



## A Conceptual Model for Successful Leadership in Nursing Education in the United Arab Emirates

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### ABSTRACT

**Purposes:** The purpose of this paper is to reveal interview findings from an empirical study, conducted with a nursing education leader currently working in the UAE, to remedy the paucity of literature, related to leadership issues in nursing education in the country; and to synthesize all relevant literature review material into proposing a culturally suitable model for nursing education leadership in the UAE.

**Design:** A review of the literature on authentic transformative leadership was conducted and select successful leadership attributes have been discussed. A hermeneutic, phenomenological, semi-structured interview with a nursing leader in the field of nursing education currently working in the UAE was also conducted.

**Findings:** Emerging themes reflected global patterns such as the presence of a hierarchical leadership model, lack of communication, poor teaching resources and low student numbers. Successful attributes that can help cope with the challenges include-taking care of self, building the trust economy, perseverance, maintaining strong professional networks and cultivating relationships among faculty members. The Excellence in Nursing Education Model by the National League for Nursing has been adapted for the proposed conceptual model for successful nursing education in the UAE.

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**Keywords:** Nursing Leadership, Nursing Education, United Arab Emirates, Hermeneutic Phenomenological interview, Qualitative research, Conceptual Model

#### 1. Introduction:

Nursing is ever changing, ever growing, striving to meet the myriad health care needs of the society to which it caters. Nursing education seeks to provide the theoretical background and technical skill competency required of nurses to meet these demands. Since the 1990s, various schools of nursing affiliated with universities or government agencies have for short periods offered the baccalaureate degree in nursing, with an example being the Institute of Nursing in Abu Dhabi, which was dissolved to give way for the nursing program in the Higher Colleges of Technology in 2004, which subsequently closed in 2009, and currently, the Fatima College of Health Sciences in Abu Dhabi (started in 2006) is offering the nursing degree to its students (Wollin and Fairweather 2012). This raises the question, why do some schools of nursing flourish while others flounder?

According to Horton-Deutsch et al. (2011), “academic nursing leaders, are one component of a well-prepared faculty, required to achieve and sustain excellent educational programs” (p. 222). Hence the purpose of this paper is: (i) to provide interview findings from an empirical study, conducted with a nursing education leader currently working in the UAE, to remedy the paucity of literature, related to leadership in nursing education in the country; and (ii) to synthesize all relevant literature review material in proposing a culturally suitable model for nursing education leadership in the UAE.

#### 2. The Current Status of Leadership in Nursing Education – Globally, and in the United Arab Emirates:

Nursing education is never constant and throughout its history, nursing programs offered, have been a direct reflection of social, political, and



economic trends and issues. According to Feldman and Greenberg (2005:11), “nurses lead patients, families, groups, communities, committees, organizations” – all highly challenging and demanding, and, therefore, the need for effective nursing leadership is critical. Nurse educators have multifaceted influential dimensions where nursing leadership is enacted – either with students in the classroom or with faculty members at a meeting, on a local level within the organization or at a national even international platform (Horton-Deutsch 2010). In this section, issues common to higher education in the UAE, and pertinent to higher education in nursing, in the UAE, have been identified. A comparison has been made between nursing education in the UAE and some select other developing countries also, with a view at identifying common global concerns in the field of nursing education.

A look at challenges in nursing education leadership in other developing countries has identified several areas for change and significant improvements in the field, with the first and foremost being a global shortage in nurses’ attrition and retention in the profession. The World Health Organization in its report, (2006) stressed that the critical workforce shortage is severe enough to start impacting on the delivery of global essential nursing care. The nursing profession in Singapore has yet to reach its required target of qualified nurses at the different levels. Arthur (2008) has succinctly described their current challenges as-creating new programs, developing a research agenda in an environment where there are only a few Ph.D. holders, resulting in minimal research output, managing faculty who are not familiar with the university system and altering the climate where diploma nurses are the norm.

Turale, Ito, Murakami and Nakao (2009) conducted a study to understand nursing scholarship in Japan, and concluded that Japanese scholars required, “improved English proficiency levels, national and international collaboration with other nurses, political and assertive skills to take control of nursing education and be more involved in research collaborations and international publications” (p. 166). Yet another study by Turale, Klunklin and Chontawan (2010) explored similar perspectives among nurse scholars in Thailand and revealed that visionary leadership, resource sharing among universities, and scholarships to study abroad were major indicators for growth, while high teaching loads, minimum research publications, lack of mentorship and lack of consensus related to entry nurse practices, were some barriers to scholarship.

Higher Education in the United Arab Emirates, since the nation’s unification in 1971, has progressed

at a remarkable pace with technological innovations and globalization impacts creating rippling effects that have swept across the field and its importance is reflected in Article 17 of the UAE constitution which states that, “Education is a fundamental factor for the progress of the society” (2010:10). The majority of the workforce in the UAE currently is constituted by foreign labor and according to Mograby (1999), the imbalance is due to the relatively small size of the national population and the relentless rigorous pace of its economic development. A decade later, Kirk (2010) observes as a “demographic anomaly” that Emiratis are still outnumbered, twice – once in the general population and again in the workforce. This has led to the formulation of a national campaign with an aim to educate and recruit more Emiratis into the machinations of the state and resulted in a strain on the national education system.

With a need for restructuring and remodeling its educational systems, simultaneous to the need for graduating workplace ready employees, Kirk (2010) explains that- the UAE has responded to the situation by the “quick-fix” solution of buying the educational models and expertise it requires, which were mostly western models, as opposed to the comparatively slow but steady process of building its own indigenous education system. He identifies several implementation constraints as a result of the employed strategy, first and foremost being, poor English proficiency levels among the local population. This required considerable effort, before the skill development and technical know-how, along with relevant information and communication technology strategies were incorporated as part of the curriculum. There was also a felt need for capacity building of leaders in every field, in line with the vision of the Ministry of Education, to promote enduring, sustainable development in the community. In the field of education, there are very few Emiratis in leadership positions and this lack of local talent has resulted in the migration of teaching personnel, mostly from the surrounding Arab countries, who lack the culturally relevant identity required in their position.

The Ministry of Higher Education and Scientific Research was established in 1992 to deal with the higher education sector. Its role is to regulate and accredit all higher education institutions and programs, both private and public. Currently, education in the UAE is being re-evaluated and re-examined to improve its adaptability and accurately reflect changing trends in the global arena and this has been formalized by the policy to recruit 90% of the teachers in the national schools from the local population by 2020 (Kirk 2010). The Emirates Center for Strategic Studies and Research (ECSSR), in a

featured article on its website, calls the UAE leadership model, “a model of Constructive Engagement with the Nation” (Al Awadhi 2012), based on the premise that, “if the leadership is more interactive and responsive to the people, it will be capable of achieving its goal.” This has been accomplished partly by the generous national funding and support from the Nation’s leaders which has contributed to the sense of security in its citizens.

Nursing education, which falls under the umbrella of higher education in the UAE, needs to fulfill one key strategy among the list of the UAE Government Strategies (2011-2013) and ensure world-class health care to its citizens and residents. Effective nurse leaders are the need of the hour to ensure quality nursing education and equip its largest section of health care providers to rise to the challenge, and provide optimal care to the society. In the UAE, as with other higher education programs, there is an import of foreign curricula in the field of nursing education, an example being, the North American system which was used in the Higher colleges of Technology, from 2004 – 2009 and the Australian Griffith University curricula currently being used in the Fatima college of Health Sciences (Wollin and Fairweather 2012). Similar to other institutions in the UAE, a lack of local talent has led to the import of skilled workforce, especially expert academics, mostly western and the other Arab regions but also some from Asia, to assess, deliver and evaluate the nursing curriculum for the students.

There is a growing number of women in the higher education system in the UAE, in recent years, but an overdependence on expatriate nurses, coupled with common misunderstandings regarding the role of a nurse, lingering perceptions of nurses being the handmaiden of doctors, low educational levels and limited knowledge regarding scope of practice of nurses, have resulted in only 3% of the local population taking up the profession as a career choice (Wollin and Fairweather 2012). Another concern, identified by Wollin and Fairweather (2012) in the UAE, is the continued education of practicing nurses at the diploma level, which have resulted in a shortage of bachelor-qualified nurses in the country. In recent years, Wollin and Fairweather (2012) note that providing locally educated, bachelor degree nurses, fluent in Arabic, have been recognized as a sustainable alternative and hence the development of bachelor programs in nursing in the UAE.

Bass (1999:12) suggests that “resolution of this issue may lie in the alignment of personal principles with those of the group, organization, and society” and believed that there is a current need for leaders to be more transformational if they sought to maintain effectiveness. He describes transformational

leadership to, “the leader moving the follower beyond immediate self-interests through idealized influence, inspiration, intellectual stimulation or individualized consideration” (p. 11). Burns (1978, cited in Bass and Steidlmeier 1998) discusses transformational leadership as involving moral uplifting of followers, but Bass and Steidlmeier (1999) argue that the absence or presence of a moral foundation in the leader himself is what forms the distinction between authentic versus pseudo-transformational leadership. Norris et al. (2002) describe transformational leadership as a “shifting of influence that allows many followers to emerge as leaders at particular points in time”. Bush (2003) agrees that transformational leadership is currently in vogue, but cautions that it may become a tool to rob followers of their individual vision.

Avolio and Gardner (2005), therefore, with an aim to refocus on what constitutes genuine leadership, developed authentic leadership to form a generic root construct for other forms of positive leadership like transformational leadership and the advent of their work on authentic leadership, has sprung from Bass and Steidlmeier (1999) earlier mentioned argument that there are pseudo versus authentic transformational leaders. Their central premise is that “through self-awareness, self-regulation, and positive modeling, authentic leaders foster the development of authenticity in their followers” (p. 317), and ethicality is a central component of this leadership practice.

### **3. Interview with a Nursing Education Leader in the UAE:**

Nursing education in Abu Dhabi began in 1974, with the establishment of the first school of Nursing, but till date, no studies have been published in the extensively reviewed literature on the nature of nursing education leadership in the UAE. This section consists of the results of a hermeneutic phenomenological interview, conducted with a leader in the field of nursing education, currently working in the UAE, regarding nursing leadership in the UAE, to remedy the paucity of literature in this area and to collect some empirical data on the challenges faced by nursing education leaders in the region, with a view at discussing the findings later, in relation to the rest of the literature. This interview has been beneficial in shedding some much-needed light on some of the challenges faced by nurse leaders in establishing nursing programs in the UAE in particular, and the leadership qualities required to successfully resolve these issues.

The study has been conducted, with the purpose of identifying some of the challenges faced by nurse leaders, in establishing nursing programs in the UAE and to gain some insight on leadership

qualities, particularly interpersonal attributes that could help successfully combat these challenges. The purpose aligns itself with the philosophies, strategies, and intensions of the interpretive research paradigm which seeks to understand a human phenomenon and the related experiences underlying it (Ajjawi and Higgs, 2007). The objectives of the study were- to illicit the experience of being a nurse education leader in the UAE; to identify some of the challenges faced by nursing education leaders, from an UAE perspective; and to ascertain select interpersonal attributes of leadership that can help built resilience in coping with these challenges, especially in the UAE context.

#### 4. Research Approach and Methodology:

Gadamer's hermeneutic phenomenology provided the philosophical framework for the study as it is a primary and universal way of our being in the world (Polit and Beck 2006). As the requisite in a hermeneutic phenomenological study is to collect rich and dense information concerning the phenomena, purposive sampling was used to locate the participants (Polit and Beck 2006). Frank (2005) defines an expert as one having "profound knowledge and is competent in using this knowledge". A nursing expert is someone who does not let principles and rules guide her action, who has a rich background experience and is highly proficient in performance. Thus, an experienced nurse currently holding a leadership position in the field of nursing education in the UAE was recruited for the study. Ethical approval for the interview was obtained, and a participant information sheet was given to the participant, detailing the interview's goal of collecting empirical evidence towards the practice of nursing education leadership; within the UAE context. Participant rights and confidentiality of data were explained and individual consent was obtained.

In hermeneutic phenomenology, the interview is a commonly used data collection strategy as it serves a very specific purpose. According to Patton (2002, cited in Glesne 2006), "kinds of questions include experience/ behavior questions, opinion/value questions, feeling questions, knowledge questions, sensory questions, and background / demographic questions". A tape recorded, thematically structured, narrative, open-ended interview was conducted with a nurse leader in the field of nursing education, with experience working in the sphere of nursing education in UAE, based on principles of qualitative interviewing, Glesne (2011), and Kvale and Brinkmann (2009).

Specific research questions included: (i) How would the interviewee describe her experience of being a nurse leader, in an institute of nursing

education, in the UAE? (ii) What, in her opinion, would be some of the challenges faced by nursing leaders in the field of nursing education, from an UAE perspective? And (iii) what interpersonal attributes of leadership that can help built resilience in coping with these challenge especially in the UAE context? Results of the interview have provided rich empirical data, which along with previously reviewed literature will help towards the formulation of a conceptual model of successful nursing leadership in the field of nursing education in the UAE context. (See Appendix B)

#### 3.2. Results and Discussion:

Findings from the interview were categorized into "challenges in nursing education in the UAE" and "successful attributes for coping, within the UAE perspective". Under the first category, the interviewee shared that the hierarchical leadership model is still currently operating in nursing education in the UAE with terms like, "old school thinking", "one-man show" and "prehistoric model" used to describe the situation (personal communication 2012). This is similar to Dada's (2011: 203) view, "that the hierarchy present in educational organizations was one likely suspect in the implementation of the program and its ability to sustain over time in the UAE". In her view, constraints included – lack of clarity and communication within the system, poor teaching resources and no voice for the nursing academic at the top managerial level. Successful attributes that can help cope with the challenges include-taking care of self, building the trust economy, perseverance, maintaining strong professional networks and cultivating relationships among faculty members. The interviewee stressed that there was a need for collaborative leadership with shared responsibility and open attitude in nursing institutions in the UAE and a need for acceptance of advice from experts regarding diverse perspectives on a variety of issues (personal communication 2012).

Under "successful attributes for coping", the interviewee discussed that a nursing leader in the UAE context needed to have good personal support first, to be a good support/ advocate for others. In her opinion, this is done through seeking advice, taking care of one's health and maintaining strong professional networks within the profession. Perseverance, ability to influence people, ability to develop trust, make convincing arguments and having clarity in articulation were some of the qualities stressed by the interviewee as essential for successful leadership in the region, as is also, familiarizing oneself with the local culture. She quotes, "people are important and when relationships are cultivated one by one, it will slowly but surely result in the tipping point one day" (personal communication 2012). Some

of the issues identified as a result of the interview are similar to literature previously reviewed on issues facing nursing programs in nursing schools. It is interesting to note that the interviewee also highlighted the need to cultivate the authentic transformational dimension of individual consideration and inspiration, among the members of the institution.

#### 4. A Conceptual Model for Successful Leadership in Nursing Education in the UAE:

This section of the paper synthesizes all relevant material including current models in nursing education and leadership, with an aim at proposing a working conceptual model for successful nursing education leadership in the UAE, culturally sensitive to the UAE higher education system and reflective of the nursing profession. The National League for nursing (2006) recognized the importance of nursing education for the future development of internationally qualified clinicians, educators, researchers, and administrators, and developed a model of excellence in nursing education to prepare nurses with very high caliber. The model consists of eight core elements with components and subcomponents that are required for achieving and sustaining this excellence in nursing education. They are as follows:

- 1) Clear Programme Standards and Hallmarks that raise Expectations
- 2) Qualified students
- 3) Well prepared Educational Administrators
- 4) Evidence-Based Programs and Teaching/Evaluation Methods
- 5) Quality and Adequate Resources
- 6) Student-centered, Interactive, Innovative Programs, and curricula
- 7) Recognition of experts, and
- 8) Well-prepared faculty

In response to nursing education in the UAE, the “idealized influence” component of authentic transformational leadership can lead to the creation of a suitable organizational culture, strive for perseverance till the goal is achieved (personal communication, 2012) and provide a vision for proactive adaptive change (Huston 2008). Inspirational motivation can influence mentoring and networking within the organization, recognition, and reward for the followers (Bass and Stedlmeier, 1999), and build on the currency of trust (personal communication, 2012). When the authentic transformational leader pays individual consideration to the followers in the organization, the result is open channels of communication, acceptance of advice from experts and open attitude (personal communication 2012). And, finally, intellectual

stimulation brings about empowered followers who share responsibility for innovation and rise to meet the multifaceted challenges facing nursing education in the country.

Authentic transformation of nursing leadership in the field of education in the UAE, will ultimately lead to excellence in nursing education in the UAE, by achieving the subcomponents of a well- prepared faculty, leading to accomplishment of a student-centered, innovative, customized curriculum; mentoring of new faculty; implementation of evidence-based teaching including best practice guidelines; recruiting, retaining and graduating qualified students; advancing the profession and building an accredited nursing program leading to recognition within the UAE community; laying the ground fertile for international research collaborations and promoting a culturally suitable authentic organizational culture, as envisioned by the Nursing League for nursing (2006), as shown in Figure 1

#### 5. Conclusion:

This paper has attempted to respond to the issues concerning nursing education, and the challenges faced by leaders in nursing education from a UAE perspective, by proposing a conceptual model for successful leadership in nursing education in the UAE. Emerging themes from the interview reflected global patterns and included- presence of hierarchical leadership model, lack of communication, poor teaching resources and low student numbers. Successful attributes that can help cope with the challenges include-taking care of self, building the trust economy, perseverance, maintaining strong professional networks and cultivating relationships among faculty members. The Excellence in Nursing Education Model by the National League for Nursing has been adapted for the proposed conceptual model for successful nursing education in the UAE. The model proposes that an authentic transformational leader in nursing education can enhance the preparedness of the nursing faculty with far reaching influences over and across all other components, leading to the implementation of a successful sustainable nursing program, providing quality nursing care according to international standards, for the United Arab Emirates.

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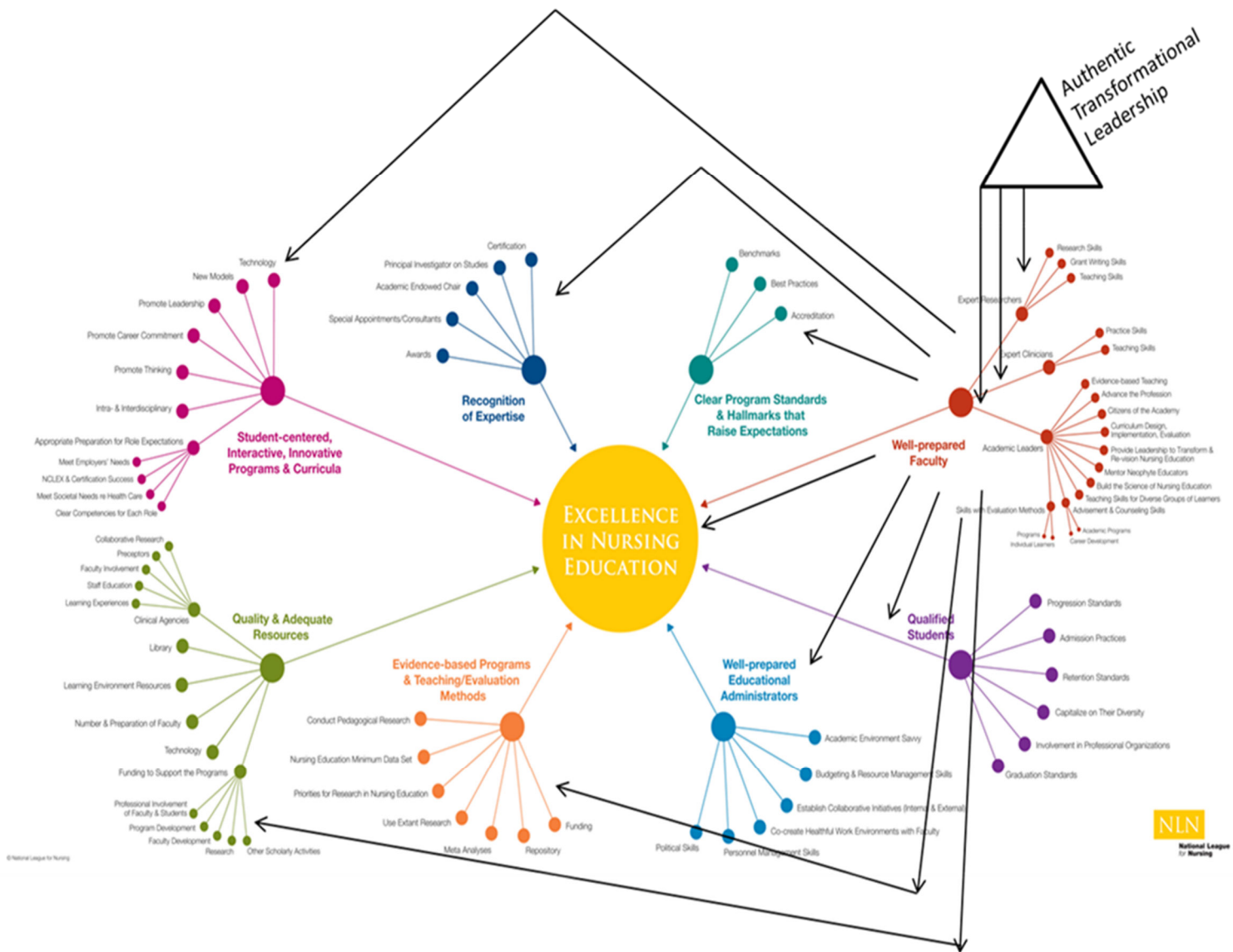
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### Appendices

### Appendix A

**Figure 1.** Proposed Conceptual Model for Successful Leadership in Nursing Education in the UAE





## Appendix B

### Draft Interview Guide

**Name of the Study:** A Conceptual Model for Successful Leadership in Nursing Education in the UAE

**Interview guide:**

- How would you describe your experience of being a nurse leader, in an institute of nursing education, in the UAE?
- Could you provide some examples to illustrate your statement?
- What, in your opinion, would be some of the challenges faced by nursing leaders in the field of nursing education, from the UAE perspective?
- I am interested in the interpersonal attributes of leadership that can help built resilience in coping with these challenges, especially in the UAE context. Could you shed some light on essential leadership qualities from that perspective?
- Is there anything else that you would like to comment or add upon?

Thank you,