

CASE STUDY 4



*...rewards come from God,
and the social appreciation
for a job well done and
service to the community...
- Mrs Jaya Joseph*

MRS JAYA JOSEPH comes from a family of 5 children in Kerala. In 1979, she completed her nursing training at a hospital in Mumbai. She has been working since then and specializes in cardiac care. At present, she is working as in-charge staff nurse in the cardiac catheterization laboratory (cath-lab) at the high clientele hospital in Kolkata, West Bengal. She lives with her husband and two children.

PRE-MIGRATION

Sister Joseph, as she is called here, started her career in a hospital in Mumbai, immediately after completing her training. She worked for four years (from 1979 to 1983) as a staff nurse in the Cardiac Care Unit (CCU), earning Rs.300/month, with an additional monthly allowance of Rs. 75 for her speciality. She lived in the hospital hostel, sharing a room with five others. Sister Joseph supported her family and other siblings by regularly sending home money. After sending home money, she did not have enough left for personal expenses. Though she followed a non-vegetarian diet, she could not afford to eat anywhere but the vegetarian cafeteria in her hostel. The low salary motivated her to look for better opportunities. Many of Sister Joseph's friends and colleagues had applied for jobs abroad, also due to monetary reasons, and she decided to try this option as well.

Advertisements for recruitment agencies and job openings in Gulf countries were frequently placed in Mumbai newspapers. Sister Joseph applied to one such advertisement for a job in Saudi Arabia and got through the walk-in interview. She paid the agency fees of approximately Rs. 10,000 to handle all the formalities. The agency helped in completion of documents and the visa to Saudi Arabia, which took a reasonable amount of time. She states that now the process and preparation period are longer and the fees are much higher. At that time, the interview was held in December and she started working in the new country by June. She regrets allowing the recruiting agency to hold her passport as it prevented her from applying for jobs in other countries, where the salary was better.

MIGRATION

All logistic arrangements had been taken care of when Sister Joseph arrived in Saudi Arabia. A contract had been signed with the hospital and they had arranged for her pick-up from the airport. The hospital arranged for an orientation one week during which

time no work assignment was given. All the newly recruited nurses were taken around the hospital and their duties explained to them. The doctors interacted with the new staff and tried to evaluate their work capacities prior to assigning their duties.

The work environment in Saudi Arabia was excellent and Sister Joseph faced no major problems. The staff seemed dedicated to their work and were cooperative. The hospital employed a meticulous record keeping and used a card method for filing detailed patient information. The supervisor allocated tasks to the nurses, including the senior nurses, and everyone followed this system without questioning. The entire process was systematic and disciplined. Sister Joseph found this process very impressive.

Sister Joseph found her co-workers pleasant to be around and work with at the hospital. They came from Bangladesh, Sri Lanka, Korea, Thailand, Jordan, Egypt and Saudi Arabia. The staff nurses worked in 3 shifts with good team coordination. There were no staff vacancies and no one took leave unless genuinely sick. The management provided duty rooms and nurses' stations. Performance assessments were carried out round the clock, which further added to the quality of nurses' performances. Feedback from the assessments was shared with the staff along with support to improve performances through counselling and training. Staff salaries were paid on time and they were provided with excellent food from different regional varieties. There was a salary raise yearly, though she could not recollect if promotions were linked to salary raise. The staff members were satisfied with the work conditions and amenities provided.

Sister Joseph got married in 1985 to a man who was working in the same city in a watch repairing firm. She worked in three different hospitals in the city between 1983 until the end of 1989. Working in Saudi Arabia helped her meet her objectives to earn well, improve her own living standard, and to support her father and siblings.

She feels that working abroad was a good experience and "there was nothing to worry about". She feels there were only gains in this experience. She did not feel homesick living outside of India. It helped that she was able to take yearly leave to her native home in Kerala. The flight took less time from Saudi Arabia than it took to travel from some cities in India that did not have direct flights to her home city.

Sister Joseph fondly remembers the time of her first pregnancy and delivery in Saudi Arabia. She immensely appreciated the support and care that was provided in the hospital. The doctors gave her personal support and counselling, the management took care that she could get adequate time to rest. She received care during the delivery and was provided drugs, sanitary materials, personal items. She received maternity leave and her friends and other staff living there helped her take care of herself and the baby.

When she was expecting her second baby, her husband fell ill and was unable to work. Her first child was young and the situation became difficult to manage alone. Facing these personal challenges, she was prompted to return to India even though she wanted to stay and continue working in Saudi Arabia. Her father had even suggested she stay back and continue working at the hospital. On hindsight now, she feels she should have arranged for help and stayed in Saudi Arabia.

RETURNING BACK

Sister Joseph returned to India with her family in the end of 1989. Since she was due with her second child within a few weeks of returning, she had not planned for working in India or begun the job search process. In January 1990, she delivered her second baby in India. While taking care of her family at home, she noticed a vacancy advertised in the local newspaper for a job in a cardiac care hospital in Kolkata. She applied for it and attended the interview in February 1990. She was selected and joined the hospital in May 1990. She had been looking for hospitals with "English staff" with whom she felt more comfortable working with and was happy with the staff in the new hospital. She was posted as Sister in-charge with a salary of Rs. 2,600. This was a huge change from her previous salary in Saudi Arabia.

Sister Joseph reminisces that "life had been tough". Trying to manage her family needs with this salary was a challenge. The salary was spent on rent, bringing up their two children, and household expenditures. Moreover, her husband was still undergoing treatment and had not fully recovered. Almost all the money she had saved while working in Saudi Arabia was spent in taking care of her family.

The work atmosphere was drastically different in India. While recounting her initial re-entry into the Indian system, Sister Joseph became overwhelmed with unhappy memories and bottled-up emotions. She felt that the hospitals here were not as well equipped as those in Saudi Arabia and lacked crucial equipment. She felt that she had gone back "20 years behind". Although she joined as intensive cardiac care unit (ICCU) staff, she was given charge of the cath-lab, a specialised ward for cardiac procedures. There was no formal handover of responsibilities or orientation given by the out-going staff, who unprofessionally commented, "You are so senior, surely you know everything." Without any prior experience in running a cath-lab, this situation was a challenge for Sister Joseph. The training she had received in well organized and well performing cardiac units overseas, provided her with the confidence to do a good job with her new responsibilities. The patient turnover increased remarkably from 70-80 cases a month to 425 a month and her work was appreciated by the management.

In addition to this situation, she could recount many differences in working styles and systems between India and Saudi Arabia. As a senior staff in Saudi Arabia, she was able to share feedback and have discussions with her seniors. In India, on the other hand, she says, "you would be out of your job if you say something two times." Her experience with the higher quality of work in Saudi Arabia caused her to pay careful attention to the conditions of her workplace. She brought any shortcomings to the notice of the doctors and instituted necessary corrective measures. She felt there was a bias against those staff members with foreign experience. Although she had joined at a senior post, she recalled being asked to clean the wards. Being a professional, she complied, but felt that not all staff were asked to do the same.

Sister Joseph has also noticed behavioural differences. She has observed jealousy among staff and a general attitude of self interest rather than service to patients. She also cites a lack of professional discipline. Staff could take leave at short notice, even for not so serious reasons as rains, etc. This behaviour added pressure on the nursing staff, working on shift duties, in small teams. Moreover, there is no accountability and in-fighting was evident in the team. "Whoever does the job also gets the blame if it does not turn out well and people, who don't work, are ultimately spared of it," she summarized.

She feels that if average workers in India continue to get better salaries than the good ones just by being close to the people in power, those working hard and sincerely will start to emulate the average workers by performing indifferently. In her opinion, senior level and managerial staff should regularly evaluate work performance and be aware of the activities and behaviours in wards and departments. They should verify before they take action if they receive any complaints against a staff member.

Sister Joseph said that the hospital offered good trainings and orientation for staff because many of the staff members were trained abroad. However, she feels that recently the standard of nursing training in India has deteriorated. Most training is theoretical and student nurses do not receive the requisite practical training. She has also observed some lacunae in the sequence of care for cardiac patients. She feels that there is no system of patient follow-up after cardiac interventions, which is very essential. Through her own personal motivation, Sister Joseph follows up the patients discharged after such procedures and are still sick by offering them counselling and support. In this way, she has tried to bring her past learning into her present work. She personally orients and provides help to all new staff.

Sister Joseph voiced sadly that even though she has been working since 1979, she still does not carry home a salary more than Rs. 50,000 per month. She finds it difficult to maintain even a middle class living standard with this salary. She is thankful that she has been able to face the numerous challenges through hard work and with the support from friends and colleagues.

Sister Joseph is dedicated to her work and service towards her patients. She feels bad when she observes other medical professionals not showing enough dedication in their work towards patients. She believes that if she takes care of someone here, someone will take care of her parents elsewhere. After all, 'What goes in comes back'.

LOOKING BACK...

Sister Joseph would like to advise staff to work abroad provided there are no additional expenses, insurance is paid, and one is able to save money while working. She feels people can learn to be dedicated to patients and work professionally from working abroad. Medical professionals should work sincerely to avoid mistakes with patients and should not have an attitude based only on making money.

Sister Joseph shared some socially relevant feedback regarding the personal status of young migrant nurses. She said that young nurses often send all their money back home and then do not have enough money to spend on themselves and are sometimes deprived of basic amenities.

Considering India's rising costs of living, revising the salary system for nursing staff would enable the country to bring back and retain professionals. There should be a new training system, updated with modern knowledge and training methods. Regular training updates are required for staff. Proper and urgent action is required to be taken by the government regarding these aspects. The system should improve by providing nurses good hostel facilities, amenities for their stay, entertainment, and train them well. "Dedication will follow".

CONCLUDING

Sister Joseph thinks that the nursing profession is no longer lucrative and fewer trainees join the profession these days. Furthermore, with new hospitals constantly coming up, the lack of staff nurses will be a significant problem. Unless the government offers an attractive package for nursing jobs, there would be less candidates coming into the nursing profession, more out migration and many job vacancies, so much so that "the system will collapse."

She feels health personnel can derive professional satisfaction in India but would have to rely on their own dedication and self-motivation for the work, since appreciation of work is not uniform in India.

She says that rewards come from God, and the social appreciation for a job well done and service to the community.

