Career Challenges and Employee Task Performance

Oremodu Solomon Akinsanya
*Department of Business- Administration, Caleb University,
Imota, Lagos-State,Nigeria*

Article DOI: 10.48028/iiprds/ijaraebp.v8.i1.12

Abstract

Employee performance has been established by extant literature as a determinant of organizational growth and survival. Inspite of this, many global sources have been reporting a continual decline of employee performance. This has been attributed to certain aspects of career challenges besieging employees in many health sectors globally. In Nigeria, especially in Lagos State, the performance of health care workers is confronted with decreased task efficacy, which could be related to increasing career challenges. This study examined the effect of career challenges on employee performance in selected teaching and private hospitals in Lagos State, Nigeria. The study adopted survey research design. The study population was 3,656 employees of the selected teaching and private hospitals in Lagos State. A sample size of 449 respondents consisting of doctors, consultants, dentists, nurses and hospital records keepers was determined using the Cochran formula. Stratified and random sampling techniques were adopted to select the respondents. A validated questionnaire was used for data collection. Cronbach's alpha reliability coefficients for the constructs ranged from 0.71 to 0.92. The response rate was 78%. Descriptive and inferential (multiple regression) statistics were uded to analyse the data. The findings further revealed that career challenges sub-variables had significant effect on health sector employee task efficacy (Adj. R^2 = 0.126, F (5, 343) = 11.073). P < 0.05). The study concluded that career challenges affect employees' performance in the selected teaching and private hospitals. The study recommended that relevant stakeholders of selected teaching and private hospitals should create policies that would remove career challenges to enhance their performance.

Keywords: *Career challenges, Compensation package, Employee performance, Private hospital, Service delivery, Teaching hospital.*

Corresponding Author: **Oremodu Solomon Akinsanya**

Background to the Study

In several nations including European countries such as the Great Britain,Germany and France, Felstead and Reuschke (2019), noted that employee performance is declining. In France, Festing and Berzanty (2018) posited that employee performance in construction and manufacturing sectors are hampered by issues of employers strong emphases on acquisition of basic education and also with issues of many employees reluctance to do on-the- job training. In Germany, Festing and Berzanty (2018) noted that employment situation is besieged with issues of rigid legal environments, complex labour laws and regulations.

The phenomenon of declining employee performance also extended to developing countries in African, and Asian, continents. Abdullahi, Manean, and Nurul (2019) observed that in many Asian continents such as Pakistan, India and China new work structures were emerging in several service sectors and these often led to career adaptation challenges and mismatch of employee capabilities with work demands. Khalid and Nawab (2018) confirmed in-adequate compensation which had often created poor job satisfaction as a major issue besieging employeesperformance in Pakistan and India. In developing African countries such as Kenya and South Africa, employees work behavioural patterns are changing as a result of career challenges such as lack of career advancement and transitioning opportunities, job hazards and poor career adaptation. The situation is further aggravated by perceived lack of interests of many of these countries' organizations' stakeholders on the welfare of their employees (Coetzee, Ximba, & Potgieter 2017). Barsula, Makopondo, and Fridaya (2019) asserted a high turnover tendency of employees in Kenya due to poor rewards.

In Nigeria, Ezeamama (2019) asserted that employee performance in manufacturing, civil service and other service sectors are besieged with the challenges of low productivity, wide differences in salaries payments, poor employees safety, under-employment, constant delays in salaries payments, and poor job commitments. Ezeamama (2019) further asserted that in Nigeria, task requirements for employees vary from sectors to sectors, and these often resulted in dimension of performance issues.

Asikhia (2015) as well as Barsulai, Makopondo, and Fwaya (2019)confirmed the prevalence of these challenges and noted that the inability of many organisations' stakeholders to arrest them had made many employee' core competences slide to core rigidity. This in turn impeded employee's job performances in productivity, service delivery, task efficacy and role efficiency. This is particularly true of the Nigerian medical sector. The International Centre for Investigative Reporting ICIR (2022) observed that the Nigerian medical sector's employee performance were constrained by several challenges. These include job hazards such as dealing with infectious diseases, stress, heavy workloads, prolonged night shifts and constant sleep disruptions. In Nigeria, series of other problems also affect the performance of health employees. Expectedly, these problems are inhibiting the service delivery, productivity and task efficacy performances of both private and public hospitals in Nigeria. This could be seen from the insignificant 2.94% contribution of the health sector to the National Gross Domestic Product (National Bureau of Statistics, 2019-22).

Statement of Problem

A number of scholars such as Deneve, Devos and Tvytens (2015) and Carter, Neeshat, Badham and Parker (2018) also examined the constructs of career challenges and task efficacy of employees in construction and educational sectors. Their studies reported thatlow level of some aspects of task efficacy of employees in construction and education sectors in the United States of America, Great Britain and South-Africa was due to series of career challenges. Robust as these studies's findings depicted, none of them were done with respects to the Nigerian medical sector.

The task efficacy of Nigerian health sector's employees in both private and public sector was hindered due to acute shortage of basic medical infrastructures, and non-availability of supportive medical specialists (Ashaju, Adegbenro & Adewole,2022). Worthy of note is that some medical treatments like cardio-thoracic or neuro- surgeries involve operational inputs of several other specialists such as the surgeons, the cardio-thoracic surgeons, cardiologists, anaesthetists, blood transfusion specialists and nurses. According to Ajayi (2019) and Egbedeyi (2020) any error of judgement made by any of these specialists such as wrong interpretations of scan results or faulty laboratory results could instantly kill a patient, Likewise possible extraneous intervention such as sudden seizure of electric power supplies could disrupt the flow of oxygen or anaesthetic gas supply, killing a patient instantly and this invariably affect the task efficacy of health sector's employees.

Olanibe (2018) reported that the shortage of basic infrastructures and non-availability of supportive medical specialists disrupt the service flow value chain of medical sector employees task efficacy performance. Olanibe (2018) studies were corroborated by World Health Organisation (2020) reports which stated that in Nigeria, (with Lagos State taking the lion's share) only 33% of babies born annually are delivered by skilled health personnel, and according to the report 145 women die daily in Nigeria due to complications from child birth (compared to China's average daily maternal mortality death of 12 per day, and the United States of America's daily maternal mortality rate of 2 women per day); thus, Nigeria has one of the highest child bearing women mortality rates in the world. From the analysis reported above the study concluded that career challenges affect the task efficacy of health sector performance in Nigeria.

The Specific Objective is to:

examine the effect of career challenges sub variables on task efficacy of health sector employee performance;

Research Question

what effect does career challenges sub-variables of Job Hazard Challenges, Career Advancement Challenges, Career Challenges, Career Transition Challenges, Adaptive Learning Challenges have on health sector employee task efficacy?

Restatement of Hypothesis

Ho: Career challenges sub-variables of Job Hazard Challenges, Career Advancement

Challenges, Career Challenges, Career Transition Challenges, Adaptive Learning Challenge has no significant effect on task efficacy of health sector employees in selected private and teaching hospitals in Lagos State.

Operationalization of Variables
Hypothesis One
$Y_1 = f(x)$
$X_1 = (x_1(a), x_1(b), x_1(c), x_1(d))$
$Y_1 = \beta_0 + \beta_1 x_{1a} + \beta_2 x_{1b} + \beta_3 x_{1c} + \beta_4 x_{1d} + €_1$

Literature Review
Career Challenges
A number of researches had been done on the constructs of career challenges by researchers such as Evans (2020), resulting in robust definitions of career challenges. According to Cusseu, Semesin, and Nicolau (2020) career challenges is an unbalanced fit of an employee to a complex and fast changing phenomenon associated with work. Callanan, Perri, and Tomkowicz (2017) explained career challenges as a sequence and varieties of problems workers encounter on paid or unpaid work roles throughout their lives of active human endeavors and in-depth work participation.(Sawilack et.all (2011), Wadar and Aminabhau (20120, Mensah and Labbaceus (2013.)Callanan et.all (2017), Ashok (2021). However, Evans (2020)described career challenge as problems employees encountered that created job dis-satisfaction. However, the construct had evolved in more recent years to include job and professional dis-satisfaction of employees.Bulock et.al (2018) supported this view by insisting that for an employee to grow in a career,certain impediments hindering his career must be removed.Oluochi, Njogo and Ndeda (2012) explained career challenges as unfavourable conditions an employee may encounter in the course of a chosen areer. For the purpose of this study, career challenges will be examined through the variables of adaptive learning challenges, career transitioning challenges, career advancement challenges and job hazard challenges.In terms of characteristics, career challenges consisted of several features.

Adaptive learning Challenges
Mirata, Hirt, Bergamin, and Vander- Westhuizen (2020), posited that adaptive learning challenge features include nonapplication of technological innovations, instruments, equipment or computerized data for monitoring learner's progress, behavioural inclination and needs. However, Alqahtani, Kaliappen, and Alqahtani (2021)had a different view about adaptive learning challenge. Alqahtani, Kaliappen, and Alqahtani (2021)defined adaptive learning challenge as non-provision of suitable instructional trainings for employees to meet emerging challenges employees encounter on their jobs, thus, Alqahtani, Kaliappen, and Alqahtani (2021), explained the underlining causes of adaptive learning challenges as non-provision of suitable instrumental training, which is occasioned by non-switching from systematic learning methods which could have helped the learner to blend the knowledge acquired to the environments.

In terms of characteristics, adaptive learning challenges demonstrated some inability to reinforce teaching methods to facilitate learner's comprehension, based on unique needs of the learner. As regards possible benefits or advantages removal of adaptive learning challenges can bestow on an organisation, Dziuban, Moskal, Parker, Campbell, Howlin, and Johnson (2018) inferred that some of the positive significance of removal of adaptive learning challenges enabled learners to be more productive and it allowed the creation of training instructions that was modified to suit individual learners' skills capacity. However,this study defines adaptive learning challenges as problems inhibiting employees from adapting employees from adjusting their knowledge to suit issues abd challenges they might face in the course of their employment.

Career Transitioning Challenges
Skorikov (2007) defined career transitioning challenge as inability of an employee to cope with unpredictable adjustments prompted by changes in work conditions. Skorikov (2007) identified different dimensions of career transitioning challenge. These were inability of an employee to feel secure about his career (concern), not knowing what career to pursue (control), not looking for options (curiosity) and employees lacking self-efficacy to undertake activities needed to achieve career goals (confidence). Savickas (2009) explained that career transitioning challenge characteristics include lack of readiness of an employee to cope with unpredictable tasks, and participate in unpredictable adjustments prompted by changes in work conditions. This researcher's definition posits that irrespective of any challenge or work situation met by an employee, he or she should be able to adopt his or her skill to tackle it; hence a career transitioning challenge occurs if an employee cannot do this. This study conceptualize career transitioning challenges to be challenges employees to be problems inhibiting employees from utilizing their knowledge to meet the challenges they might face in the course of their career.

Career Advancement Challenges
Career Adaptive Challenges as a construct has attracted diverse opinions from scholars such as Baer, Luft, and Simmons (2008); Linge, Rensburg, and Sikaleh (2010); Agba, Ogaboh, Nkpeoyen, and Ushie (2010); Adamu, Daddie, and Ebikeseye (2017); Adewoye,Abioro and Adele (2017). According to Greenhaus (2003) career advancement challenge is non-availability of processes through which employees could gather relevant information about values, skills, strengths and weaknesses,identify a career goal and engage in career strategies that can bring about increase in the possibility that their set career goals will be achieved. However, Baer, Flexer, Luft, and Simmons (2008) differred slightly by explaining that career advancement challenge occurred as lack of a lifetime process that encompasses the growth and change processes that could persist throughout an employee working life. This difference could be due to choice of sectors worked upon by the various researchers.

Job Hazard Challenges
Job hazard challenge as a construct has also attracted different definitions from scholars such as Bahn (2012); Rajan (2014). World Health Organisation (2009), defined hazards as dangerous phenomenon, substances, human activity or conditions that can cause damages

and loss of earning power to employees. Bahn (2012), had a similar view by explaining that hazards constitutes harmful workplace conditions in form of exposures to equipment, dusts and chemicals that could constitute harm to employees. Giving insights to characteristics of job hazards challenges, Bahn (2012), argued that workplace hazards are in several dimensions such as mechanical hazards in form of job accidents and equipments related injuries; job instruments accidents in form of cuts; physical hazards in form of harmful noises; biological hazards in form of bacterial attacks; body organs damage and psycho-social hazards such as job related stress, emotional abuses and sexual harassment. Consequently, the study defined job hazard as dangers employees are exposed to in the course of performing their tasks.

Career Challenges and Task Efficacy
Teo, Low, and Kim (2016) study found that employee task efficacy occurred when there is an increase in employee's level of efforts and performance. The study reported that employee task efficacy or effectiveness would positively improve organisation effectiveness. Ismaili, Krasnigi and Qosja (2015) study agreed that lack of promotion (an aspect of steer advancement) make employees unsatisfied at their work. Amir and Mahmud (2014) study, found a significant correlation between employees' opportunity for mentoring and stress, which affect employee task efficacy. Van-der Horst and Klehe (2019) study, found that career adaptability boosts career confidence which in turn enhance employee task efficiency.

Mona, Chimbari, and Hungoro (2019) study found that occupational hazards if not attended to have counterproductive effects on employee performance. Saldaria (2012) examined the impact of occupational hazards on employee health and safety. The study discoverd that certain professions such as construction faced a higher health hazards risks. Rajan (2014) study reported prevalence of health hazards such as back pain, injury from share instruments and regular exposures to dental machines. Rajan (2014) study found that health workers are exposed to health hazard due to prolonged standing, neck bending and eventual contraction of ailments due to administration of medical treatments on patients.

Social Cognitive Theory
This study would hing on Social Cognitive Theory. Social Cognitive theory evolved from Bandura Social cognitive theory and it was developed by Herbert Handura in 1960. The model of this theory expands by adding the inputs of employee role and task efficacy on compensation outcome expectation. The theory subscribed to a model that asserts that employees are human being with peculiar initiative and motivational determinants. The theory argued that human behaviour is regulated by a perception of self-sufficiency. This theory also dealt with learning perspectives of employees. The social cognitive theory holds that an individual knowledge acquisition is directly related to how much he or she can observe other employee practical application of skills they have acquired through job experience. Social cognitive theory is therefore an extension of social learning theory. Social cognitive theory hinged on learning by imitation which is an employee action of matching an act to an appropriate cue. The theory stated that behaviour is imitated based on expected consequences.

However, Wood and Bandura (1989) criticized the theory by positing that if employees are emotionally deprived it might result in to lack of confidence in their capabilities, and that such individuals would demonstrate self-doubt when confronted with challenges. One of the main criticisms of social cognitive theory is that it is not a unified theory; this is because an aspect of the theory is not corrected. However, the supporters proposed the theory social cognitive theory provided opportunities for employee's self-efficiency. Weighing the position of the critics with supporters of the theory, it can be deduced that social cognitive aids employee's performance by taking into cognizance of employees' expectations, experiences on their behaviours. This theory is relevant to this study because it prepares employees' capacity to tackle possible challenges that might occur in the course of their employment. It also explained the interactions between innovative aspects of work behavior and employee performance. The theory proves that employees who believed in their own capabilities usually assert efforts to overcome any challenge their organisations might be facing. The theory equips employees not to see challenges as obstacles but stepping-stones to demonstrate innovative capability.

Methodology
Research Design
The design adopted for this study was survey research design. Cross sectional survey research design was chosen because it is generally assumed that the results of its application offer an explanation into what is important about a study population.

Population
The study target population was 3,656 respondents (Lagos State University Teaching Hospital (LASUTH) Registry 2022; Selected Hospitals Registries 2022) made up of doctors (General Practitioners and 41 Consultants specialists such as the pediatricians, orthopedic-surgeons, cardiologists, dermatologists, physicians, nephrologists, neurosurgeons, psychiatrists, ENT-Surgeons; heart-surgeons; ENT-Specialists;hematologists;surgeons; morbid-anatomists and oncologists) nurses, vital health employees such as medical laboratory scientists; pharmacists and vital supportive junior employees such as the hospital record keepers and nursing assistants from Lagos State University Teaching Hospital (LASUTH), Ikeja and ten selected private hospitals in the five divisions of Lagos State; which are Lagos (Island and Mainland), Epe,Ikorodu, Badagry and Ikeja.

Sample Size and Sampling Technique
Cochran formula for calculating sample size for finite population was adopted by this study to determine its sample size. Total Sample Size was 449.

Sampling Technique
The researcher applied random and stratified sampling techniques for the study.

Method of Data Collection
The study utilized primary sources of data. Primary data was adopted because it could be tailored for specific needs of the research study, it is very original, and has a higher level of

accuracy hence, its interpretation is better;and therefore addressed the targeted reasons for undertaking a research (Ajayi,2017).

Research Instrument
The data-gathering instrument employed for this study was adapted structured questionnaire based on Likert Scale.

Validity of Research Instrument
For the construct validity, the questionnaire was divided into variables and tested statistically using confirmatory factor analysis (CFA). Kaiser Meyer Olkin and Composite Reliability ranged from 0.612 to 0.988.

Reliability of Research Instrument
Composite reliability of the instrument (adapted questions) to be used for the study and it is based on its degrees of consistency, reliability and relevance with the appropriate measure (composite reliability ranged between 0.813 to 0.988, while the average variance extracted ranged between 0.641 to 0.897). This was done through the following steps: Firstly, the questionnaire were formulated, secondly the opinions of the researcher supervisors and statisticians were sought, and thirdly the questionnaire were subjected to reliability test.

Method of Data Analysis
This study adopted descriptive and inferential statistics to analyse this study. The descriptive statistical analysis involving the mean, the simple percentages and standard deviation respectively were used to analyze the questionnaire demographic items using SPSS package.

Inferential statistics were done using multiple linear regression and hierrachical multiple regression analysis. Multiple linear regression analysis was used to determine the strength of effect between the dependent variables and indepedent variables since the research was based on correlation. Linear Regression Analysis was used because the study was linear in nature, linear regression is therefore, useful for estimating the extent of effect between a dependent variable (outcome) on one or more independent variables (predictor). Since the researcher assumes that the equation should be statistically significant at 95% confidence level, the P-values of the coefficient generated in the course of application of the hierrachical regression analysis must be less than 0.005.

Table 1: Summary of multiple Regression analysis for effects of Career Challenges on Task Efficacy of Health sector Employees in selected private and Teaching Hospitals in Lagos State (n = 349)

Model	B	Sig.	T	F (5, 343)	ANOVA (p-value)	R^2	Adjusted R^2
(Constant)	11.027	0.000	7.932				
Career Advancement Challenges	0.182	.003	2.971	11.073	.000	0.373	0.126
Career Transition Challenges	0.232	.007	3.319				
Adaptive Learning Challenge	-0.007	.911	-.101				
Job Hazard Challenges	-0.024	.576	-.560				
Predictors: (Constant) Job Hazard Challenges, Career Advancement Challenges, Career Challenges, Career Transition Challenges, Adaptive Learning Challenge							
Dependent Variable: Task Efficacy							

Source: Field Survey Results (2023)

Table 1 revealed the result of the multiple regression analysis which examined the effect of career challenges sub-variables (job hazard challenges, career advancement challenges, career challenges, career transition challenges, adaptive learning challenge) on task efficacy of health sector employees in selected private and teaching hospitals in Lagos State. The results showed that adaptive learning challenge (β = -0.007 t =-911, p = -0.101) had negative lnsignificant effect on task efficacy, as well as job hazard challenges had no effect on task efficacy (β = -0.024 ,t = -0.560, p = 0.576) of health sector employees in selected private and teaching hospitals in Lagos State.

The results of the analysis revealed that on the contrary, the results revealed that only two of the sub-variables of the career challenges (career advancement challenges and career transition challenges) had significant effect on task efficacy of health sector employees in selected private and teaching hospitals in Lagos State. This implied that of all the career challenges sub-variables in the regression model, career advancement challenges and career transition challenges are statistically significant thereby had a unique predictive effect on the task efficacy of health sector employees.

Therefore, career advancement challenges and career transition challenges are fundamental career challenges that influence task efficacy of health sector employees in selected private and teaching hospitals in Lagos State. The Adjusted R is 0.373 indicated that 37.3% of the variance in task efficacy of health sector employees is explained by the independent variables job hazard challenges, career advancement challenges, career challenges, career transition challenges, adaptive learning challenge while the remaining 62.7% could be attributed to other factors not captured by this model. Also the F-statistics (df=5.343) is 11.073 at p = 0.000

(significant) indicated that the overall model is significant in predicting the effect of career challenges on task efficacy.

This meant that career challenges sub-variables (job hazard challenges, career advancement challenges, career challenges, career transition challenges, adaptive learning challenge) account for a significant amount of variance in task efficacy of health sector employees. The established multiple regression model (prescriptive model) is expressed as thus:

$$TE = 11.027 + 0.182\,CAC + 0.232\,CTC - 0.007\,ALC - 0.0024\,JHC = eqn1a$$
(Predictive model)
CAC = Career Advancement Challenges
CTC = Career Transition Challenges
ALC = Adaptive Learning Challenge
JHC = Job Hazard Challenges

With regards to the variables that are statistically significant on Table 1, the hypothesized equation (predictive model) becomes:
$$TE = 11.027 + 0.182\,CAC = \ldots 11.209 \; eqn\,1b$$
$$TE = 11.027 + 0.232\,CTC = \ldots 11.259 \; eqn\,1c$$

Where:
TE= Task Efficacy
CAC = Career Advancement Challenges
CTC = Career Transition Challenges

The predictive model displayed that taking all the factors into account, that is, career advancement challenges and career transition challenges representing the independent variables, then task efficacy of health sector employees will be 11.209 and 11.259 respectively. The findings of the multiple regression analysis indicated that taking all the other independent variables at zero, then a unit change in career advancement challenges would result to 11.209 % increase in task efficacy of health sector employees and the same unit change in career transition challenges increases task efficacy of health sector employees by 11.259 (11.2595%). The adjusted R squared explained the variances in the performance of health sector employees performance in selected teaching and private hospitals in Lagos-State. This inferred that career transitioning challenges as well as career advancement challenges had a great influence on task efficacy of health sector employees in selected private and teaching hospitals in Lagos State followed by career transition challenges.

This result therefore revealed that if the inhibiting factors against employees efforts to advance their careers were removed or worked upon, then this would increase the task efficacy and subsequently improve performance of health sector employees in selected private and teaching hospitals in Lagos State. Likewise, the result also showed that when employees are able to transit previous skills aquired into new employment challenges by removing the inhibiting factors such lack of adequate facilities, will also increase the task efficacy of health

sector employees. The result showed an overall statistical significance with $p<0.05$. The result suggested that management of selected private and teaching hospitals in Lagos State should reduce career advancement challenges and career transition challenges in order to increase task efficacy of health sector employees. Therefore, the null hypothesis (H_{02}) which expressed that there is no significant effect of career challenges sub-variables on task efficacy of health sector employees in selected private and teaching hospitals in Lagos State was rejected.

Discussion of Findings
The results of the multiple regression on the effect of career challenges sub-variables established that career challenges has a significant effect on the performance aspect of task efficacy of health sector employees. Conceptually, Evans (2020) explained career challenges as problems employees encountered in the course of their job role that create job dissatisfaction. Empirically, this study findings are also in agreement with the past research findings on that confirmed that career challenges influence employees task efficacy in other sectors. Teo, Low, and Kim (2016) study confirmed that career challenges sub variables adopted for this study negatively affect employee task efficacy. Usman, Akbar and Ramzar (2016) study also found job hazards challenges negatively affected employee task efficacy. Omosiowho (2014) study confirmed that prevalence of job hazards challenges negatively affect employee performance.

However, the study findings debunked significantly Murshid, Harlim and Osman (2014) study that reported that it was not the constructs of adaptive learning challenge, career transitioning challenge, career advancement challenge and job hazards challenges that act as hindrances to employee task efficacy, but the prevalence of other aspects of career challenges such as job satisfaction. This study proved that at least in the medical sector, career challenges sub variables used in this study significantly affect employee performance. Therefore, career challenges should be professionally solved to enable employees improve their task efficacy, thereby attaining higher employee performance. Several approaches towards effect of reducing career challenges on task efficacy had been proffered by earlier researchers on the construct. Ismail, Krasnigi, and Qusoja (2015) proffered promotion, Rajan (2014) suggested elimination of job hazards; Annelles and Vianen (2012) suggested elimination of career adaptation retardation to improve task efficacy.

Theoretically, findings of this study added credibility to the theoretical assumptions of Social cognitive theory that underpinned these study findings. The assumption of the theory is that employees set goals for themselves and would work to achieve these goals on the basis of an expectation outcome. The theory further proved that employees are ready to demonstrate efficacy if the sector he or she is working for provides opportunity for the manifestation of the employee capability. Hence the interactions between career challenges and task efficacy aspect of employee performance are explained within the framework of role theory perspectives. Therefore, given the support found in conceptual, empirical, and theoretical submissions in previous studies, the study results posits that career challenges have significant effect on task efficacy of employee performance of selected teaching and private hospitals in Lagos State, Nigeria.

Suggestions

From the study model on hypothesis two, it was proved that career advancement challenges and career transition challenges also had a significant effect on the task efficacy of health sector employees.The results suggested that if inhabiting factors such as lack of basic infrastructures and acute shortage of supportive highly skilled specialists militating against health sector employee's task efficacy are removed, their task efficacy would significantly improve. Based on this, the researcher suggests that stakeholders in the health sector should create policies that would facilitate the removal of these inhibiting factors. This includes creation of a financial pool that would increase availability of funds for running the health sector. To get this done, the researcher suggests the creation of health security trust funds to be sourced from compulsory "Health Tax levies" for all taxable adults in Lagos State. The tax would be similar to Value Added Tax, and would be payable by consumers and companies producing, retailing and marketing certain dangerous items like alcoholic beverages like Dry Gin, beer, as well as cigarretes.

The Lagos State Government can also launch a Health Appeal Fund and appeal to well meaningful Nigerians to donate funds to it. This fund can be used to augment health sector budget provisions, and if done, the health sector would have adequate financial pool that would be used to augment the health budget. Furthermore, to encourage the transition of career for newly qualified doctors, nurses, laboratory scientists, Lagos State government can recruit more specialist's consultants especially in areas of specific shortages like hepatologists. neuronlogy. cardiology.morbid-anatomy, remunerate them very well from the financial pool and attach newly qualified doctors to them as residents trainees.

References

Ajayi, A. E. (2019*). Prospects of medical practices in Lagos State. An unpublished M.B.A class presentation*, University of Baltimore, Maryland State, The United States of America.

Asikhia, A., Osinowo, O., & Kassim, S. (2021). Integrating just in time theory, resource based view theory, and rational choice theory in enhancing managements' efficiency, *South Asian Research Journal of Business and Management*, *3*(1), 14-22.

Asikhia, O. O., (2015). *Lecture notes on strategic management and entrepreneurship*, Babcock University, Ilishan.

Barsulai, S. C., Makopondo, R. O., & Fridaya, E. V. (2019). The effect of organisational citizenship behaviour on employee performance in stipulated hotels in Kenya, *European Journal of Hospitality and Tourism Research, 7*(3)16-24.

Carter, R. W., Neeshat, P. M., Badham, R. J. Parker, S. K. (2018). The effect of employee engagement and self-efficacy on Job performance in conditional field study, *International Journal of Business and Economic Policy, 3*(1), 56-71.

Egbedeyi, T. F. (2020). *Conference paper on Emerging issues in medical practices Nigeria* Paper presented at Lagos State University Teaching Hospital.

International Centre for Investigative Reporting. (1CIR 2020). w.w.w.ICIR.org.com. *International Labour Organisation (ILO)*. (2020). https://www.ilo.org/global/lang--en/index.htm.Retrieved 03/08/21.

Ismajil, I. V., Krasnigi, F. O. & Qosja, T. C. (2015). Career development and advancement of human resources – how may influence the performance, *Issues in Business Administration Management and Economics, 3*(2), 17-23.

Marshid, M. O., Halim, M. S. & Osman, K. A. (2014). Marketing mix strategy and physician's satisfaction: A mediating effect of perceived value in the pharmaceutical industry in Yemen, *Journal of Humanities and SocialSciences, 6*(5),73-78.

Olenibe, O. A. (2018). Industrial action by health workers in Nigeria: An enquiry into causes, consequence and control, *Journal of human resources for health, 14*(46), 42-58.

Usman, R. M., Akbar, H. G. & Ramzar, Y. S. (2015). The impact of goal setting on employee effectiveness to improve organization effectiveness: Empirical study of a high-tech company in Singapore, *Information Systems and Economics Journal, 8*(6), 18-36.