compensation has a positive and significant effect on health professionals' retention in Kano State. With a standardised coefficient beta value of .463 with a t value of 5.147 and a significant value of 0.000, which is lower than 0.05. at the 95% confidence level, Thus, the null hypothesis (H₀) is rejected. The implication of this findings is that employee's compensation influences doctors and nurses' retention in Kano State, as the major need of health professionals, especially in Nigeria, is centered around psychological and safety needs. As such, compensation is very significant to the retention of medical health professionals in Kano State and Nigeria at large. Similarly, to mitigate the problem of high migration in Nigeria, health sector issues relating to compensation should be taken into serious consideration. The findings of the following studies: Amoo, Saka, and Dangana (2020), Maru and Omodu (2020), Hanai & Pallangyo (2020), Eke *et al.* (2021), Putri & Adnyani (2021), are consistent with this study, while the findings of Chiekezie *et al.* (2017) contradict the findings of this study.

5. Conclusion

In conclusion, this research examined the effect of talent management on doctors and nurses' retention in Kano State. The study was carried out with the aim of proposing a lasting solution to the lingering problem of doctors and nurses' migration that has affected the health sector in Kano State. In order to achieve this particular objective, a quantitative research approach was adopted with the aid of survey research design to obtain valuable and requisite information from doctors and nurses across tertiary health centers in Kano State. Based on the quantitative findings from this study, employer branding and fair compensation are factors that influence doctors and nurses' retention in Kano State. Although these factors are significant but are constraint because 46.8% of retention factors are not captured in this study. This study is limited to only tertiary health centers as it does not capture primary and secondary health centers and the study only focus on public health centers.

Hospital management and policymakers should double their efforts by ensuring the effectiveness of employer branding in order to retain health professionals across Kano State. This can be achieved through the encouragement of an innovative work culture and by assisting employees in achieving their goals by ensuring fair and transparent career progression. Hence, by demonstrating superior managerial and leadership styles and thereby creating a conducive work environment, health professionals can thrive and fulfil both individual and organizational goals.

In Nigeria and kano state specifically, most health professionals have been protesting that their compensation is not commensurate with their performance, compared to developed nations. Thus, policymakers should reevaluate and redesign a compensation structure that will be equivalent with other relevant developed nations across the globe in order to ensure retention and discourage migration of health professionals.

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Conflict of Interest

Authors declare that there is no conflict of interests regarding the publication of the paper.

Author Contribution

The author confirms sole responsibility for the following: study conception and design, data collection, analysis and interpretation of results, and manuscript preparation.

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