



TEXAS WOMAN'S
UNIVERSITY

**Exploratory Survey of Simulation Use in Middle
East and North African Prelicensure Nursing
Programs**

The Middle East and North Africa (MENA)



Team



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Simulation

A nursing education strategy that mimics a hospital and patient environment, allowing the student to practice nursing skills and interventions without fear of risk to the patient, student, or cultural expectations.



My Experiences in MENA

Jordan

Demonstration as simulation

Complex equipment

Same/opposite gender care

Egypt

Low resource simulation

Faculty training

Same/opposite gender care



Simulation: why in MENA

- Modernization
- Faculty shortages
- Accreditation expectations
- Lack of clinical space



Simulation in MENA publications

- Saudi Arabia
- Oman
- Jordan



Survey Process

- 2019- started the process of electronic data collection
- 2020- COVID-19 and recruitment of team members
- 2021-completion of data collection and analysis



Findings

Country	Number of programs responded
Bahrain	1
Egypt	7
Iran	1
Israel	1
Jordan	9
Kingdom of Saudi Arabia	8
Lebanon	4
Oman	1
Palestine	6
Syria	1

Clinical hours

Clinical clock hours ranged from a low of 160 hours to a high of 2,736, mean of 1,031.05 hours.

Medical/surgical nursing (M = 192.03), Advanced medical/surgical nursing (M = 159.24) capstone/role transition (M = 157.54)



Clinical hours

Simulation as a substitution

100 % of respondents use simulation as a substitution.

Most common courses: Medication surgical, women's health and pediatrics.

Some programs used simulation in place of **all** clinical hours.

The vast majority allowed open learning space in the lab for skill practice.





Thoughts and Opinions

Simulation prevalence

- 45% were satisfied with the amount of simulation
- 45% felt there should be more simulation
- ~6% too much excess simulation was being used.

Clinical setting only

- Therapeutic communication
- Patient Education
- Empathy, caring, and compassion
- Problem-solving and critical thinking.



What is needed to increase simulation?

- Training to facilitate simulation, write scenarios, and conduct debriefings.
- Staff to run simulation controls and oversee students
- Time to write scenarios



Regulation and Training



Regulation

36% updated in the last two years

NCSBN simulation study and guidelines

Training

Running simulation scenarios (66.7%)

Conducting debriefing (45.5%),

Programming manikins (33.3%)

No training 21%



Discussion

Nursing simulation is being used in the MENA region

- Limited clinical space, faculty availability, training in complex care situations, and opposite-gender care.
- Used for all clinical courses and as a substitute in 50-100% of responding programs.
- Simulation challenges- space, cost and trained faculty.
- Similar challenges in the U.S.-limited clinical space and time, faculty availability, complex care, cost..



Limitations to data collection

Low response rate

- Civil unrest
- Anxiety about sharing results & anonymity
- Lack of time and incentive
- COVID-19 separation from campus
- Lack of personal relationship



Conclusion

In the MENA region

- Nursing simulation is actively used as a teaching strategy and is welcomed and valued.
- Need for support, training, and regulation.

Next steps: future research and collaboration



Thank you

