The growing landscape of elder care in Qatar and the necessity of a skilled nursing work force

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Abstract

The oil rich Arab Gulf country of Qatar is experiencing rapid growth and development both in infrastructure and over-all health of its residents. Though it has one of the youngest populations in the region, life expectancy in Qatar is increasing and the local population is aging. An increase in the population over the age of 65, particularly for those having pre-existing chronic health conditions, poses challenges in providing high quality healthcare. One of these challenges is in securing a nursing workforce knowledgeable about the special health needs of the aged, and skilled in providing their care within the cultural context of an Arab Muslim country. One strategy to address this challenge is to make a conscious shift in nursing education that highlights the need to equip student nurses with adequate knowledge and developed skills to care for the aging population of Qatar. Nurses who teach in this context must be prepared to deliver a curriculum that is evidence based and culturally sensitive to the norms and practices that are prevalent in the country. This article discusses the current population trends in Qatar, culture specific challenges to providing high guality aged care, and the subsequent necessity of educating a nursing workforce that is knowledgeable and skilled in geriatric care.

Key words: Elderly, Geriatric, Nursing

Introduction

Qatar has long been recognized as one of the world's youngest and most vibrant nations; however, its population is aging. With significant growth since 1970, Qatar's population is now estimated at 2,717,866 (Ministry of Development Planning and Statistics (MPDS), 2018). Population trends show an expansion of the working age group with an increase of those aged between 15-64 years (70.3% in 1986 and 83.9% in 2015). Although the percent of population over the age of 65 years changed minimally from 1.9% in 1986 to 2.2% in 2015 (MPDS, 2018), and less than 2% as of July 2017 (Qatar National Health Strategy, 2018-2022), these ratios reflect an aging local population set against a rapidly expanding population of transient and young expat workers recruited to fulfill the needs of the ongoing infrastructure development and construction industries. The overall number of Qataris and non-Qataris above the age of 60 is estimated to be 10,757 and 18,030 respectively (Qatar Health Report 2012 retrieved Oct 4, 2017). Life expectancy in Qatar has also increased, "at 65 years, women are expected to live a further 20.3 years, 14.3 of which are healthy. At 65 years, men are expected to live a further 18.7 years, of which 13.5 are healthy" (Qatar Health Report 2012). This increase brings with it challenges of caring for the elderly population at home, and in acute and long-term care facilities.

Qatar's National Health Strategy (2018) has identified 'elderly' as one of the seven priority population groups that will be a focus through to the year 2022. It aims to improve the health of the aged by creating opportunities for older people to stay well and live at home as much as possible. It also seeks to integrate and coordinate home care services and enhance support for family caregivers to improve the healthy life-years for those over 65 years (Qatar National Health Strategy 2018-2022). However, in order to keep up with the demands of an aging society it is imperative to ensure its nurses are adequately trained within that realm. Among all health professionals, nurses have most contact with the elderly, in acute as well as community and residential long term care settings. It is therefore extremely important to prepare future nurses with specialized knowledge to enable them to identify and mitigate problems as they arise within this age group (Mastel-Smith, Nash & Caruso, 2016).

This narrative review provides a snapshot of the context of elder care in the state of Qatar and the need for the preparation of nurses to adequately care for the elderly in acute, long term, and community settings. This narrative review will use a constructionist approach as its conceptual framework. A constructionist approach involves creating a mental picture which is built on the knowledge and structure one creates as they peruse the literature (Papert and Harel 1991).

Cultural Context in Qatar

In traditional Arab culture, families are extended to include grandparents, aunts, uncles and cousins. In this milieu, elder family members are more likely to be cared for at home by family members (Musaider, D'Souza and Al-Roomi, 2013). However, due to a changing work and social landscape, Arab families are challenged to continue with this extended family tradition. Women family members, who are typically seen as caregivers, are now more likely to be actively employed outside of the home, so caring for the older members may be waning (Musaider, D'Souza and Al-Roomi, 2013). Other factors, including modernization, migration of youth, and urbanization, have impacted on the family's ability to provide traditional forms of informal caregiving for the elderly. (Hussein & Ismail (2017).

Until most recently, nursing homes were unheard of in Qatar, but a move towards their utility may be rapidly on the horizon for this region. Though people are living longer they are not necessarily healthy in aging. Indeed, the high rates of diabetes and cardiovascular disease in the country contribute significantly to disease and disability in the elder population, and to their need for supportive health care.

In the face of a significant aged population and changing societal norms, Qatar must invest resources to meet the demand for specialized services for the elderly (Musaiger 2013). This may include meeting an increased demand for nursing homes and nursing home beds, as well as investing resources in homecare. All of these equate to a necessity for increased training in the care of the elderly.

Priorities of Elder care in the Middle East

According to Qatar's new National Health Strategy (2018-2022, p 19) "aging is precious" and "we recognize the dignity of the older population and the need to support their independence and harness their contribution to society". Healthcare needs of the elderly are unique and require specialized care to address the many normal physiological, social and emotional changes of aging, as well as the multitude of acute and chronic manifestations of illness encountered in this age group (Esterson et al., 2013). In order to care for this unique population, health care professionals, as well as other public sector workers who are involved in planning for improving the quality of life of the elderly, need specialized education.

Qatar has invested in improving the quality of life of the elder population who reside in its communities. Qatar Foundation for Elderly People Care (IHSAN) is one program providing social care services to address the challenges of an elderly population of both locals and expats (hukoomi.qa retrieved May 28, 2018). It offers various social programs and activities through the use of the volunteers and is supported in this endeavor by the Center for Empowerment and Elder Care (Ehsan). Through national health policy and support for local organizations and initiatives, Qatar has strived to support community dwelling elders; however, further action is needed to compliment this with high quality health care for those elders who reside in both the hospital and longterm care facilities. Development of a nursing workforce skilled in geriatric care is required for positive movement in this direction.

Fortunately, Qatar is one country in the region that recognizes the need for nursing education with a strong geriatric focus (Abyad, 2016). The University of Calgary in Qatar is the only provider of an undergraduate nursing program in Qatar. With instruction in English provided by Canadian trained and credentialed nurses, cultural understanding can be the deciding factor in fortifying the uptake of a curriculum shift to integrating geriatric concepts. Recognition of the unique culture of the country is a prodigious approach for nurses trained in the West but teaching in an Arab Islamic culture. "HCPs who are unaware of cultural and religious practices, beliefs and expectations may encounter difficulties" while caring for elderly persons (Johnson & MacDonald, 2016, p 25). It is this tenet that undergraduate baccalaureate nursing programs must keep in mind when delivering and developing specialized geriatric content.

The issue of cultural understanding is complicated by the fact that the existing nursing workforce in Qatar is dominated by nurses from outside of the Arab Gulf region. This is reflective of the cultural and linguistic diversity of Qatar's population as a whole; however, the aged portion of the population is in large part Arab.

Why Teach Geriatric Nursing as a Specialty

A registered nurse workforce that can address the specialized needs of the elderly in a culturally competent way is imperative to a successful trajectory of care for an aging population. This specialized care must imbue "maintaining the health, independence, and quality of life" of the aging population of Qatar (Lunsford & Posey, 2018, p185). According to Qatar's National Health Strategy (2018-2022, p 19) "the increased demand for primary and long-term care requires a larger and better trained workforce". With this in mind, undergraduate baccalaureate nursing programs should position themselves with regards to specialized training in the elder care sector. Nursing curricula must allow dedicated time for sufficient knowledge transfer of this content along with specialized hands on and simulated learning (Esterson, Bazile, Mezey, Cortes & Huba, 2013).

Ways to Improve Preparation of Nurses to Care for the Elderly

Strategies to improve nurses' knowledge and skill to effectively care for the elderly should be directed at both the education sector and the practice sector. Inadequate curriculum (Xiao, Paterson, Henderson & Kelton, 2008; Farrell, Luptak, Supiano, Pacala, Lisser 2018); lack of engagement between education sector and practice setting (Farrell et al., 2018); and lack of experienced faculty (Koehler, Davies, Smith, Hooks, Schanke, Loeffler 2016) are identified as barriers to preparing registered nurses to effectively care for the elderly.

The University of Calgary in Qatar is the only provider of an undergraduate nursing program in Qatar. It offers only one elective theory course in gerontological nursing which does not contain a practical component. Efforts have been made to include simulation and other active learning strategies in this course to enhance students' learning, and students report that they value receiving this instruction.

Anecdotal feedback from the students suggests that they find this course extremely beneficial. By virtue of culture and religious teachings, most students have elderly family members either residing, or in close contact with them. The students indicate that learning from this course enables them to understand the needs and behaviors of their elders which positively impacts on their relationships with them. Respect and care for the elderly have always been part of their cultural value and belief system; being able to take the course in gerontology enables them to better understand the physical, emotional and social needs of the elderly. On the other hand, when it comes to career choices, many students are more inclined to work in fast paced, acute care settings.

There is no research on the preference of career choices for nursing students in the Middle East; however, research conducted by Xiao et al. (2008) in the Australian context suggests that students are less motivated to work in elder care facilities or nursing homes due to the perception that elder care requires knowledge of basic nursing care and is linked with a social stigma positing that those who work in elder care facilities do not require specialized knowledge. One of the respondents from Xiao et al. (2008) stated that,

When RN's from aged care want to work in acute care, they have to complete a refresher course. However, when RNs come from acute care to aged care, they are assumed competent enough without the requirement of extra preparation. We feel uncomfortable to say we work in a nursing home publicly (NAFG 1 as quoted in Xiao et al., 2008, p. 775).

Prestige and honour in a career comes with maintaining high standards and placing added value to it. If geriatric nursing is recognized and valued at all levels including educational institutions and practice settings at regional and national levels then it will be considered a specialty for which many will compete. Passionate and dedicated professionals working in geriatrics will agree that taking care of elderly and learning about eldercare should be a specialty in nursing education and should be viewed as an advanced skill. At the educational institutional level, geriatric nursing should be given equal importance as other nursing courses. Suggestions to prepare students to effectively care for the elderly include integration of gerontological and geriatric content with existing curriculum (Koehler et al., 2016) in addition to providing stand-alone courses in gerontology and geriatrics (Mastel-Smith, Nash, & Caruso, 2016). Undergraduate nursing programs have psychiatric and pediatric nursing as stand-alone courses; geriatric nursing should also be given the same attention, ultimately improving patient outcomes (Mastel-Smith et al., 2016). There is a need to recruit specialty geriatric nursing instructors to teach geriatric nursing. In Qatar, these instructors should also possess knowledge of the culture and be able merge together cultural and specialty knowledge to make meaningful application for students.

Fostering effective partnerships among education and practice settings is also very important to help students observe and practice geriatric nursing. Developing effective relationships between teaching and practice sectors will help improve the quality of care as well as strengthen the curriculum by addressing practice and curriculum gaps related to the care of the elderly (Baumbusch, Dahlke & Phinney, 2014). This is important because in Qatar, specialized geriatric units are few, and aged patients are usually treated on general hospital units. In this context it becomes challenging to build expertise in one particular aspect.

In addition, to improving the quality of care provided to elderly in any setting, emphasis should be given to recruiting professionals who possess the required expertise and are genuinely interested in serving this population. Upgrading and maintaining the standard of education and expertise of professionals already working with the elderly are also needed to maintain competency and ensure incorporation of evidence based practice to improve patient care outcomes. Regional initiatives such as a gerontological nursing certification program, provision of a web-based comprehensive geriatric nursing resource center, and fostering regional collaboration (Abyad, 2016) would help nurses to become competent in providing high quality care to the elderly.

Summary of Recommendations

(1) Integrate geriatric nursing as a specialty within undergraduate baccalaureate nursing programs.

(2) Include healthy aging as part of core courses.

(3) Embed care of the elderly into discussions regarding various chronic diseases and conditions.

(4) Encourage cultural relevance within care components of geriatric nursing in all undergraduate baccalaureate nursing programs.

(5) Include interprofessional collaboration when teaching courses that discuss geriatric content.

Conclusion

With the population of Qatar set to shift toward an increase in those persons 65 and older, it is more important now than ever to work toward alleviating problems associated with increased aging. As seen in both the Qatar National Health Strategies of 2011 and 2018, Qatar is moving toward abating these issues as they arise. Tantamount to this success is having a nursing workforce that is well skilled to work with an aging population in both a preventative and responsive way. This workforce should also be culturally responsive to the care needs of Qatar's diverse population. This growing demand for specialized elder care gives rise to the need to ensure baccalaureate nursing programs include as a specialty area, that of geriatric care, not only for the aging population of Qatar but worldwide. The authors make some recommendations for developing and delivering specialized geriatric content within an undergraduate baccalaureate nursing program.

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