

# Nursing in the United Arab Emirates: Current challenges and opportunities

The current United Arab Emirate's (UAE) strategic vision outlines an ambitious plan for a world-class healthcare system (UAE Government, 2018). The nursing profession holds a key position within this strategy and is considered a key contributor in its development. Given nursing's prominent position as both a leader in healthcare delivery and a key driver for healthcare reform in the UAE, it is important to outline the potential contribution of the profession and the challenges it faces in the context of this reform. This editorial aim to outline the status of the nursing profession in the UAE. It is hoped that this critical analysis will provide some insight into the requirements for improving and upgrading the profession, and the vision required to sustain nursing's professional development into the future. This will inform international peers and also motivate dialogue, debate, and support for the challenges ahead.

## **The UAE: country and culture**

The UAE is located at the tip of the Arabian Peninsula and was established in 1971 as a federation of seven Emirates. It shares maritime borders with Qatar (west) and the Arabian Gulf (north), and land borders with Saudi Arabia (south and west) and Oman (east). The UAE currently has a solid economy and a high standard of living (UAE Government, 2018) with a population of around 9.3 million people (Federal Competitiveness and Statistics Authority - UAE, 2017). UAE citizens account for less than 15% of the population, with the remainder being from various nationalities (Global Media Insight, 2020).

UAE society remains relatively conservative and committed to Arabic- and Islamic-rooted cultures and traditions. Islamic beliefs traditionally emphasize complementary roles for men (mainly outside the home) and women (mainly inside the home) (Al Kharouf & Weir, 2008). Patriarchy is a sociocultural and institutional construct that influences women's employment in the Arab world (Al Kharouf & Weir, 2008; Moghadam, 2007); therefore, women may be disadvantaged in assuming leadership positions or perceived as having less authority in such roles (Doering & Thébaud, 2017;

Ridgeway, 2011; World Economic Forum, 2017). Gender equality is a key goal in the UAE vision 2021; this still affects many aspects of life despite the reducing gender separation in the UAE (Government of UAE, 2017; World Economic Forum, 2017). Traditionally, men dominated the labor market and women's roles were slightly regressed. However, the role of women in the labor market is now fully supported and encouraged by the government, particularly in relation to women assuming leadership positions (Government of UAE, 2017). An example of this development is that 50% of the National Federal Council is women and there are nine women cabinet ministers (Government of UAE, n.d.).

### **The UAE healthcare system and nursing**

Before the seven Emirates were united and the federal UAE was established, the healthcare systems in the Emirates were largely based on traditional healing. There were small facilities that offered basic healthcare services in major areas (e.g., Sharjah, Dubai, Fujairah, Abu Dhabi) mainly sponsored by the Kuwait government. Nursing was amorphous and unregulated, comprising some locally trained nurses and many expatriate nurses from the Indian continent and other Arab countries (Emirates Nursing Association, n.d.). The UAE's establishment in 1971 was paralleled by that of governmental structures, including the Ministry of Health (now called the Ministry of Health and Prevention [MOHAP]), which developed healthcare and nursing services in the UAE. A significant milestone was the establishment of the first nursing institute in Abu Dhabi (late 1970s/early 1980s), followed by nursing institutes in Sharjah, Ras Al Khaimah, and Fujairah. Another significant development was the Federal Department of Nursing (FDON), which was established in 1992 to manage, regulate, and develop UAE nursing services (El-Haddad, 2006; Federal Department of Nursing - MOH - UAE, 2012). The role of the FDON included: administration of the MOH nursing registration exams, maintaining a nursing registry, improving nursing care and services, improving the public image of nursing, supporting nurses' professional development, improving/retaining Emirati nurses, planning and allocating the nursing workforce, and supporting nursing quality programs to comply with international quality standards.

Given the UAE's federal system, other local healthcare regulatory bodies were also established. For example, the Dubai Health Authority (DHA) (Dubai Health Authority (DHA), n.d.) and the Health Authority of Abu Dhabi (recently renamed the Department of Health – Abu Dhabi) were established in 2007 (UAE Government, n.d.). These regulatory authorities established their own standards and regulations for healthcare, including for the nursing profession. This multi-regulatory system for healthcare (including nursing) resulted in the inception of the UAE Nursing and Midwifery Council (UAE-NMC) in 2009, with the overarching aims of unifying and coordinating efforts to regulate the nursing/midwifery professions, promote and advance nursing/midwifery services, and protect and promote public health and safety. The UAE-NMC also aims to achieve agreement on priorities and activities; set standards for practice, registration and licensure, and education; and prioritize the national nursing and midwifery research agenda (UAE Nursing and Midwifery Council, n.d.). Despite the presence of a clear professionalizing agenda, the nursing profession in the UAE faces ongoing challenges.

### **Nursing leadership and management challenges**

Discussions in the global nursing education arena have identified key educational elements that may contribute to advancing the nursing profession. These include the value of specialization for the quality of nursing services (Jankowski, 2010; Ryskina et al., 2019), the need to strengthen multidisciplinary education to match the clinical practice reality (McClelland & Kleinke, 2013), competency-based education (American Association of Colleges of Nursing, 2017), the global nature of nursing education (i.e., producing a competent nurses that can practice globally) (Mckinnon et al., 2019; Mcnelis & Mckinnon, 2019; Palmer & Miles, 2019), and the role of technology in education (Broadbent, 2017; Thomas et al., 2017). UAE-based discussions regarding these aspects are still in the early stages, and they remain to be achieved in nursing education (Al-Yateem et al., 2019; Brownie et al., 2015, 2017; El-Haddad, 2006; Gomez, 2010; Johnson, 1992; Kronfol & Athique, 1986; McCreddie et al., 2018; Nematollahi & Isaac, 2012; Torres-Alzate, 2019). This suggests the roadmap for the UAE nursing education system needs to be strengthened. There is also an issue relating to fulfilling educational needs for a complex learner population. The UAE nursing workforce is diverse,

with nurses from different cultural, linguistic, religious, economic, clinical, and educational backgrounds. In addition, many expatriate nurses are diploma prepared, as are the majority of nurses graduating in the UAE, who until 2011 were mainly educated in Institutes of Nursing that prepared diploma-level nurses. The UAE education and healthcare systems are trying to meet the educational needs of the diverse learner population. A priority is upgrading diploma-level nurses to bachelor's degree level, which is the minimum requirement for a professional nurse set by the International Council of Nurses. Measures are also in place for ongoing continuous professional development courses that bridge the gap between overseas-trained nurses' education and clinical experiences and the needs of the UAE healthcare system and patient population.

Aside from the challenges arising from the nature of the diploma-prepared, heterogeneous, transient, and largely expatriate nursing workforce, nursing education in the UAE faces other intrinsic challenges. Key problems are the slow development of undergraduate and postgraduate nursing programs in higher education institutes, and the slow adoption of global advances in nursing and clinical education within these institutions. For example, mainstream nursing education moved from diploma preparation to bachelor's degree-level preparation in 2011. In addition, the first university-based Bachelor of Nursing (BSN) programs started in 1998, initially focusing on registered nurse (RN) to BSN bridging programs, and later directly admitting students to undergraduate nursing programs. These programs initially struggled to sustain admissions, admitting and graduating only around 20 students by 2010 (Swan, 2010). A major contributor to this low admission rate was the poor local image of nursing and hesitation to regard nursing as an education and career option. However, there is growing evidence that this perception is changing (Brownie et al., 2017; El-Haddad, 2006).

However, nursing education in the UAE has progressed since 2010, and there are currently five main UAE nursing education providers. Admission to these programs is steadily improving, but remains below the desired level. Admission of local Emirati nursing students (although improving) also remains low, which triggered national campaigns to attract more Emirati nursing students. Some UAE nursing education providers are vocational education institutes that focus on the development

of the required technical skills among their graduates; therefore, they may overlook independent study, decision-making, and critical thinking skills, which are important elements for advanced nursing practice and professional life. Other key challenges facing these institutions are the limited number of quality clinical training sites and appropriately qualified nursing faculty, especially for postgraduate programs that offer advanced specialized practice training. In addition, theoretical and clinical training currently lacks nursing mentorship and is not rooted in nursing.

Development of postgraduate nursing programs to match the growing needs of the population and national and international standards for providing quality healthcare services is also slow. For example, currently, only one UAE institution offers specialized Masters in Nursing programs (adult medical surgical nursing, pediatric nursing, psychiatric and mental health nursing, and community health nursing). These programs are also limited by inadequate specialized clinical settings to support students and a shortage of specialized faculty. The resulting thesis projects are therefore general and lack clinical expertise. The UAE has other generic master's-level nursing or health education and management programs that many nurses choose in the absence of clinically-focused programs, which attract Emirati graduates that wish to assume leadership and educational roles.

As specialization supported by higher degrees is becoming the norm across the world, the UAE also needs to develop a strategic approach to up-skilling the profession. Specialization in nursing improves the quality of nursing care and healthcare in general (Jankowski, 2010; Ryskina et al., 2019). Nursing specialists bring a wealth of knowledge and expertise to patient care and can improve patient care outcomes. Improved technologies, medications, and treatments have led to overall improved population health. However, these advances have also complicated the necessary processes to ensure appropriate, timely, and effective implementation of care. In addition to gaps in educational provision and lack of specialization, there are also challenges with varying regulatory bodies and the growth of professional organizations.

Specialized nursing programs are limited in the UAE, with few clinical training sites ready to provide the required advanced specialized nursing skills. Clinical nurse specialist and advanced nurse practice roles are almost absent, and no legislative and professional frameworks exist to regulate and

progress these roles. Only one document developed and published collaboratively by major UAE health authorities describes advanced nursing roles (the Professional Qualification Requirement paper) (Ministry of Health and Prevention et al., 2017). This document outlines some advanced nursing roles (e.g., nurse practitioners and specialty nurses), but has not yet been fully implemented in the UAE.

In summary, this editorial provides a snapshot of the current state of nursing in the UAE, and highlighted key developments along with challenges facing the profession that remain to be addressed. However, continued efforts from the profession coupled with support from the government and other stakeholders mean that the profession is well-placed to respond to these challenges and move forward to achieve the UAE vision 2021. We hope that this paper will seed brainstorming activities and subsequent practical steps to address current challenges, and consequently improve the nursing profession in the UAE.

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