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**PROGRESS REPORT ON**  
**IMPROVING THE QUALITY OF NURSING AND MIDWIFERY  
SERVICES IN THE EASTERN MEDITERRANEAN REGION**

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## 1. INTRODUCTION

World Health Assembly resolution WHA 49.1 (1996) on strengthening nursing and midwifery in support of strategies for health for all sought ways of addressing the following pressing issues:

- the emergence of new diseases and the re-emergence of old diseases
- the necessity of effectively using health care personnel, in view of rising costs, and mindful of the cost-effectiveness of good nursing/midwifery practice
- recognizing the potential of nursing/midwifery in making a major difference in the quality and effectiveness of health care services
- the need for a comprehensive country-specific approach to nursing/midwifery service development as an integral part of health development in order to maximize the contribution of nurses and midwives to achievements in the field of health
- the need for active involvement of nurses and midwives at all levels of the health care system, together with the recipients of care, policy makers and other partners.

The Regional Committee for the Eastern Mediterranean in its Forty-fifth Session (1998) adopted a regional strategy on nursing and midwifery and resolution EM/RC45/R.12 on improving the quality of nursing and midwifery in the Eastern Mediterranean Region. The resolution urged Member States to:

- continue their efforts to develop national action plans for the implementation of the regional strategy
- develop national standards for basic and graduate nursing education
- use the guidelines on future directions for nursing education in developing curricula
- encourage and support the development of programmes for nursing research to ensure that the practice of nursing is founded on scientific findings.

This report provides an update on the progress made in improving the quality of nursing and midwifery services in the Eastern Mediterranean Region, particularly in relation to the above mandates and with reference to the following:

- human resources development
- stewardship
- provision of quality nursing and midwifery services.

The regional strategy for nursing and midwifery development, which was adopted by the Regional Committee in 1998, and resolution EM/RC45/R.12 on improving the quality of nursing and midwifery services continue to be the guiding framework for developing nursing and midwifery services in the Region. They also map the future strategic directions for policy-makers and nursing leaders for nursing development at the national level.

## **2. HUMAN RESOURCES DEVELOPMENT**

The Region continues to invest in the development of nursing and midwifery resources as a vital component of the health system and health services development. Since 1996 a process of educational reform has been initiated in the countries of the Region both at the basic and post-basic levels. As in many countries of the world there are nursing shortages in many countries of the Region.

### **2.1 Educational reform at the basic educational level**

As in previous years, collaboration with countries in taking corrective measures to improve basic nursing and midwifery education and reorienting curricula towards primary health care continued.

Nursing and midwifery education was strengthened in Afghanistan, Egypt, Iraq, Qatar, Tunisia, Sudan, Lebanon, Pakistan and Syrian Arab Republic through provision of technical support, training of teachers, furnishing of supplies and equipment, and upgrading of teaching learning materials.

A major Regional Office publication, entitled *Nursing education in the Eastern Mediterranean Region*, was published in 1998, and this helped facilitate the process of nursing education reform at the basic and post-basic specialist levels. The publication comprised three books. The first, *Guidelines on future directions*, delineates the regional standards for technical and professional nursing education, as well as regional priority areas for nursing specialization. The other two books, *Prototype technical nursing curriculum* and *Prototype baccalaureate nursing curriculum*, provide core curricula for technical nursing education and university nursing education, respectively. These core curricula are intended to provide the minimal educational requirements for nursing education in countries of the Region. Initially some countries (Bahrain, Egypt, Libyan Arab Jamahiriya, Palestine, Syrian Arab Republic and United Arab Emirates), with technical support provided by the Regional Office, initiated a process of using these guidelines to strengthen and update the preparation of nurses.

Other countries, both in the Eastern Mediterranean Region and in other regions, have started using these guidelines. These guidelines, which were presented to the Regional Committee in 1998, have been shared widely: they were introduced to the third conference of the technical nursing committee of the Gulf Cooperation Council, which was held in Bahrain in 1998, as well as the meeting of Regional Nursing Advisers held in Geneva in 1999 in conjunction with the meeting of the steering committee of the Global Advisory Group on

Nursing and Midwifery. The guidelines have been very well received and are regarded as an important tool for initiating change in nursing education. Qatar, for example, with technical assistance from an experienced consultant nurse educator has upgraded the entrance requirements of the nursing school, changed the curriculum and introduced a process of educational reform in line with WHO guidelines and the regional standards for technical nursing education. In Pakistan, a national consultant undertook a detailed review of basic nursing education in preparation for initiating curriculum change.

To enhance the process of educational reform, support was provided by the Regional Office to countries to strengthen the human and material resources of the educational institutions. This included national training activities to promote capacity-building for teachers, and provision of nursing and midwifery literature, audiovisual aids and equipment. In addition, fellowships were awarded to teaching staff to increase their capabilities in educational methodology; community-oriented nursing curricula and clinical nursing subjects. In Afghanistan, women are now allowed to attend a three-year midwifery programme in Kandahar, and a female nursing school in Mirwais Hospital in Kandahar was officially opened in 2000. WHO gave technical assistance in the revision of the curriculum and provided teaching aids and materials to this school and to one in Herat, which has also been functioning.

All countries, without exception, have taken initiatives to improve basic nursing education through increasing the number of programmes, reorienting curricula towards the primary health care approach, training teachers and improving clinical skills, laboratory resources and library facilities. It is highly significant that most countries are able to attract students to nursing and midwifery programmes and that the demand on nursing schools is increasing. There is a definitive positive change in this respect.

## **2.2 Development of post-basic education**

Interest in building up national capacities of qualified specialized nurses in order to meet the requirements of the health services continued in many countries. Jordan University for Science and Technology, Lebanese University, King Saud University in Saudi Arabia and University of Khartoum in Sudan have initiated or continued programmes leading to masters degrees in nursing. The Regional Office assisted Khartoum University in developing and implementing programmes in medical–surgical nursing, maternal and child health nursing and community health nursing.

In Oman, three post-basic diploma nursing programmes in critical care with emphasis on nephrology, neonatology and paediatrics, and adult intensive care were developed with WHO technical support.

Pakistan has developed and is implementing a variety of post-basic nursing programmes in clinical specialties, such as intensive-care nursing, paediatric nursing, nephrology nursing and cancer nursing, with the collaboration of the Department for International Development of the United Kingdom. Recent years have witnessed expanding continuing education activities in order to improve the performance of nursing personnel. These activities are

undertaken by almost all countries, however, they are carried out on an ad hoc basis and are not normally linked to learning needs of the various categories of nurses filling the different positions in the health system.

It is important to note that there is an increased need in countries of the Region for preparation of nurses at the specialist level. Also, the demand for continuing education is much greater than that offered in almost every country.

Fellowships have been awarded to nurses and midwives for long-term studies, as well as short-term training in emergency nursing, neonatal intensive-care nursing, nephrology, midwifery, management development and the advanced nurse's role in primary health care.

Shortages of nurses and midwives in many countries of the Region, within a global shortage of nursing and midwifery personnel, requires a critical review of the nursing human resource situation in the Region with respect to planning, development and management of this resource to meet the increased demand for nursing and midwifery services, both quantitatively and qualitatively.

There is a need to establish comprehensive human resources development programmes in order to support the recruitment and the retention of the nursing and midwifery workforce.

### **3. STEWARDSHIP**

#### **3.1 Preamble**

Stewardship is seen as a key factor in enhancing the contribution of nursing and midwifery services within the overall health system performance in the Region.

Only five countries—Bahrain, Cyprus, Lebanon, Pakistan and Sudan—have nursing practice acts. Valid updated registration systems are available only in Bahrain, United Arab Emirates and Oman. Other countries are initiating activities to develop regulations related to nursing services and education.

Regulation of nursing and midwifery practice and education is among the priorities of the nursing leaders in the Region. Technical support was provided to the Islamic Republic of Iran and Pakistan to develop and strengthen their nursing and midwifery regulatory systems and to enact appropriate nursing and midwifery legislation within the context of the health care reform. In addition, support was given for building capacity of nationals in the area of nursing and midwifery regulation through fellowships and national training activities. Based on the recommendations of the Eastern Mediterranean Regional Advisory Panel on Nursing and Midwifery to develop a common guidelines and terminology within the context of nursing and midwifery regulation, guidelines that would provide direction on the process and content required for institutionalizing a comprehensive regulatory system for nursing in countries of the Region were developed and tested by nurse leaders in various countries and are now (June 2001) being published in collaboration with the Regional Office for Europe.

A code of conduct for nursing has been developed by the Executive Board of the Health Minister's Council for the Gulf Cooperation Council States and is being implemented in each of the six Gulf Cooperation Council countries. Development and enactment of regulatory mechanisms in order to protect the public, improve the standard of care and enhance the contribution of nurses for improving the health and the quality of life of people are a major challenge for most countries of the Region and need to be considered seriously by senior policy-makers.

This is particularly important in light of the fact that the private health sector is growing, and nursing and midwifery personnel will be employed more and more in nongovernmental health services.

### **3.2 Establishing and strengthening nursing units in ministries of health**

This objective of establishing and strengthening nursing units in order to undertake the development of national plans and strategies for improving nursing education and service delivery has been addressed by over 60% of countries.

New nursing units have been established in Libyan Arab Jamahiriya, Palestine and Republic of Yemen. Oman, Syrian Arab Republic and United Arab Emirates have expanded the scope of their nursing units to cover areas dealing with continuing education for nursing personnel, registration, translation of textbooks into national languages and implementation of post-basic programmes in various aspects of nursing. Bahrain, Egypt, Islamic Republic of Iran, Kuwait, Pakistan and Qatar have strengthened the performance of nursing in their countries by establishing national committees for nursing development. Iraq, Jordan and Sudan have developed mechanisms whereby national resources available outside the ministry of health could be used either in an advisory capacity or for performing certain functions.

With reference to development of national plans and strategies, several countries have taken initiatives to develop their strategic plans; however, the plans need to be incorporated into the national plans, and both material and human resources need to be made available for implementation of the plans.

Since 1996, countries of the Region have continued their efforts to improve the contribution of nursing and midwifery to health care delivery. Some countries (Bahrain, Cyprus, Islamic Republic of Iran, Pakistan, Palestine, Saudi Arabia, Sudan, Syrian Arab Republic, United Arab Emirates and Republic of Yemen) have developed national strategic plans of action to improve nursing services. WHO technical support was provided to all these countries in the development of their national nursing plans, and building the capacity of nationals to develop and monitor these strategic plans.

Establishment and further strengthening of a nursing information system which is linked with other information systems in the ministries of health is still a challenge in the Region.

### **3.3 Nursing leadership and management development**

Building up leadership capabilities and managerial skills among senior nurses and midwives continues to be a priority, WHO provided support to Iraq, Islamic Republic of Iran, Pakistan and United Arab Emirates through provision of fellowships, technical assistance and conduct of national training activities. Developing the management and leadership capabilities of nurses and midwives in order to be able to manage change within the context of health care reform is a major challenge in the Region and needs to be addressed in a systematic manner. In addition, national and regional trainers who are competent in implementing such training programmes are essential for the success and sustainability of such an endeavour.

## **4. PROVISION OF QUALITY NURSING AND MIDWIFERY SERVICES**

Development of quality nursing and midwifery services continues to be a challenge and a priority for almost all ministries of health in the countries of the Region. The Regional Office provided various types of support in the form of consultants, fellowships and national training activities to Cyprus, Islamic Republic of Iran, Iraq, Oman, Pakistan, Palestine, Saudi Arabia, United Arab Emirates and Republic of Yemen in order to improve the quality of the services. Efforts focused on developing nurses' and midwives' capabilities in different advanced specialties such as intensive care, cardiac nursing, neonatal nursing, community health nursing and care of the elderly. In addition technical support was provided to Saudi Arabia in order to develop a nursing quality assurance and quality improvement programme. In 2000 the Regional Office provided technical support to the fourth Gulf Cooperation Council nursing seminar, which was on improvement of nursing services performance in the Gulf Cooperation Council and the 13th meeting of the Gulf Cooperation Council Technical Nursing Committee in its work on the development of the Gulf Cooperation Council strategic plan on nursing for 2001–05.

Another challenge in this area is unarticulated standards for nursing practice and protocols of care; and lack of institutionalized quality assurance, quality improvement and accreditation systems, which are prerequisites for provision of quality nursing and midwifery nursing services, which are expected by the community and required by the profession. In addition there is a need to develop mechanisms to ensure that nursing and midwifery practice is based on evidence and that best practice benchmarks are established and attention is paid to the promotion of clinical nursing and midwifery research, both at hospital and community levels to improve practice and contribute to positive health outcomes.

There is a need to make available the best possible information about what works—evidence-based practice through tools such as clinical guidelines and best practice information sheets. In addition, there is a need to develop multi-professional clinical guidelines, which involve physicians, nurses and allied health professionals.

## **5. CHALLENGES, OPPORTUNITIES FOR NURSING AND MIDWIFERY AND LESSONS LEARNED**

### **5.1 Main issues and challenges**

There has been a rapid expansion of health services in all countries of the Region. Several major changes have occurred in national health systems. They include investment in developing large and complex specialized hospitals and units, and growth of privatization in health care. These in turn lead to the need for health care reform by all governments.

All these changes and developments in health care have resulted in an increased demand on nursing and midwifery education and services.

The public and managers of health services in the countries of the Region are calling for better prepared nurses and midwives at all levels, especially at the advanced specialist level. They are calling for implementation of management processes conducive to efficiency and effectiveness to ensure retention and development of the nursing and midwifery workforce.

In order to provide a quality nursing and midwifery service and continually improve the quality of care provided to patients and clients, nurses and midwives in this millennium are expected to base their practice on evidence derived from research. They are also expected to collaborate and develop partnerships with other health care providers and sectors in order to share their expertise and better utilize the available diminishing resources. Preparing educational materials in national languages is necessary to facilitate transfer and exchange of knowledge between practitioners in the fields of nursing and midwifery.

Changes in the delivery of health care in general and nursing and midwifery services in particular call for institutionalization of nursing and midwifery regulation as a means to improve the quality of nursing and midwifery care and protect the health of the people.

As nursing services are labour-intensive, there is a great demand on all countries of the Region to invest in the development of the managerial and leadership capabilities of this resource.

The shortage of nurses and midwives in many countries of the Region requires expansion of schools of nursing to accommodate the number of incoming students. However, these schools are struggling with the shortage of national qualified nursing and midwifery teachers, who can contribute to the production of the human resources needed to meet health services' needs, and who can act as role models for the younger generation.

Another challenge is lack of availability of accurate and reliable data about nursing and midwifery. There is a need to develop uniform core indicators to be used in monitoring the progress of nursing and midwifery at the regional level and in developing future strategic directions.

## 5.2 Opportunities

There are several strategies available for strengthening nursing and midwifery. They include better prepared national nurses at the basic level, an increasing number of nurses educated to higher levels who are aware of the issues that need to be addressed, political commitment from the ministries of health to move nursing and midwifery forward, more applicants to schools and colleges of nursing, and creation of nursing structures at the national level.

In addition, there is growing public demand for quality care systems and dissatisfaction with ineffective care. It is important to note that at present, there are many opportunities for nurses in the Region to better share successes, challenges and experiences through different forums and collaboration at the national, regional and international level.

National and international organizations such as WHO, other United Nations agencies, International Council of Nurses and WHO collaborating centres play a vital role in informing and supporting professional endeavours in the field of nursing and midwifery development in the Region.

Last, but not least, there exists an increasing awareness among policy-makers, health authorities, public and nursing community that nurses and midwives make a difference in improving the health of the people, and it is a significant difference.

## 5.3 Lessons learned

It is clear that development of nursing and midwifery continues to be a challenge and a priority for almost all ministries of health in the Region. These are the lessons learnt through the work of the Regional Office with countries in recent years:

- *Adoption of a range of strategies*

We have learned that numerous strategies have to be adopted and a wide range of activities must be undertaken if we are to be successful in meeting the demands and expectations of the health care system both quantitatively and qualitatively. These strategies include: developing strategic plans, strengthening nurses' involvement in policy-making, improving basic nursing and midwifery education, expanding continuing education activities, building up management capabilities of nurse leaders in order to strengthen nursing services delivery, initiating quality improvement and quality assurance systems in nursing and midwifery, developing nursing research programmes and providing a regulatory framework for both nursing education and practice.

- *Political commitment*

Time has shown over and over that the primary determining factor for nursing and midwifery development in countries of the Region has been the level of political commitment at the highest level of leadership in the ministries of health. It has been clear, that when there

is political commitment to improve nursing services, the whole process of nursing and midwifery development is facilitated and targets are met.

- *Better prepared nurses*

It is evident from country reports that fewer categories of nursing and midwifery levels and better-prepared nurses make a difference in the outcomes of health care.

- *Institutionalization of a regulatory framework*

Nursing regulation in order to protect the public, delimit the restrictive rules defining narrow roles for nurses and change the perception of the nurse's role in the community, the medical profession and health authorities is essential for moving nursing services and nursing education forward.

- *Unity and collaboration*

Establishing mechanisms in order to ensure collaboration between the education and service sectors and national organizations and resources is a requirement for ensuring congruence between the production of human resources and health service needs.

The importance of working cooperatively with other key stakeholders in the health system, including politicians, physicians, policy developers and planners, cannot be underestimated if the goal is to continually improve access to health services and the quality and range of nursing services.

- *Information sharing, exchange and collaboration*

Information sharing and exchange of experiences within countries and between countries is of paramount importance in learning about best practices.

A positive trend that has been observed in the Region is major regional/international conferences in nursing and midwifery that are being organized by national leaders in nursing, with contributions and participation from many countries of the Region, as well as other regions. The high level of attendance and quality of presentations reflect the interest, commitment and awareness of the nursing and midwifery personnel in the Region with respect to major issues and challenges confronting health systems and nursing services. These conferences included the those organized by the WHO collaborating centre for nursing development in Bahrain; the WHO collaborating centre for nursing excellence at the Faculty of Nursing, Jordan University of Science and Technology; the Gulf Cooperation Council seminars and the University of Alexandria's Faculty of Nursing in Egypt.

The past four years have witnessed further collaboration with other United Nations agencies and with regional organizations in order to strengthen nursing and midwifery in the countries of the Region.

Technical support was provided to the League of Arab States to prepare a document and draft resolution in nursing for the Council of Arab Ministries of Health.

Furthermore, support was given to the third and fourth Gulf Cooperation Council nursing seminars in 1998 and 2000. Joint efforts with the United Nations Population Fund (UNFPA) in order to increase nursing and midwifery involvement in the reproductive health and safe motherhood initiatives also took place.

- *Nursing leadership and management*

Well developed national plans cannot be moved forward if there is lack of nursing leadership at the national level. Disappointments can occur for lack of progress, which in turn affects the morale of the nursing workforce. On the contrary, if there is a strong, committed nursing leadership at the central level with a vision that is shared with the nursing workforce progress can be tremendous.

## **6. CONCLUSION**

Within the socioeconomic context and health situation in the Region, nurses and midwives as a main group of human resources for health continue to provide care through all WHO programmes such as poliomyelitis eradication, Stop Tuberculosis Initiative, Roll Back Malaria, prevention and control of AIDS, Tobacco-free Initiative and other priority programmes, often under very difficult working conditions. However, nurses and midwives in the Region, as they declared in 1997 at the first joint meeting of chief nursing officers and members of the Regional Advisory Panel on Nursing in the Eastern Mediterranean Region, in the statement of intent of the regional nursing strategy “that they are conscious of changes throughout the Region’s health systems, including an increased role for the private sector. They highlighted the need for partnership between the public and private sectors and for policies, regulation, legislation and evaluation to ensure a consistent standard of care for all, regardless of whether that care was obtained in the private or public sector”.