MANAGEMENT STYLES AS CORRELATES OF NURSES' RETENTION AT WORK: A CROSS-SECTIONAL SURVEY OF NURSES IN GHANA

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ABSTRACT

Retention of health professionals in the health sector in Ghana is crucial to address human resource needs of the health sector and promoting efficient and effective healthcare system. Nurses are one of the key professionals whose role in the healthcare industry cannot be underestimated. Hence, this study assesses management styles and retention of nurses in Ejisu Government Hospital and Living Waters Hospital all in Ejisu-Juaben Municipality of Ashanti Region, Ghana. A cross-sectional quantitative descriptive survey design was adopted for this study and the target population are Nurses at Ejisu Government Hospital and Living Waters Hospital all in Ejisu-Juaben Municipality of Ashanti Region, Ghana. A simple random sampling technique was used in selecting 135 participants. A structured questionnaire was used to collect data from the participants. Data was analyzed using STATA statistical software Version 14.2. Statistical significance was set at 0.05. The socio demographic characteristics of this study showed that Females dominated the study (68.89%) and the majority (35.56%) were between the age group of 26-30 years. Majority of the respondents are single with no children. The longest years of service of respondents are above 5 years and majority have Diploma Certificate. Findings also observe that the respondents perceive participatory management style were adopted in both Public and Private Hospital and there is a statistically significant relationship between benevolent-authoritative management styles and intention to leave. Healthcare managers should make necessary efforts to be proactive, involve nurses in decision making, communicate effectively and provide support that will improve commitment and job satisfaction among nurses.

Keywords: Relationship: Management Styles: Nurses: Ghana.

INTRODUCTION

Healthcare management is a complex but dynamic task which requires trained and experienced professionals to provide services needed (Bhattacharya and Ramachandran, 2015). The healthcare operates with its most valued asset; the health workforce, where nurses of any specialty plays major role of caregiving (Rad and Yarmohammadian, 2006). Baunaun et al (2006) describe retention of employees as "maintenance of an appropriate supply of personnel to meet the health needs of any given population". Retention could be of many advantages to the health professionals, the organization and the clients who patronize healthcare services (Saber, 2012). It builds a strong relationship between the manager and the health professional, create room for dependability in the professional, provide the opportunity to gain more experience and advance professionally (Hamel, 2017). Retention of nurses is a means by which organizational culture is handed down to the newly trained nurse.

Nurses are one of the key professionals whose role in the healthcare industry cannot be underestimated. As such, their retention is crucial to the growth and survival of the

healthcare industry. Global health force shortage is predicted to reach 12.9 million by the year 2035, which currently stands at 7.3 million and if not addressed, will lead to devastating implications for the health sector (WHO, 2013). Also, registered nurses' (RN) labour turnover has been on the rise globally. This is evident in a study conducted in the USA in 137 hospitals from 26 states.

The study records 18.2% turnover rate at an estimated cost of $4.4 -7.0 million lost in an average hospital (Nursing Solutions Inc, 2018). The situation remains unchanged with high labour turnover in New Zealand, Canada and Australia (Duffield et al., 2014). The shortage is as a result of aging health workers, high labour turnover of health professionals and the fast growing world population (WHO, 2013). Another triggering report discussed at the annual meeting of WHO African Region held in Victoria Falls, Zimbabwe noted shortage of skilled health professional in Africa (WHO Africa, 2018). This report cites an average of 1.3 health workers to 1000 population which is found as a challenge and is below the recommended 4.5 per 1000 population by the Sustainable Development Goals (SDGs) in Africa as at 2015.

Many studies have been carried out on identifying the factors that influence nurses' retention. However, they have largely been unable to establish a singular factor. One factor that has been identified to promote staffs' retention in the health industry is the management style used by the managers. Management styles are the methods the managers use throughout the organization to achieve the organizational goals (Nwadukwe and Court, 2012). According to Likert and Likert (as cited in Nassar et al., 2011), management styles are classified into four kinds and these styles are; exploitative authoritative, benevolent authoritative, consultative and participatory management style. These management styles play critical roles in personnel's empowerment, job satisfaction and commitment of employees to the organization hence their relevance to healthcare system.

Ghana on the other hand, experiences massive nurses' attrition from 2000 to 2006 which is associated with poor salary. However, the attrition rate reduced in Ghana upon introduction of single spine salary structure (SSSS) in 2012 (Antwi and Philips, 2013). In Ghana, the Health Sector Fact and Figures (2017) see a nurse per 542 populations. Although there is lack of consistent statistic supporting labour turn over among nurses in Ghana, Ejisu Government Hospital records three (3) nurses take transfer to other facilities outside the municipality this year (MHD Half year report, 2018). Also, Living Waters Hospital records eight (8) nurses resigning from the organization according the HRM, within the months of January and June, 2018. Irrespective of efforts made by hospital administrators and nurse managers to retain the registered nurses, turnover still persists. To curtail the issue of labour turnover coupled with increasing population growth (2.7% per annum in Ejisu-Juaben Municipality) with its increasing demand for health care, there is a need to identify strategies to retain the skilled registered nurses to ensure productivity and quality health care.

Management styles are the philosophies that the manager utilize on the capabilities of the employees in order to achieve established organizational goals (Nwadukwe and Court, 2012). These philosophies are applied throughout the organization to ensure effectiveness and efficiency. According to the authors, these styles are the extent to which the manager progressively leads the subordinates and the distinct ways by which he involves them in decision making in performance of those activities to attain organizational goals.

Exploitative Authoritative Management Style:
Exploitative authoritative style of management

is a style where decisions are solely made by the manager. This style may be used when organization is large and most employees are seen as less competent therefore have to be coerced to perform their responsibilities. In other way, this style is noted to promote productively if task needs to be accomplished within the shortest possible time (Grimsley, 2018). According to Grimsley, this style is associated with manager who exploits the employees and mostly where the employees are unskilled and have no union representative for an indirect participation and advocacy on their behalf pushing them to work extra with demeaning incentive.

Benevolent Authoritative Management Style: Ackon (2003) in his book 'Management of Healthcare Organizations in Developing Countries' describes this style of management as permissible where the manager seeks the ideas of the employees but the final decision lies with the manager. Communication is mostly downward where inputs of the employees are not mostly taken into consideration.

Consultative management style: Consultative style encourages the employees' involvement in decision making and foster voluntary cooperation (Shahmohammadi, 2015). This style is perceived as ideal as the employees' ideas, suggestions and concepts are considered during decision making by managers.

Participatory management style: According to Kossivi et al (2016), participatory style is employed by manager who involves the employee in decision making concerning the organization and also with issues that may affect them directly. He further states that, this style is a good choice of style where the employees have adequate knowledge about issue at hand and well versed in the organizational culture. This management style is perceived as positively associated with high level of employees' job satisfaction, promote

involvement, enhances problem solving and empowers the employees and also encourages autonomy and creativity (Rolková and Farkašováa, 2015).

RESEARCH QUESTIONS

1. What is the perception of nurses about management styles?

2. What is the relationship between management styles and nurses' retention at work in Ghana?

METHODOLOGY

A cross-sectional quantitative descriptive survey design was utilized. Study was conducted among Nurses at Ejisu Government Hospital and Living Waters Hospital all in Ejisu-Juaben Municipality of Ashanti Region, Ghana, from September to November 2018. All Nurses who were not on duty during the survey were excluded from the study. The sample size was estimated using an online epi info software open calculator. A Non-response rate of 10% was added and a proportional allocation was made according the nurses' population in each hospital (Ejisu Government Hospital and Living Waters Hospital). Simple random sampling technique was used to select 135 respondents. A structured questionnaire was used to collect data from the participants. The instrument was critically scrutinized and validated by the experts and necessary corrections was made and effected, for face and content validity.

The instrument was pre-tested at hospitals not used for study, among similar set of participants in similar setting, to ensure relevancy, appropriateness and adequacy of all items in the instrument. 10 market nurses were used. Estimation of reliability was hence done based on data obtained through test retest; Cronbach's alpha method was used with coefficient correlation of 0.839. Data collected

from the questionnaires was analyzed quantitatively. Data was analyzed using STATA statistical software Version 14.2. Statistical significance was set at 0.05. Ethical approval was obtained from the Ghana Health Service Ethical and the Kwame Nkrumah University of Science and Technology Ethical Review committees. However, local permission was obtained from the Hospital managements and their research ethics committees. Consent was also sorted from the participants. Participation was voluntary, assured anonymous identity and respondents were allowed to withdraw from the study at any stage without any penalty.

RESULTS

As presented in Table 1, the result shows that 22.22% of the respondents are within the age of 20-25, 35.56% are within 26-30, 14.44% are within 31-35, 11.11% are within 36-40, 3.70% are within 41-50 while 2.96% are 50+. 68.89% of the respondents are females while 31.11% are males. Also, 50.37% of the respondents were single, 47.41% are married while 2.22% are divorced. 48.89% of the respondents have no children, 12.59% have one child, 19.26% have two children, 8.15% have three children, 8.15% have four children while 2.96% have more than four children. About 26.67% of the respondents have 6-12 months of work experience, 15.56% have 1-2 years of work experience, 25.19% have 3-5 years of experience while 32.49% have more that 5 years of work experience. 30.37% of the respondents have school certificate, 46.67% have diploma, 22.22% have BSc while 0.74% have masters. This study observes that females dominate the respondents' population and the majority are between the age group of 26-30 years, majority of the respondents are single with no children. The longest years of service of respondents are above 5 years and majority have Diploma Certificate.

TABLE 1
Socio-demographic characteristics of respondents

Variables		Public Hospital (%) (EGH n=96)	Private Hospital (%) (LWH n=39)	Frequencies (%) (n=135)
Age	20-25	20 (20.83)	10 (25.64)	30 (22.22)
	26-30	34 (35.42)	14 (35.90)	48 (35.56)
	31-35	22 (13.54)	11 (28.21)	33 (14.44)
	36-40	13 (13.54)	2 (5.13)	15 (11.11)
	41-50	4 (4.17)	1 (2.56)	5 (3.70)
	50+	3 (3.13)	1 (2.56)	4 (2.96)
Gender	Female	63 (65.63)	30 (76.96)	93 (68.89)
	Male	33 (34.38)	9 (33.08)	42 (31.11)
Marital status	Single	44 (45.83)	24 (61.54)	68 (50.37)
	Married	49 (51.04)	15 (38.46)	64 (47.41)
	Divorced	3 (3.13)	0	3 (2.22)
	Widowed	0 (0)	0	0
Number of children	No child	44 (45.83)	24 (61.54)	66 (48.89)
	1	11 (11.46)	6 (15.38)	17 (12.59)
	2	19 (19.79)	5 (12.82)	26 (19.26)
	3	10 (10.42)	1 (2.56)	11 (8.15)
	4	9 (9.38)	2 (5.13)	11 (8.15)
	4+	3 (3.13)	1 (2.56)	4 (2.96)
Work Experience	6–12months	23 (23.96)	14 (35.9.)	36 (26.67)
	1 – 2 years	13 (13.54)	8 (20.51)	21 (15.56)
	3 – 5 years	25 (26.04)	9 (23.08)	34 (25.19)
	5 years	35 (36.46)	8 (20.51)	44 (32.59)
Educational Status	Certificate	27 (28.13)	14 (35.90)	41 (30.37)
	Diploma	46 (47.92)	17 (43.59)	63 (46.67)
	BSc.	22 (22.92)	8 (20.51)	30 (22.22)
	Masters	1 (1.04)	0	1 (0.74)

Research question 1

What is the perception of nurses about management styles?

The study assesses nurses' perception on four management styles; Exploitative Authoritative style, Benevolent Authoritative style, Consultative style and Participatory style proposed by Likert (1967). In assessing management styles employed by managers in both facilities, Majority (19.70%) of the respondents strongly agree that, their managers'practice participatory management style, consultative management style (12.12%), exploitative authoritative (9.85%) and benevolent authoritative (6.82%). The study found that majority (66%) of the nurses strongly perceives that their managers exhibits participatory management style in both hospitals.

TABLE 2
Nurses' Perception About Management Styles

Variables		Public Hospital (%) (EGH n=94)	Private Hospital (%) (LWH n= 38)	Total Frequencies (%) (n=132)
Exploitative Authoritative Style	Strongly Agreed	12 (12.77)	1 (2.63)	13 (9.85)
	Agreed	32 (34.04)	12 (31.58)	44 (33.33)
	Neutral	28 (29.79)	8 (21.05)	36 (27.27)
	Strongly Disagreed	21 (22.34)	16 (42.11)	37 (28.03)
	Disagreed	1 (1.06)	1 (2.63)	2 (1.52)
Benevolent Authoritative Style	Strongly Agreed	8 (9.57)	1 (2.63)	9 (6.82)
	Agreed	36 (38.30)	15 (39.47)	52 (39.39)
	Neutral	31 (32.98)	13 (34.21)	44 (33.33)
	Strongly Disagreed	12 (12.77)	5 (13.16)	17 (12.88)
	Disagree	7 (7.45)	3 (7.89)	10 (7.58)
Consultative Style	Strongly Agreed	12 (12.77)	4 (10.53)	16 (12.12)
	Agreed	47 (50.0)	18 (47.37)	65 (49.24)
	Neutral	25 (26.60)	10 (26.32)	35 (26.52)
	Strongly Disagreed	6 (6.38)	4 (10.53)	10 (7.58)
	Disagreed	4 (4.26)	2 (5.26)	6 (4.55)
Participatory Style	Strongly Agreed	16 (17.02)	10 (26.32)	26 (19.70)
	Agreed	44 (46.81)	17 (44.74)	61(46.21)
	Neutral	22 (23.40)	7 (18.42)	29 (21.97)
	Strongly Disagreed	11 (11.70)	3 (7.89)	14 (10.61)
	Disagreed	1 (1.06)	1 (2.63)	2 (1.52)

Research question 2

What is the relationship between management styles and nurses' retention at work in Ghana? Most (31.1%) of the respondents who have the intention to leave agree to consultative style as management style among managers. However, the difference is not statistically significant (p-value=0.33). Also, a significant proportion

(20.3%) of the respondents who have the intention leave agree to benevolent authoritative as management style observed among nurse managers (p-value=0.004), participatory style of management (26.4%) and exploitative authoritative styles (19.4%) also does not show any significant association with intention to leave (0.06 and 0.32 respectively).

TABLE 3
Relationship between Management Styles and Nurses' Intention to Leave

Management Styles	Intention to Leave (n=129)		X^2
	Yes (n=68)	No (n=61)	(p-value)
Exploitative Authoritative Style			13.72 (0.32)
• Strongly Agreed	10 (7.8)	3 (2.3)	
• Agreed	25 (19.4)	18 (14.0)	
• Neutral	18 (14.0)	17(13.2)	
• Strongly Disagreed	14 (10.9)	22 (17.1)	
• Disagreed	1 (0.8)	1 (0.8)	
Benevolent Authoritative Style			29.17 (0.004)*
• Strongly Agreed	7 (5.4)	2 (1.6)	
• Agreed	26 (20.2)	25 (19.4)	
• Neutral	24 (18.6)	18 (14.0)	
• Strongly Disagreed	8 (6.2)	9 (7.0)	
• Disagreed	2 (1.6)	7 (5.4)	
Consultative Style			17.86 (0.33)
• Strongly Agreed	9 (7.0)	8 (6.3)	
• Agreed	40 (31.1)	25 (19.4)	
• Neutral	12 (9.3)	22 (17.1)	
• Strongly Disagreed	7 (5.4)	3 (2.3)	
• Disagreed	0	3 (2.3)	
Participatory Style			
• Strongly Agreed	7(5.4)	19 (14.7)	25.41 (0.06)
• Agreed	34 (26.4)	26 (20.2)	
• Neutral	20 (15.5)	7 (5.4)	
• Strongly Disagreed	7(5.4)	8 (6.3)	
• Disagreed	0	1 (0.8)	

DISCUSSION

This study examines the relationship between management styles and nurses' retention at work in Ghana. The demographic characteristics of the study shows that females dominate the study and the majority are between the age group of 26-30 years. Majority of the respondents are single with no children.

Our study observes that the respondents perceived that participatory management style was adopted in both Public and Private Hospital. The respondents observe their managers relate well with them, involve them in decision making and communicate well with them. This finding is remarkable but contradicts a study by Nassar *et al* (2011) which found nurses' perception on their managers in some private hospitals in Egypt as consultative, where nurses' ideas are sought but are not trusted completely by their managers. Participatory style is perceived by nurses as a good choice of style, where the employees are engaged in decision making concerning the organization, and are much more knowledgeable about the organizational culture (Kossivi et al., 2016). This evidence may be related to the fact that majority of the respondents have worked for more than five years and may be more acquainted with their managers and the health systems. Rad and Yarmohammadian (2006) highlight the fact that, this style of management is more applicable where the employees are matured in the organization and well informed coupled with manager's competence in the organizational operation. Presumptuously, the finding of this study shows that, nurses are well experienced, involved in decision making and have good relationship with their managers. A proportion (12.12%) of respondents also perceived their managers practicing consultative style where they are engaged in decision making only in specific situation while the general policies are determined by the nurse manager. Few nurses also perceive their managers as benevolent and exploitatively authoritative. Managers are perceived to be dictative and there is either little or no involvement of nurses in decision making.

Although these styles are known to promote productivity in the shortest possible time, it may not promote innovation and may decrease morale of employees hence turnover intentions (Grimsley, 2018). The reason for the low response to these styles may be due to nurses' preference for autonomy. Nurses' desire professional autonomy where they can make decisions and practice independently with their skills and knowledge, provided resources are available with little or no dictation from the manager (Heale, 2017). This brings about job satisfaction hence higher likelihood of retention (Lephalala et al., 2008). The study shows that employees have diverse opinions about their managers and there is a need for managers to develop a good and a balanced working relationship with their subordinates to help organize them to achieve productivity, teamwork and job satisfaction to keep them at work.

The study reveals a statistically significant relationship between benevolent-authoritative management style and intention to leave. In comparison with the other management styles, benevolent authoritative is identified as the main management style that influences negatively the nurse intention to leave. This finding somehow disputes a finding by Nassar et al (2011), who found exploitative authoritative style more significant in association with nurses quitting the nursing job. This study also explores nurses' intention to leave their current place of work. It is found that majority (52.71%) have the intention to leave their current place of work soon. However, this finding is most common among nurses working in the public hospital than the private. Rispel et al (2014) proves otherwise

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when they identify job dissatisfaction among nurses working in the private hospitals due to higher workload, poor pay and strict working conditions hence higher intention to leave the private sector. Probing further to determine their reasons for leaving, their perception of management styles was statistically analyzed against a dependent variable "intention to leave".

Although these styles are closely related, the benevolent authoritative manager allows some sort of involvement of employees but final decision still lies on the manager coupled with downwards communication but no cohesions or threat is applied as compared to exploitative-authoritative style (Zakaria and Hashim, 2014 and Grimsley, 2018).

The finding of this study reflects the fact that, nurses desire involvement in decision making, manager's support, effective communications and trust to stay longer in their current hospitals. In addition, majority of nurses studied are younger and vibrant and would be delighted in sharing ideas, negotiating, innovating and coaching rather than strict and rigid rules being imposed on them. This supports a study by Adzei and Atinga (2015) and Chang (2015) who found managerial support and interpersonal relationship vital for commitment, job satisfaction and retention in general. Since benevolent management style is associated with nurses' intention to leave, managers must be proactive in relating with employees, seek feedback and ensure effective communication and teamwork.

CONCLUSION AND RECOMMENDATIONS

The study reveals that majority (52.71%) of the respondents have the intention to leave their current place of work soon. Most of the respondents strongly perceive their managers as exhibiting participatory management style. However, the remaining also perceives their

managers as exhibiting consultative, exploitative authoritative and benevolent authoritative management styles. There is a significant relationship between benevolent authoritative management styles and intention to leave among nurses. However, the relationship between management styles such exploitative authoritative, consultative and participatory management styles are not statistically significant with intention to leave.

Hospital managers should ensure that, nurses are involved in decision making with issues that affect them. Secondly, managers must be proactive and must ensure a cordial inter-personal relationship with nurse so as to ensure harmony, teamwork, effective communication so as to achieve good manager-subordinate relationship. Lastly, further studies should be conducted to ascertain other factors that influence nurses' intention to leave their current jobs and should involve other healthcare facilities in the country.

REFERENCES

Ackon, E. A. (2003). "*Management of Healthcare Organisations in Developing Countries*". Accra-North, Bel-Team Publication Limited.

Adzei, F. A. and Atinga, R. A. (2012). "Motivation and retention of health workers in Ghana's district hospitals Addressing the critical issues". *Journal of Health Organization and Management,* 26 (4), pp. 467-485.

Antwi, J. and Phillips, D. (2011). "Wages and Health Worker Retention: Evidence from Public Sector Wage Reforms in Ghana". pp. 1-34.

Arnold H. J. and Feldman, D. C. (1996). *"Organization Behaviour"*. New York: McGraw Hill

Baumann, A., Yan J., Degelder, J. and Malikov, K. (2006). "Strategies for nursing: a profile for four countries". *Human Resource Series, Nurse Health Service Research Unit.*

Bhattacharya, I. and Ramachandran, A. (2015). "A path analysis study of retention of healthcare professionals in urban India using health information technology". *Human Resources for Health. Human Resources for Health,* 13 (65), pp. 1–14.

Chang, C. (2015). "Moderating Effects of Nurses' Organizational Support on the Relationship Between Job Satisfaction and Organizational Commitment". *Western Journal of Nursing Research,* 37(6) pp. 724 –745.

Duffield, C. M., Roche, M. A., Homer, C., Buchan, J. and Dimitrelis, S. (2014). "A comparative review of nurse turnover rates and costs across countries". *Journal of Advanced Nursing,* 70 (12), pp. 2703–2712.

Ejisu-Juaben Municipal Health Directorate, Annual Report, 2017.

Ghana Health Service. (2017). The Health Sector in Ghana: Facts and Figures. Accra: Ghana Health Service.

Grimsley, S. (2018). "Modern Theory of Management". Available online at www.study.com/academic/lesson-system-approach-to-management-theory-lesson. (Accessed on 2 February, 2018).

Hamel, G. (2017). "Advantages and Disadvantages of staying longer in a company". https://.www.small-bussinese.chron.com/advantage-disa-staying-company37965. (Accessed 7 July, 2017).

Heale, R. (2017). Benefits of Nursing Autonomy. Available online: http://blogs.bmj.com/ebn/2017/08/20/

benefits-of-nursing-autonomy/ (Accessed on 22 June, 2018).

Kossivi, B., Xu, M. and Kalgora, B. (2016). "Study on Determining Factors of Employee Retention'. Scientific Research Publishing Inc". *Open Journal of Social Sciences.* 4, pp. 261–268.

Lephalala, R P., Cur, M. A., Ehlers, V. J., Phil, D. and Litt (2008). "Factors influencing nurses' job satisfaction in selected private hospitals in England". 31(3), pp. 60-69

Likert R, and Likert G. (1976). *New ways of Managing Conflict.* New York: McGraw-Hill Book Company, Inc.

Nassar, M.E. (2011). "Relationship between management styles and nurses' retention at private hospitals Alexandria". *Journal of Medicine,* 47, pp. 243 -249.

Nwadukwe, U., U. and Court, O. T. (2012). "Management Styles and Organizational Effectiveness: An Appraisal of Private Enterprises in Eastern Nigeria". *American International Journal of Contemporary Research,* 2(9):198- 204.

Rad, A. M. and Yarmohammadian, M. H. (2006). "A study of relationship between managers' leadership style and employees' job satisfaction, *Leadership in Health Services".* *Emerald Group Publishing Limited,* 19(2), pp. 11–28.

Rispel, L. C., Chirwa, T. and Blaauw, D. (2015). "Does moonlighting influence South African nurses' intention to leave their primary jobs?". *Global Health Action,* 7(1), pp. 9716

Rolková, M. and Farkašová, V. (2015). "The Features of Participative Management

Style". *Procedia Economics and Finance,* 23, pp. 1383–1387

Seber, D. A. (2012). "Front-line Registered Nurse Job Satisfaction and Predictors: A Meta-Analysis from 1980 – 2009". (Unpublished thesis). Available online at http://stars.library.ucf.edu/etd/2340. (Accessed on 23 January, 2018).

Shahmohammadi, N. (2015). "The Relationship between Management Style with Human Relations and Job Satisfaction among Guidance Schools' Principals in District 3 of Karaj. Procedia". *Social and Behavioral Sciences,* 205, pp. 247 – 253

Tourangeau, A. E., Cummings G., Cranleyl, A., Ferrone, M. and Harvey, S. (2010). "Determinants of hospital nurse intention to remain employed: broadening our understanding". *Journal of Advanced Nursing* 66(1), pp. 22–32.

WHO Africa: What needs to be done to solve the shortage of health workers in Africa Region. Report on 24/08/2017. www.fro.who.int/news/what-needs-be-donesolve-shortage-health-workers-africa-region. (Accessed on 29 June, 2018).

WHO: Global health workforce shortage to reach 12.9 million in coming decades. Available Online: www.who.int/mediacentre/news/releases/2013/health-workforce-shortage/en/ (accessed on 22 June, 2018).

Zakaria, N. S. and Hashim, M. K. (2014). "Management Styles in Small and Medium-Sized Enterprises in Malaysia". Unpublished research article. pp. 125-144. (Accessed on 19 May, 2018).