

Kurdish Nurses visit The University of Oklahoma
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We have been privileged to host four International Visiting Scholars from the Kurdistan area of Northern Iraq's Suliamani University: Shwan Qader, BSc; Bestoon Ahmed, BSc; Barazan Mohammed, BSc, and Atiya Mohammed, BSc, MSc. Shwan, Bestoon, and Barazan are completing requirements from Suliamani University for their Master of Science degree in nursing, and Atiya is completing requirements for her doctorate. All earned their Bachelor of Science degrees in nursing at Baghdad University. The purpose of their visit has been to work with nursing faculty research mentors for their theses/dissertation, as well as to learn about nursing in the U.S.A. Shwan is interested in Community Health, Bestoon in juvenile diabetes, Barazan in Coronary care, and Atiya in Maternal-Newborn Care.

Kurdistan is the home to 40 million Kurds who live in the mountains of Iraq, Iran, Syria, Armenia and Turkey. Being a Kurd is like being a Cherokee. It is an ethnic heritage, not a religion. While most Kurds are Moslems, they could be Christians or Jews.

They arrived in Tulsa in mid January after a difficult 18 month quest to complete the US visa requirements that included two trips to Jordon. Suliamani is located in the mountains of northern Iraq near the Iranian border, so the cold weather in Tulsa has not been difficult for them. Host families were arranged before their arrival and together with the College of Nursing faculty and students, their four month stay in Tulsa has been full of cultural as well as professional experiences. They have visited the zoo, aquarium, a flea market, Tar Creek superfund site, the state capital for Nurses' Day, various conferences, classes, and meetings and all were able to visit Washington, D.C. briefly.

When asked, "What do you think about the war?" They answer that they are grateful to the US for liberating the Kurds who were treated badly under the Saddam Hussein regime. They worry about a return of the oppression if US troops are withdrawn too soon.

They have done a slide presentation in Grove, Tulsa hospitals and at Oral Roberts University, and Duncan and the questions are about the same from Oklahoma nurses, "How is nursing in Kurdistan different from Oklahoma? The visitors have trouble summarizing the answer because everything seems so different. During the visit in Oklahoma however, they have had the opportunity to shadow nurses and other hospital staff at St. Francis Hospital in Tulsa and been able to see first-hand how nurses make decisions, what policy books look like, how instruments are sterilized for surgery, how a hospital protects patients from infections, how physicians interact with nurses and patients in a respectful way, and a myriad of other things. After this experience, the visitors have answered the question about differences as follows:

”Nurses are more independent in the US. They can do many things and are respected...and well paid”

“Hospitals have policies for everything in the US. This is very good. I hope we can do that in Iraq.”

“In the US, authority is decentralized which makes it easier and faster to make changes, especially when money is involved.”

The level of technology, the standards for practice, the organization infrastructure, the nurse/patient ratio were all areas of discussion included in a comparison. In Suliamani government hospital, for example, a nurse in Cardiac Intensive Care would care for 6 patients during the day and 12 at night. Only some of the patients would be attached to an electronic monitor and there would be no one to watch the monitors if they were attached. Nurses make so little money (about \$250 US equivalent) and have so little respect, that they have to work 2 or 3 jobs to feed their families. For this reason, night shifts (from 3 pm to 8 am) are popular, especially with the male nurses, because they take turn sleeping, so they can work their other jobs during the day.

Nursing duties are different too. The visitors told us that families are expected to stay in the hospital with their relatives to provide personal care, as this is not included in the duties of a nurse. Nurses typically hand the day’s medicines to the patients’ family once a day and families often have to purchase the drugs outside the hospital. Documentation is not considered a nursing duty either.

Nurses in the past were trained in a three year program that began when they completed 6th grade at about 12 years of age. As a result, those nurses are still working in the health system, and are poorly regarded; so much so that they aren’t even trusted to take vital signs. There is no licensing process for Iraqi nurses. Now, there are as many as four University programs offering nursing education throughout Iraq, and the standards and quality of nursing practice are improving.

The Oklahoma visit for these four scholars was funded and supported by the first lady of Iraq, wife of President Jalal Talibani personally.

Now, with such scholars as these returning to Northern Iraq with thousands of ideas of how to make nursing and health care better, things will surely change, although they voice the fear that the change will be most difficult. They will take with them examples of another way to practice, textbooks, confidence, and even membership in Sigma Theta Tau, International. They all hope to return to the US for further study. For further information contact evelyn-acheson@ouhsc.edu.

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