Effective Collaborative Working between Multicultural Nurses in Saudi Arabia: Barriers and Solutions

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Background

In the Kingdon of Saudi Arabia (KSA) there is a recognised shortage of nurses, as well as a significant degree of turnover (Almalki et al., 2011). According to Abu-Zinadah (2005), the shortage of Saudi nurses has been attributed to different factors, such as increased healthcare demands, due to advances in medical technology, increased population growth, increased life expectancy and the increased numbers of chronically and critically ill patients.



As a result, a notable portion of the nursing workforce in the country includes expatriate nurses, with Saudis making up approximately 29% of the entire nursing staff population. For Saudi nurses in the private health sector, this figure is even lower, with local nursing making up only approximately 4% of the whole (Almalki et al., 2011).

Literature Review

Only nine studies (out of 37) were located that examined cultural issues around nurses working together (i.e. collaborative working). These were conducted in the UK, USA and Australia and only examined barriers affecting working rather than facilitators or solutions or best practice. A small number of studies were located that examined the Saudi context, but these focused on barriers to nurse-patient relationships only and did not examine cultural issues in relation to nurses working together. No study was found that has investigated the barriers and solutions to effective collaborative working as a nurse in a multicultural setting such as KSA. Culture in this context is defined as multifaceted and includes knowledge, belief, fine art, ethics, law, tradition, as well as all skills and behaviours developed by society and its members (Tyler (British anthropologist), 1870, as cited in Avruch, 1998). This definition will be used as the most comprehensive and meaningful for this study.

Aim of the Research

To provide an in-depth understanding of how nurses and nurse managers perceive culture and effective and ineffective collaborative working in a highly multicultural healthcare setting in KSA.

Data Collection

The research included interviewing nurses in regards to their experiences in working within a multicultural environment in a Saudi hospital. 18 semi-structured interviews were carried out with nurses who fulfilled the inclusion criteria. The literature review has guided the development of an interview schedule, underpinned by the Purnell competence model (Purnell, 2002).The analysis of data will be supported by Nvivo 11.

Results

It is hoped that the results of this thesis will inform the future nursing workforce strategies of the KSA Ministry of Health and ultimately impact on patient care through better working relationships.

References

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