

Challenges facing overseas nurses practicing in KSA

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Editorial

Introduction: KSA being the largest country in the GCC is experiencing rapid growth and development in the healthcare sector. The increased demand for qualified nursing workforce has led to the recruitment of Overseas Qualified Nurses (OQN) to match the healthcare sector demand and contribute to exchange of knowledge and experiences with local nurses. However, differences in culture, customs and language are expected to have an impact on the effectiveness and quality of life of OQN in KSA. Nurses, midwives and other health personnel constitute more than 50% of the labour force (Al-Darazi 2008). Nurses are the nucleus of the health care system. Without the nucleus, the cell will not survive (Abu AlRub 2007). They represent a powerful force for bringing about the changes to meet the needs of health for all. Nurses play a central role in delivering health care. Nurses advocate for health promotion, educate patients and the public on the prevention of illness and injury, provide care and assist in cure, participate in rehabilitation, and provide support. No other health care professional has such a broad and far-reaching role (Oulton 2006). Despite being the largest provider group, health care organizations experience a severe shortage of qualified registered nurses. This shortage has been attributed to a number of factors including increased demand for health care due to advances in medical technology, increased population growth, increased life expectancy and increased numbers of chronically and critically ill patients (Abu-Zinadah 2005). Additionally, nurses' roles have expanded significantly to include a number of tasks previously performed by a physicians (Coomber et al., 2007).

Aim: To explore the factors associated with professional and personal challenges facing the OQNs in KSA for ultimately formulating a set of recommendations to be employed first in ministry of health hospitals than in private hospitals in KSA to effectively engage the OQN in their working environment to ensure successful communication, productive work and improved quality of life. In a study carried out by Gazzaz L (2009) about Saudi Nurses' Perceptions of Nursing as an Occupational Choice, she found that most participants (interns, staff nurses and senior nurses) cited inservice education and on-job training as factors influencing their decision to stay or leave a particular organization. They perceived opportunities for continuous education and advanced training as important aspects of their motivation, satisfaction and retention. For them, on-job education and training are opportunities which enhance their professional knowledge and practices. However, on-the-job services seemed to vary considerably across the different hospitals and sectors. Compared to their counterparts at the other-government sector, staff nurses and senior nurses working at the government hospitals sounded more frustrated and

disappointed for having less opportunities for attending such services.

Methods: Prospective, qualitative, phenomenological study. We approached 23 OQNs. Our research tool was a qualitative interview assessing the contextual practice, accommodating to the Saudi culture, communication barriers and cultural differences. Thematic analyses were used as the data analysis technique. Examining the impact of support systems such as organizational characteristics and nursing policies continue to represent areas which need to be further explored by future Saudi research. Types of support systems ranged from encouragement and motivation offered by the family to appreciation, recognition and supportive policies practiced by the employing institutions. Sources of support were found to reduce stress and burnout and enhance satisfaction and retention (Shelton 2003, Ward et al. 2003, Mabel 2002).

Results: Two significant issues that affected the day-to-day professional practice of these nurses. The first was that the overall Saudi Islamic Culture was pervasive; and the second was that communication obstacles due to language barriers often presented insurmountable difficulties in their professional practice. The public image of the nurse appears to be negative in countries where strong cultural traditions severely restrict the participation of women in paid occupations outside the home. As a result, nursing functions in these countries are performed by women of the lowest social class" (Pizurki 1987). Analysis of interviews with the female participants suggested that they were experiencing social pressure associated with working in socially unacceptable mixed-gender settings and having to cover long hours of unfavorable night and weekend duties (Gazzaz L 2009).

Conclusion: It appears that the language barrier is the pressing issue to be addressed by Arabic courses offered to OQNs in all hospitals. The areas of future research identified from the study include, exploring the views of hospital administrators to the challenges faced by OQNs, as well as the impact of these nurses on the quality of patient care. This links direct to the important area of strategies to increase the numbers of local Saudi nurses. The media should engage in helping to promote a positive image of the nursing profession. Media has to play a role in educating society about the importance of national nurses while professionals should do more research on this important aspect to have more objective data on the public's perception of nurses. Health and nursing long term plans are needed to recruit more local nurses and to retain the current expatriate workforce. In fact, Saudi nurses are more eligible to work with local patients since they know the language, culture and customs and are well versed in the common socioeconomic problems (Abu-Zinadah 2006, Alamri et al 2006)

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