

**Strategy and Action Plan for the
Development of Nursing and Midwifery in Iraq:
2004 - 2009**

**Iraq Ministry of Health
Department of Nursing**

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VISION STATEMENT

Iraqi Nursing

Competent nursing professionals will provide nursing and midwifery services of the highest possible standard and safety, founded on scientific principles and current research and knowledge in order to meet the present and future health service needs of the people of Iraq. The quality of nursing education and services will improve through curriculum revision in colleges and institutions and by upgrading nurses in service through continuing education. As valued team members, nurses will contribute to the development of healthcare in collaboration with other members of the health team and its related sectors with the ultimate goal of improving the health and quality of life of the Iraqi people.

Acknowledgements

The process of creating this plan for the future of nursing in Iraq started after two nursing consensus building workshops in Iraq during August 2003. In September 2003, the Ministry of Health in Iraq and the World Health Organization wrote the document, “National Strategy and Plan of Action for Nursing and Midwifery Development in Iraq: 2003-2008.” A working group of nurses at the Ministry of Health re-examined the September plan in the context of the “Vision for Iraqi Health System” during February and March 2004. They reviewed and revised the nursing plan, and transformed it into this document.

I. Introduction

The current situation of nursing and midwifery reflects the isolation, neglect and conflict that have been the fate of Iraq in the past years. While the need for quality nursing and midwifery services is overwhelming, the nursing and midwifery can respond neither in providing the quantity required, nor the quality expected in today's health care system. This is compounded by the poor image and low status of nurses and midwives, and the little value that society and the health system place on their contributions to health care.

World Health Organization's main concern over the past three years has been to assist nurses and midwives to set in place the mechanisms that will assist them to improve the quality of care being given to the Iraqi population. In late 2002, a strategic plan for nursing and midwifery development was created in the areas of education, regulation, policy and planning, and leadership development. Additionally, in past years WHO's collaboration had focused on revision of the primary and secondary school curriculum, training of traditional birth attendants, and the supply of educational materials. However, the recent conflict virtually stopped action on moving forward the strategic plan, and now nurses and midwives have to deal with a further deterioration in the state of their hospitals and schools, and the general situation of the country.

This plan will mainly be implemented if a clear decision is made by the Iraqi health policy makers that there is a need for the qualified competent nursing personnel who will provide nursing services. The main question is whether competent nurses are needed beside physicians and others, or a large cadre of physicians are needed with auxiliary support to do non-nursing work.

Iraq needs to decide if a competent cadre of nurses who will be able to deliver quality care nursing services in a conducive environment that is regulated is essential to its health services.

II. Purpose of this Document

The purpose of this document is to provide a framework for all stakeholders to implement the components of the plan and agree on establishing a tracking system to measure the achievements. It is to ensure collaboration and partnerships in the implementation of the work between the different implementing agencies and to build consensus among stakeholders with regard to the strategic directions, products and services required to develop the nursing and midwifery services in Iraq.

III. Principles Guiding the Document

The guiding principles are the following:

1. based on the ongoing work concerning health systems rehabilitation and development in Iraq.
2. ownership by Iraqi nationals with support from stakeholders
3. relevance to the priority health needs and expectations of the community
4. working in partnership with the community on common objectives and supporting each other's efforts.
5. action-oriented and result-based approach to the implementation and monitoring of the plan given the resources available.

The priority for nursing sector reform is sustainable development. The workplan should cover the coming five years, 2003-2008, with a final evaluation in 2008.

IV. Conclusions and Recommendations

As a result of the review and discussions with all the concerned stakeholders at the Ministry of Health (MOH), Coalition Provisional Authority (CPA), Representatives of the Nursing Higher Education, Iraqi Nursing Association (INA), International Medical Corps (IMC), and World Health Organization Eastern Mediterranean Regional Office (WHO EMRO) and World Health Organization Headquarters (WHO HQ) Nursing mission to Iraq, and information obtained from two consensus-building workshops held in Baghdad on 18 August 2003 and in Erbil on 21 August 2003, the following recommendations are made:

Education:

1. Establish only 2 levels of nursing educational programs (technical and professional), and create bridging programs to upgrade intermediate and technical nurses over a designated period of time
2. Improve quality of nursing and midwifery education at all levels through
 - Strengthening teachers' preparation
 - Providing access to updated teaching learning materials
 - Upgrading the physical setting of teaching
 - Improving quality of clinical placements and the effectiveness of clinical teaching
 - Strengthening, enlarging and increasing access to university education (B.Sc., Master and Ph.D.)

3. Develop post-basic nursing specialty programs based on the country's needs and according to Regional standards.
4. Reduce the education-service gap by better liaison and collaborative mechanisms and alliances (between education and service, and Ministry of Health and Ministry of Higher Education).
5. Ensure that Deans and Heads of Nursing Educational Institutions are Nurses with a qualification in education.
6. A policy decision needs to be made about the language of teaching (as present, it is given in Arabic, English or Kurdish) keeping in mind the current availability of good teaching learning resources, and access to education outside the country.

Regulation:

1. Define a national scope of nursing and midwifery practice, with clear definitions of Nurse, Midwife and their roles, functions and responsibilities
2. Develop a system to regulate education and practice, including a system of registration and maintenance of a live register of nurses and midwives.
3. Create a framework and system for continuing competence.
4. Setup one professional regulatory body for nursing to develop and implement regulatory policies and practices.

Service:

1. Create a visible nursing service at institutional levels and in the primary health care sector responsible for managing, developing and implementing quality nursing service
 - Clearly delineate the nursing structure
 - Develop job descriptions and nursing service standards
 - Create safe, quality workplaces
2. Strengthen and improve the capabilities of nurses through structured, sustainable continuing education programs.
3. Establish community health nursing within the primary health care system.

Policy and Leadership:

1. Strengthen key leaders (e.g. Chief Nurse, leaders in the educational sector) by implementing mentorship programs, twinning arrangements inside and outside of the country and providing appropriate fellowships
2. Develop mechanisms to implement policy decisions in relation to education and nursing services.
3. Improve access of nurses to health policy and health planning decision-making areas.

Professional Development:

1. Establish one national nurses association to speak for nurses and nursing in the Whole of Iraq on issues related to the socioeconomic welfare and professional development of nurses. A model which allows different sections within the association to deal with special interests (e.g. specialties, regional groups) under one umbrella should be explored

2. Develop a communication strategy to raise the level of awareness of Iraqi society, other health professionals on the essential and distinctive role of nurses and midwives, and their contribution to the health care services. (e.g. media campaigns, community awareness programs, highlighting successes)

V. Situation Analysis:

The situation analysis of nursing in Iraq will focus on education, service provision, regulation, image and leadership including strengths, weaknesses and accomplishments.

Education

- **Nursing** - 3 levels of preparation:
 - Skilled: 3 years after 9 years of general schooling
 - Technical: 2.5 years after 12 years of general schooling
 - BS level: 4 years after 12 years of general schooling
 - Graduate education at Masters and PhD levels

The Ministry of Health plans to phase out its intermediate level program of 3 years after 6 years of general schooling.

The North has started to close some of the male nursing schools.

The curriculum remains hospital oriented with little orientation to primary health care and little holistic approach.

166 teachers work in the MOH schools. All are graduates of the BS program.

Some diploma level nurses are involved in clinical supervision and teaching.

The quality of the educational programs is poor, and a large gap exists between education and service.

While the BS programs and technical nurse program come under the Ministry of Higher Education, the Intermediate programs are the responsibility of the Ministry of Health.

- **Midwifery** - 1 level of preparation:
 - Skilled: 3 years after 9 years of general schooling

Physicians, nurses and midwives teach in the midwifery program.

Midwifery programs run on demand, and may open a program with only one student.

There are approximately 5,000 unskilled midwives or traditional birth attendants (TBAs) with new recruits continuing to enter this group.

About 40% of all deliveries in Iraq are carried out by midwives, half of these deliveries by skilled midwives and the other half by unskilled midwives.

- Head and Deans of nursing schools are not necessarily nurses. They may come from any of the other professions, e.g., Veterinarian, Physician, Agriculturalist, and others.

- There is limited coordination between the Ministry of Health and the Ministry of Higher Education in the development and management of nursing education programs.
- There is little coordination between nursing teachers in schools, institutes and nursing staff in the clinical setting during the clinical training
- Graduate programs are available at Baghdad, Salahaddin and Mosul Universities. There has been a plan to open a new program in Basra.
- Post-basic programs in nursing specialization are not available.
- Most nursing teachers have limited qualifications and often have a minimal preparation for the teaching role.
- Teachers and practicing nurses have limited access to new technology, new information, new skills
- The physical condition of many of the schools is extremely dilapidated. Looting after the most recent conflict has worsened this problem. Also, the move towards self-financing hospitals has resulted in the removal of some of the schools' facilities for other uses.
- Teaching equipment is either very limited or non-existent
- There is a severe shortage of the educational resources: teaching resources, training materials, learning materials, textbooks, educational supplies
- Teaching resources are particularly scarce in the languages of the country.
- A WHO initiative has enabled nurses in Iraq to prepare 15 texts in Arabic for the high school level. These texts cover the major areas of nursing. Ten books have been written. Printing has been completed for ten books, and is planned to start for the other five. However, these books have not yet been distributed.
- Programs for nursing and midwifery at the high school level may be initiated with only a few students

See Appendix 1 for more information about nursing education.

Service Provision

- Iraq has an acute shortage of nurses; for example, one province of over 900,000 people has under 30 nurses. At present, 17,743 nurses (which does not include the 12,000 nurses from the military, and the 200 working in the private sector) of all levels serve in 189 hospitals with 35,098 beds and 1,729 primary health care centers.

The nursing workforce is estimated to reach 60,000 by 2010. Over half of the nursing workforce is male. See Appendix 2 for numbers and distribution of nursing personnel.

- Iraq has a critical shortage of skilled midwives, who remain in far shorter supply than nurses.
- A nursing personnel database for the entire country has been established and is nearing completion.
- 12,000 nurses from the military must now join the civil sector, after the recent conflict. Information about their level of preparation and distribution is not available.
- Opportunities for military nurses to re-enter the health care system through reorientation and retraining to current nursing standards should be offered to the former military nurses
- The nursing structure in the Ministry of Health has undergone change over the past two years. Before 2001, the Directorate of Planning had responsibility for nursing which was organized with three divisions: nursing human resources, education and in-service education. Since 2001, the Directorate of Planning still has responsibility for nursing, which is organized as a Department of Nursing and headed by a Chief Nurse.
- The Nursing Department has limited communication and is not involved in most of the planning activities by the Ministry of Health, even in those areas that directly concern nursing. The Nursing Department is marginalized and in practice, remains invisible in the Ministry of Health and its policy and decision making structures.
- There is no nursing structure with a clearly defined nursing service in most hospitals. Before the recent conflict, an attempt to establish a very simple nursing structure in a hospital setting was made. The post of an assistant director of nursing was created in three health facilities, and a job description was prepared. However, this initiative remains in abeyance, and there is little report on its outcome.
- All nursing categories are underpaid. The previous salary scheme did not differentiate the qualifications, roles and responsibilities within nursing, and take these differences into account.
- The delivery of nursing and midwifery care has quality control problems. This issue is compounded by the lack of current job descriptions, criteria for evaluating performance, lack of role and function definition. Nurses are often relegated to carry out what are virtually 'housekeeping' duties. Other health care workers, including physicians, take tasks and roles that are considered to be nursing responsibilities in countries where modern nursing is practiced.

- The role of nurses in the primary health care sector is yet to be defined. The majority of nursing personnel working in this area are auxiliary personnel.
- Poor preparation for nursing staff, a severe shortage of equipment and other resources to carry out nursing care make it difficult to provide care of acceptable standards.
- Poor security and a lack of transportation in the post war period have added considerably to the difficulties facing nurses in the work place. The Chief Nurse reported that the inability to communicate and to travel in the field has resulted in the Nursing Department being isolated from the nursing services, which make planning, monitoring and follow-up extremely difficult.

Regulation

- The term nurse has no singular meaning and is used to cover a whole range of nursing personnel from the nearly illiterate auxiliary to the university degree prepared nurse.
- Until July 2003, there was no nationally recognized definition of nurses or nursing.
- Roles and functions are not defined, and few job descriptions exist. There is little role delineation between the different levels of nursing personnel.
- Iraq does not have a nursing practice act. The little legislation that pertains to nursing is contained in the Allied Health Professionals Law drafted in the 1960s.
- Unsuccessful attempts were made to establish the legislative basis for the establishment of a professional association from 1950-1970. This was reactivated two years ago with no success. However, this has not prevented the creation of the Iraqi Nursing Association that is now in the early stages of development.

Image and Leadership

- Nursing is regarded as a low status occupation and has a poor image not only with respect to society in general, but also within the health care system. Midwifery suffers from an even larger problem of status and image.
- Nursing programs have a limited choice of good student applicants, and often accept students with low passing grade in general schooling.
- Image and status problems are accentuated by the powerlessness of nurses to make decisions about their profession, and to communicate articulately and with confidence in the planning and decision making areas that are of relevance to the nursing contribution to health care.
- The lack of good role models and opportunities for mentoring at all levels – in the clinical field, education, management, planning, policy development and leadership – is a major obstacle to developing a competent and confident nursing and midwifery workforce.

- Leadership and good managerial skills are severely lacking in all sectors of nursing – education, service, regulation and the development of the professional organization. Few opportunities have been available for nurses to develop and exercise leadership skills, and the value of having well prepared senior nurses functioning in a collegial and collaborative fashion in the different sectors of health care delivery and health professional education is little recognized.

VI. Strengths, Weaknesses and Accomplishments

Strengths

General

- Motivation and high commitment to improve nursing and midwifery as a profession.
- Consensus on the future of nursing reached at Iraqi National Nursing Conference and nursing workshops in summer of 2003

Policy

- Presence of the Nursing Department in the Planning Directorate of the MOH
- Political will in Nursing to strengthen nursing education, clinical service and improve the social status of nurses
- Support for nursing from United Nations Agencies and other international organizations

Education

- Presence of nursing programs at the associate level in technical institutes, and baccalaureate level in five universities
- High educational aspirations with programs at the masters level in Salahaddin, and PhD levels in Baghdad

Service

- Professional development through the Centers for Continuing Education
- Professional initiatives such as the creation of the Iraqi Nursing Association

Weaknesses

General

- Poor image and low social status related to limited education achievements, difficult working environment and low pay

Policy

- Uncertain political will to support the development of nursing and midwifery services as an essential component of the health care system
- Very limited access by nurses to the decision making and planning process at all levels in policy, education and service
- Weak professional regulation to govern education and practice

- Loss of the highly prepared nurses to other countries
- Loss of nurses from the health sector to the private workforce outside the health care sector

Education

- Small cadre of nurses prepared at the higher educational level
- Limited educational resources for nursing in terms of faculty, materials and the physical setting
- Current curriculum is hospital oriented with little emphasis on primary health care
- Many nursing instructors do not have a nursing background
- Traditional teaching methodologies are used in both didactic and clinical areas
- Gap between education and clinical service
- Lack of coordination between the Ministry of Health and the Ministry of Higher Education

Service

- Too many levels of nursing and no role delineation between the levels
- Lack of role definitions and current job descriptions, which are not updated and fulfilled
- Lack of role models in all nursing and midwifery areas
- Few opportunities for professional development such as specialty nursing
- No structures for career progression
- Reducing skill level in actual practice of nursing and midwifery
- Role confusion in practice with other health care professionals and workers
- Predominance of unskilled midwives or TBAs in the maternity field

Achievements during Recent Years

General

- National Nursing Seminar, multisectoral and multidisciplinary, organized in 2001
- First Iraqi National Nursing Conference to bring consensus on issues held in July 2003
- Iraqi Nursing Association is being organized and developed
- Health Care Partnerships sponsored a Nursing Association for University Nurses in Suleimaniya
- Continuation of Nursing Consult Committee and participation in all activities to promote the nursing profession
- Uniforms for nursing lead to improved image of nursing

Policy

- Establishment of the Nursing Department in the Ministry of Health
- Decision to end nursing schools at the primary school level
- Support from MOH to the national nurses working on nursing reform in Iraq

Education

- UNFPA sponsors 6 training program for nurse midwives and skilled midwives
- Fellowships for 10 nurses with a high degree
- More than 13 training courses for nurse educators and practicing nurses from the nursing services
- Curriculum revision for secondary nursing schools
- Development of nursing books in Arabic for secondary nursing schools
- Opening of 6 evening classes for male nursing secondary schools
- Salahaddin University – MSc Nursing program started in 2002 through pairing with Baghdad University, and the first group of 10 students accepted in 2003
- New nursing college established in Erbil – intake increased from 15 to 70 students
- New Secondary Nursing School in Dohuk – building of student dormitories for more than 50 students
- Three Nursing Schools in Dohuk given audiovisual equipment & training materials
- WHO sponsors teacher training in Suleimaniya
- Provision of equipment and supplies for nursing education in the North
- Translation of five nursing books from Arabic to Kurdish, printed and distributed to all hospitals: Fundamentals of Nursing, Medical-Surgical Nursing, Obstetric Nursing, Pediatric Nursing, and Mental Health Nursing
- Student recruitment campaigns for nursing schools by directors, teachers and students

Service

- Continuation of the work by the Nursing Advisory Committee
- Database form developed to survey all the nurses working in Iraq
- Increased incentives for nurses who work on shifts
- Policy that nurses should not be utilized for clerical tasks
- Development of nursing clinical manuals in Arabic: Fundamentals of Nursing, Operating Room Nursing, Obstetric & Gynecologic Nursing, Critical Care Nursing, and Psychiatric Nursing
- Deputy Nursing post created at hospitals with relation to continued nursing education
- IMC supports nurses at Yarmouk hospital to get uniforms and transportation
- WHO sponsors in-service nursing courses in Erbil on midwifery & pediatrics
- Critical mass of nurses at the MOH, services and education to make a difference in Erbil
- Improved nursing records in Suleimaniya, implementation of nursing process

VII. Way Forward

This section highlights the vision, strategic directions, products and services, and a plan of action for developing nursing in Iraq. This plan was developed by the Iraqi nurses in collaboration with the main international partners.

Vision Statement for Iraqi Nursing

Competent nursing professionals will provide nursing and midwifery services of the highest possible standard and safety, founded on scientific principles and current research and knowledge in order to meet the present and future health service needs of the people of Iraq. The quality of nursing education and services will improve through curriculum revision in colleges and institutions and by upgrading nurses in service through continuing education. As valued team members, nurses will contribute to the development of healthcare in collaboration with other members of the health team and its related sectors with the ultimate goal of improving the health and quality of life of the Iraqi people.

Goal

Improve nursing and midwifery care in Iraq

Strategies and Objectives to Meet Nursing Needs

1. Leadership in Nursing
 - a. Improve leadership by nurses in the Iraq Health System
2. Quality of Nursing Education
 - a. Improve the quality of education for nursing and midwifery
 - b. Improve the quality of nursing education through curriculum revision
 - c. Improve the quality of nursing educators
 - d. Improve the quality of educational materials for nursing and midwifery
 - e. Improve the quality of nursing libraries
 - f. Improve the quality of clinical training for nursing and midwifery
 - g. Improve the quality and safety of the environment in nursing and midwifery schools
3. Capacity in Nursing Education
 - a. Increase the number of nurses and midwives graduating from existing programs at Technical Institutes.

- b. Increase the number of nurses and midwives graduating from existing programs at Colleges and Universities.
 - c. Develop new programs for nursing at Technical Institutes and Colleges.
- 4. Opportunities for Foreign Study
 - a. Develop a program with four years scholarships for an Iraqi student to study nursing in a foreign nursing college or university
 - b. Develop a program with fellowships for six to twelve months for an Iraqi nurse to study some aspect of nursing in a foreign nursing college or university
 - c. Develop short exchange programs, for one to three months, for an Iraqi nurse to study some aspect of nursing in a foreign nursing college, university or hospital
 - d. Develop an exchange program for foreign nurses to teach nursing or related subjects in an Iraqi nursing college, university or hospital
- 5. Health Care Policy and Nursing
 - a. Improve the role of nurses and midwives in developing health care policy
- 6. Regulation and Licensing
 - a. Develop a system to regulate and license nursing and midwifery in Iraq
- 7. Quality of Clinical Care
 - a. Improve the quality of clinical services given by nurses and midwives
 - b. Improve the quality of nursing care in primary health care, community health and health visitor
 - c. Improve the quality of nursing and midwifery through performance management
 - d. Improve the quality and safety of the clinical environment for nursing and midwifery
- 8. Quality of Continuing Education
 - a. Improve the quality of nursing and midwifery care through continuing education
- 9. Image and Status of Nursing
 - a. Improve the professional image and social status of nurses and midwives
 - b. Improve the professional stature of nursing through a National Nursing Association
- 10. Clinical Research
 - a. Improve the quality of nursing and midwifery through clinical research which is evidence based.
- 11. Nursing in Human Resource System

- a. Improve the utilization of nurses and midwives through human resource planning
- b. Improve the compensation of nurses through an equitable and fair human resource system

Committee Structure to Meet Nursing Needs

I. Steering Committee

- A. Task Force on Leadership Programs for Nursing
- B. Committee on Nursing Education
 1. Subcommittee on Curriculum Revision for education and training
 3. Subcommittee on Continuing Nursing Education
 4. Subcommittee on In Service Education
 5. Subcommittee on Foreign Study Programs
 6. Subcommittee on Clinical Research
- C. Task Force on Capacity in Nursing Education
 1. Subcommittee to Expand Established Nursing Programs
 2. Subcommittee to Develop New Nursing Programs
- D. Committee on Standards for Nursing in education and clinical practice
- E. Task Force to Develop a National System for the Regulation and Licensure of Nursing in Iraq
- F. Task Force on the Image and Status of Nursing

Development Plan for Nursing and Midwifery in Iraq: 2004-2008

RA = Responsible Agency

Goal	Objectives	Activities	RA	Performance Indicators
1. Leadership in Nursing Improve nursing and midwifery care in Iraq	Promote leadership by nurses in the Iraq Health System	The Task Force on Leadership in Nursing will develop a leadership plan with programs and oversee implementation of the plan	MOH	
		Establish a Directorate or Special Advisor for Nursing with decision making power in the MOH	MOH	
		Strengthen the presence of Nursing in the MOH and DOH	MOH	
		Develop a leadership voice for nurses through the Iraq Nurses Association to speak on social, economic and health issues		
		Appoint nurse leaders as Deans of Nursing Colleges and Heads of Nursing Institutes	MOHE	
		Develop management training programs for nurses	MOH, MOHE	
		Develop leadership training programs for nurses	MOH, MOHE	
		Encourage nurses to work as administrators in clinics and hospitals	MOH	

		Develop a system for mentorship by nursing leaders throughout Iraq	MOH, MOHE	
		Develop a national database of nursing experts in education, clinical care and management	MOH, MOHE	
		Develop a Think Tank for Nursing to advise the Director of Nursing in MOH on policy, plans and programs	MOH, MOHE	
2. Quality of Nursing Education Improve nursing and midwifery care in Iraq	Improve the quality of education for nursing and midwifery	The Committee on Nursing Education will coordinate activities in MOHE and MOH so that nursing education meets standards and needs in the health system	MOH, MOHE	
		The Committee on Standards for Nursing will develop standards for nursing education and clinical training	MOH, MOHE	National standards for nursing education and clinical training are approved by appropriate agencies
		The Committee on Nursing Education will also develop standards and criteria for selection of nursing faculty and students	MOHE	
		Improve educational quality through pairing of nursing technical institutes and colleges regionally, nationally and internationally	MOHE	
Improve nursing and midwifery care in Iraq	Improve the quality of nursing education through curriculum revision	A Subcommittee on Curriculum Revision will develop a standard national curriculum for nursing, midwifery and other specialty training	MOHE	National curriculum for nursing is approved by appropriate agencies

Improve nursing and midwifery care in Iraq	Improve the quality of nursing educators	Curriculum should be oriented toward primary health care and holistic nursing approach as advocated in the health system reform	MOH, MOHE	Number of nurse educators who complete training	
		Conduct national and governorate workshops on standards for nursing education and curriculum revision	MOH, MOHE		
		Develop programs to train nurses in participatory education methods at the Technical Institute and University levels	MOHE		
		Develop programs to train nurses to be nursing specialty educators at the Technical Institute and University levels			
		Expand access to programs on research methodology at the Technical Institute and University levels	MOHE		Number of nurse educators who complete training
		Develop a national database of nursing experts in education, clinical care and management	MOH, MOHE		
		Utilize the network through the database and the pairing of educational institutions to improve the quality of nursing education	MOH, MOHE		
Improve nursing and midwifery care in Iraq	Improve the quality of educational materials for nursing and midwifery	The Committee on Nursing education will assess the current status of nursing educational materials and identify needs	MOH, MOHE		
		Update the educational materials and develop	MOH, MOHE		

		new ones as needed		
Improve nursing and midwifery care in Iraq	Improve the quality of nursing libraries	Provide relevant health, nursing and midwifery texts, manuals in Arabic	MOHE	Number of books provided
		Provide relevant nursing journals in Arabic	MOHE	Number of journals provided
		The Committee on Nursing Education will assess the current status of nursing libraries and identify needs	MOHE	
		Expand existing nursing libraries, and establish new ones if needed	MOHE	
		Expand the reference collection of health, nursing, midwifery textbooks, journals and audiovisual aids	MOHE	Number of books and journals provided
		Provide computers and internet access	MOHE	Number of computers provided
Improve nursing and midwifery care in Iraq	Improve the quality of clinical training for nursing and midwifery	The Committee on Nursing Education will coordinate activities between MOH and MOHE and oversee the clinical training of nurses and midwives	MOH, MOHE	
		Integrate the national standards for nursing education and clinical training into the health care sites for training	MOH, MOHE	
		Develop manuals on clinical training for nursing instructors and students	MOHE	
		Develop training programs for clinical nurses to become better educators in the clinical setting	MOH	Number of clinical nurses who complete the training

Improve nursing and midwifery care in Iraq	Improve the quality and safety of the environment in nursing and midwifery schools	Develop training programs on clinical learning and student evaluation to coordinate faculty and service preceptors	MOH, MOHE	
		Provide equipment and supplies for clinical training as needed	MOH	
		Assess the current status of the physical facilities in nursing schools and identify needs in Iraq	MOHE	
		Develop a facility renovation list based on current condition and need, ie., those buildings in the worst condition have the highest priority for repair	MOHE	Number of nursing schools renovated
		Develop community based learning facilities	MOH	
		Provide equipment and supplies necessary for nursing education - especially for nursing skill labs, computer labs and English labs	MOHE	Number of computers and other equipment provided
		Develop programs to train nurses and staff on the appropriate and safe use of equipment		
		Establish nursing dormitories for each nursing school	MOHE	
		Develop safety programs and provide safety training for students and faculty	MOHE	
Provide transportation for students and faculty	MOHE			
3. Capacity of Nursing				

Education Improve nursing and midwifery care in Iraq	Increase the number of nurses and midwives graduating from Technical Institutes and Universities	The Task Force on Capacity in Nursing Education will coordinate activities in MOHE and MOH so that nursing education meets the needs in the health system	MOH, MOHE	Number of new students entering and completing a technical or university nursing program
		Establish new schools for nursing at the Technical and University levels	MOH, MOHE	
		New nursing schools should be distributed according to need, ie, in those governorates which have a critical shortage of nurses or midwives	MOH	
		Expand existing nursing programs at the Technical Institute and University levels	MOH, MOHE	
		Develop new programs for specialty nursing such as midwifery, pediatric, psychiatric, community health, school nurse, anesthesia and critical care nursing at the Technical Institute and University levels	MOH, MOHE	
		Develop new nursing programs so that skilled nurses can upgrade their skills and obtain a technical or university degree	MOH, MOHE	
		Develop new midwifery programs so that skilled or unskilled midwives can upgrade their skills and obtain a technical or university degree	MOH, MOHE	Number of skilled or unskilled midwives enrolled in technical or university midwifery programs
		Draft and adopt laws so the midwives can enroll in nursing programs to upgrade their midwifery		

		training	
		Provide financial incentives for skilled nurses, skilled and unskilled midwives to enroll and obtain a technical or university degree	MOH
		Expand educational capacity through pairing of nursing technical institutes and colleges regionally, nationally and internationally	MOHE
		Explore partnerships with medical schools to establish new schools such as the Basra School of Medicine and Nursing	MOHE
		Develop a transition plan for closing the current MOH nursing schools at the secondary and intermediate levels	MOH
		Encourage graduates of nursing high schools to enroll in nursing colleges and universities	
		Timeline for closing any MOH nursing schools should be based on actual timeline for starting new MOHE programs at the technical or university level	MOH, MOHE
4. Foreign Study Program Improve nursing and midwifery care in Iraq	Improve the quality of nursing education through foreign study	The Subcommittee on Foreign Study Programs will coordinate scholarships, fellowships and exchange program with foreign institutions	MOH, MOHE

<p>5. Health Care Policy and Nursing Improve nursing and midwifery care in Iraq</p>		Develop a program of 4 year scholarships for Iraqi students to study nursing in a foreign nursing college or univeristy through pairing with these institutions	MOHE	Number of students participating in foreign scholarships
		Develop a program of 6 to 12 month fellowships for Iraqi nurses to study some aspect of nursing in a foreign nursing college or univeristy	MOH, MOHE	Number of nurses participating in foreign fellowships
		Develop a program of 1 to 3 month exchange programs for Iraqi nurses to study some aspect of nursing in a foreign nursing college, univeristy or hospital	MOH, MOHE	Number of nurses participating in foreign exchange programs
		Fellowship and exchange programs would include such subjects as nursing education, clinical training, clinical care, research design, regulation & licensing, and health care policy	MOH, MOHE	
		Provide 6 to 12 month exchange programs for foreign nurses to teach nursing or related subjects in an Iraqi nursing college, university or hospital	MOH, MOHE	Number of foreign nurses teaching in an Iraqi institution
	Improve the role of nurses and midwives in developing health care policy	Develop national nursing policies and plans to strengthen the role of nursing in the Iraqi Health System	MOH	
		Integrate the national nursing policies into the Iraqi national health policies	MOH	

		Integrate the national nursing plan into the plan for the Iraqi health system	MOH	
		Strengthen the presence of Nursing Department in the MOH and at the Governorate levels	MOH	
		Use the Iraqi Nursing Association as a national nursing voice on health care policy		
		Develop a national database of nursing experts in education, clinical care and management	MOH, MOHE	
		Develop a Think Tank for Nursing to advise the MOH Director of Nursing on policy, plans and activities	MOH, MOHE	
		Establish a newsletter to communicate nursing policies, plans and activities from the MOH Nursing Department to nurses and other health professionals	MOH	
6. Regulation and Licensure Improve nursing and midwifery care in Iraq	Ensure the quality of nursing and midwifery care through regulation and licensing	The Task Force on Regulation and Licensure will design a system to regulate and license nursing in Iraq	MOH, MOHE INA	
		The National Nursing Council will implement the system to regulate and license nursing in Iraq	MOH, MOHE INA	National agency to regulate and license nurses and midwives

		Establish clear definitions and qualifications for the practice of basic nursing and nursing specialties such as midwifery, pediatric, community health, anesthesia and critical care nursing	MOH, MOHE INA	
		Establish a system for accrediting educational programs for nursing and nursing specialties	MOH, MOHE INA	
		Establish criteria to demonstrate qualification for nursing and obtain an initial nursing license	MOH, MOHE INA	
		Establish criteria to demonstrate continuing competency and qualification for nursing and to renew a nursing license	MOH, MOHE INA	
		Establish criteria to demonstrate incompetency or malpractice in nursing and to suspend, deny or revoke a nursing license	MOH, MOHE INA	
		Provide due process with an appeals board for cases in which a nursing license is suspended, denied or revoked	MOH, MOHE INA	
		Conduct information sessions on a local level to teach nurses about the new regulation and licensing system	MOH, MOHE INA	
7. Quality of Clinical Care Improve nursing and midwifery care in Iraq	Improve the quality of clinical services given by nurses and midwives	The Committee on Standards for Nursing will develop standards for clinical practice by nurses and midwives in the health care system	MOH	The standards for clinical practice by nurses and midwives are approved by the appropriate agencies

Improve nursing and midwifery care in Iraq	Improve the quality of nursing care in Primary Health Care Centers	Develop nursing and midwifery policy manuals for hospitals and clinics	MOH	
		Develop nursing and midwifery procedure manuals for hospitals and clinics	MOH	
		Organize governorate and local workshops on clinical practice standards for nurses and midwives	MOH	
		Develop training programs for nurses to upgrade their clinical knowledge and skills	MOH	Number of nurses who complete the training program
		Design and implement a nursing record to document patient care in the medical record	MOH	
		Provide information sessions for nurses to learn how to complete the nursing record	MOH	Number of nurses who attend the information session
		Establish model nursing units or wards in a hospital and use them as teaching sites	MOH	
		Establish community health nursing services within the primary health care system (PHC)	MOH	
		Define an expanded role for nurses in primary health care centers and communities	MOH	
		Develop training programs for nurses to learn community and primary health care knowledge, skills	MOH	Number of nurses who complete the training program
		Establish a model clinic for primary health care nursing and use it as a	MOH	

Improve nursing and midwifery care in Iraq	Improve the quality of nursing and midwifery care through performance management	teaching site		
		The Committee on Standards for Nursing will develop standards for performance management, appraisal and evaluation forms	MOH	
		Establish nursing structures within a hospital or clinic to insure quality of nursing care	MOH	
		Develop an organogram with functions to define the nursing structures in the hospital	MOH	
		Develop salary schemes and career ladders which are consistent with professional development	MOH	
		Provide incentives for nurses to perform effectively	MOH	
		Develop training programs for nurse managers on the implementation of a performance management system	MOH	
Improve nursing and midwifery care in Iraq	Improve the quality and safety of the clinical environment for nursing and midwifery	Provide information sessions for nurses to learn about performance management	MOH	Number of nurses who attend the information sessions
		Develop a list of essential equipment and supplies needed to provide nursing services for different types of care	MOH	
		Develop training programs for nurses to learn the appropriate and safe use of medical equipment	MOH	

		Develop clinical safety programs such as universal precautions	MOH
		Provide clinical safety training for nurses and other clinical staff members	MOH
		Establish flexible working hours	MOH
		Provide transportation for nurses during the first year	MOH
8. Continuing Nursing Education			
Improve nursing and midwifery care in Iraq	Improve the quality of nursing and midwifery care through continuing nursing education	A Subcommittee on Continuing Nursing Education will authorize standards and a plan for CNE	MOH, MOHE
		Develop a curriculum for continuing nursing education	MOH, MOHE
		Develop a curriculum for in-service education programs	MOH
		Develop a program to train CNE instructors	
		Organize annual nursing conferences on a governorate, regional and national level	MOH
		Assess the condition and cost of renovating the four Continuing Education Centers in Baghdad, Basra, Karbala and Suleimaniya	MOH, MOHE
		Renovate the four centers, according to the recommendation from the CNE planning committee	MOH, MOHE

		Equip the four centers, according to the recommendations from the CNE planning committee	MOH, MOHE	
		Renovate the dormitories near the four centers, according to the recommendation from the CNE planning committee	MOH, MOHE	
9. Image and Status of Nursing				
Improve nursing and midwifery care in Iraq	Improve the professional image and social status of nurses and midwives	The Task Force on the Image and Status of Nursing will plan a campaign to promote nursing, improve its image and will oversee the implementation of this campaign	MOH, MOHE	
		Hire public relations consultant to investigate this problem and develop media campaign to improve the image of nurses and midwives	MOH	Number of people who consider nursing a good career before and after the campaign
		Establish program to actively recruit qualified high school students and high school graduates for nursing career	MOHE	Number of candidates applying for admission to nursing school before and after the campaign
		Offer allowances or stipends for nursing students to attract good candidates to nursing schools	MOHE	
		Raise salaries to attract good candidates to nursing career	MOH	
		Establish awards for excellent nurses in clinics, hospitals and at Governorate and National level	MOH	

		Plan a celebration for Nurses Day with national and local activities	MOH	
		Develop hospital based programs to promote the important role of nursing in quality of care and to promote teamwork of all staff	MOH, MOHE	
		Develop a program to mobilize community leaders to support nursing	MOH	
		Develop a community youth program which promotes nursing as a career	MOH	
		Provide uniforms for nurses and nursing students	MOH, MOHE	
Improve nursing and midwifery care in Iraq	Improve the professional stature of nursing through a National Nursing Association	Establish one Iraq Nurses Association (INA) for all nurses and midwives	MOT? MOI?	Number of Members in an Iraq Nurses Association
		Publish a nursing journal to inform members about best clinical care practices, research studies, nursing policy and plans		
		Develop a national voice for nurses through the Association to speak on social, economic, health issues and professional development		
		Establish sections within the Association to support and promote specialty nursing, such as midwifery, pediatric, community health, anesthesia and critical care		

<p>10. Clinical Research Improve nursing and midwifery care in Iraq</p>	<p>Improve the quality of nursing and midwifery care through clinical research</p>	<p>Develop INA standards for nursing education, clinical service and ethics</p> <p>A Clinical Research Subcommittee will facilitate and oversee nursing research in the clinical setting, and develop a culture of nursing and health research</p> <p>Conduct awareness sessions for nurses on the utilization of research for evidence based nursing care</p> <p>Expand access to programs on research methodology in the clinical setting</p> <p>Develop a liaison system to link clinical researchers and educational researchers on a local, regional, national and international basis</p> <p>Promote joint research projects between clinical researchers and other researchers regionally, nationally, internationally</p> <p>Promote participation in regional, national and international nursing conferences</p> <p>Disseminate the research findings through the MOH newsletter, nursing journals, seminars and conferences</p>	<p>INA approved national standards for nursing education, clinical service and ethics</p> <p>MOH, MOHE</p> <p>MOH</p> <p>MOH, MOHE</p> <p>MOH, MOHE</p> <p>MOH, MOHE</p> <p>MOH, MOHE</p> <p>MOH, MOHE</p> <p>MOH, MOHE</p>	<p>INA approved national standards for nursing education, clinical service and ethics</p> <p>Number of clinical research projects presented at conferences</p> <p>Number of clinical research projects described in nursing journals</p>
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		Support the translation of research findings into policies designed to improve nursing education and clinical service	MOH, MOHE
11. Human Resource System			
Improve nursing and midwifery care in Iraq	Improve the utilization of nurses and midwives through human resource planning	Establish access to the human resource database on nursing as a subset of the entire health system employee base	MOH
		Maintain integrity of the system through utilization of the human resource database for nursing information needs	MOH
Improve nursing and midwifery care in Iraq	Improve the compensation of nurses through an equitable and fair human resource system	Distribute the template of job descriptions and utilize these descriptions as the basis for performance management	MOH
		Adapt these job descriptions to the local health facility	MOH
		Develop a system for performance management and evaluation	MOH
		Salary schedules and career ladders should be consistent with professional development	MOH
		Salary schedule should provide high nursing salary to attract and keep qualified nurses	MOH
		Salary system should include incentives for effective performance	MOH

Offer flexible working hours to attract and keep qualified nurses

MOH

Appendix 1

Educational Institutions for Nursing and Midwifery in All of Iraq Including Kurdish Govenorates

Type of Institution	Prerequisite Education	Time Required for Degree	Supervising Authority	Number of Schools	Estimated Number of Enrolled Students
Nursing College	12 years of general education	4 years	Ministry of Higher Education	5	600
Technical Institutes – Nursing Section	12 years of general education	2 years	Ministry of Higher Education	15	1600
Female Nursing Secondary School	9 years of general education	3 years	Ministry of Health	32	450
Male Nursing Secondary School	9 years of general education	3 years	Ministry of Health	15	1500
Female Midwifery Secondary School	9 years of general education	3 years	Ministry of Health	9	200
Female Nursing Intermediate School	6 years of general education	3 years	Ministry of Health	58	900
Estimate of Total Number of Enrolled Students					5250

Location of Nursing Colleges: *Baghdad, Mosul, Kirkuk, Erbil, Suleimaniya*

Location of Technical Institutes: *Baghdad, Ninewa, Karbala, An Najaf, Basra, Diwaniya, Salah Al Din, Diyala, Kut, Babil, Kirkuk, Al Amara, Al Ramadi, Al Muthana*

Appendix 1

Educational Institutions for Nursing and Midwifery in Iraq

<i>College of Nursing</i>	Location	Number of Graduates in 2002	Number of Graduates in 2003
Baghdad University – College of Nursing	Baghdad	76	101
Mosul University – College of Nursing	Mosul	51	65
Kirkuk University – College of Nursing	Kirkuk	2 nd year after opening	3 rd year after opening
Salahaddin University – College of Nursing	Erbil		
Suleimaniya University – College of Nursing	Suleimaniya		
Total Graduates		127	166

<i>Medical Technical Institutes, Nursing Section</i>	Location	Number of Graduates in 2002	Number of Graduates in 2003
Technical Institute – Baghdad	Baghdad	151	91
Technical Institute – Mosul	Ninewa	75	57
Technical Institute – Kufa	An Najaf	64	37
Technical Institute – Thi-Qar	Nasiriya	60	90
Technical Institute – Basra	Basra	56	9
Technical Institute – Qadisiya	Diwaniya	99	72
Technical Institute – Baquba	Diyala	45	35
Technical Institute – Babil	Babil	78	63
Technical Institute – Kirkuk	Kirkuk	61	44
Technical Institute – Maysan	Al Amara	48	65
Technical Institute – Al Samawa	Al Muthana	14	14
<i>Technical Institutes – Kurdish Governorates</i>			
Total Graduates		751	577
Estimate of Total Graduates Including the Kurdish Governorates		900 (estimate)	750 (estimate)

Appendix 2

Nursing Workforce in All of Iraq Including Kurdish Governorates

Educational Level	Job Title	Number of Working Nurses		Total Number of Working Nurses
		Male	Female	
College of Nursing, 4 years education	Graduate Nurse	151	153	304
<i>Technical Institute</i> , 2 years education	Technical Nurse	2936	1366	4322
Nursing High School, 3 years education	Skilled Nurse	5293	1206	6499
Midwifery High School, 3 years education	Skilled Midwife	0	324	324
Nursing Primary School, 3 years education	Nurse	78	4015	4093
Nursing Auxiliary, 6 months training	Nursing Assistant	1224	977	2201
Total		9682	8061	17,743

These numbers do not include the former military and private sector nurses

The estimated number of former military nurses is 12,000.

The estimated number of private sector nurses is 200.

Appendix 2

Nursing Workforce in Iraq Excluding Kurdish Governorates

Educational Level	Job Title	Number of Working Nurses		Total Number of Working Nurses
		Male	Female	
College of Nursing	Graduate Nurse	129	114	243
<i>Technical Institute</i>	Technical Nurse	2530	590	3120
Nursing High School	Skilled Nurse	4008	507	4515
Midwifery High School	Skilled Midwife	0	144	144
Nursing Primary School	Nurse	78	2487	2565
Nursing Course	Nursing Assistant	871	553	1424
Total		7616	4395	12,011

These numbers do not include the former military and private sector nurses

The estimated number of former military nurses is 12,000.

The estimated number of private sector nurses is 200.

Glossary

The glossary of terms used in this document is based on that used by the World Health Organization and the International Council of Nurses. It includes additional terms as used in the Iraq Health Care System.

Competence	A level of performance demonstrating the effective application of knowledge, skill and judgment
Continuing education or Continuing professional development (CPD)	The whole range of learning activities, from the time of initial qualification until retirement, undertaken by the individual for the benefit of improving the health of the public and professional development
Governance	Governance, meaning the process of controlling or guiding the profession is preferred by some who find the world regulation restrictive and legalistic. See Regulation .
Graduate Nurse	The graduate nurse has completed a program at the baccalaureate level in a college or university and has undergone a minimum of 4 years nursing education after completing 12 years of general education.
Graduate studies	A formal education program which takes place after a first baccalaureate degree. It leads to a master or PhD degree.
Holistic nursing	An approach that integrates bio-psycho-social and spiritual aspects of nursing care of the individual, family and community
Job description	Identification of the qualifications, roles, responsibilities and accountability required for a position in an organization
Legislation	Law(s) or the process of making law. Primary legislation refers to government acts and defines broad powers. Secondary legislation (rules, orders) defines further details of the powers enshrined in primary legislation.
Licensure	The granting through statute, by a government body, of authority to practice a profession and to use an exclusive title, to persons who meet established standards of education and competence. Sometimes used synonymously (and often inaccurately) with the term registration. See Registration .
Multidisciplinary	An approach in which different professions work together to achieve common goals.

Nursing practice act	The legislation, which underpins the structure, processes and outcomes of the nursing (and/or midwifery) regulation, usually incorporating the structure and functions of the regulatory bodies and standards for education, practice and discipline/conduct.
Nurse specialist	A nurse prepared beyond the level of a nurse generalist and authorized to practice as a specialist with advanced expertise in a branch of the nursing field. Specialty practice includes clinical teaching, administration, research and consultant roles. Post-basic nursing education for specialty practice is a formally recognized program of study built on the general education of the nurse and provides the content and the experience to ensure competency in specialty practice.
Nursing and Midwifery Services	Services that consist of caring for, supporting and comforting clients; continuously assessing and monitoring health needs and responses to interventions; advocacy for and education of the clients and communities; and delivering and coordinating health services across the care spectrum.
Policy	A course of principle of action adopted or proposed by a significant body, organization, government, etc.
Post-basic nursing Program	A specialty nursing program which is one calendar year or three academic semesters in length and is undertaken after completion of the general nursing program. It focuses on preparing specialist nurses who are capable of working in specialized secondary and tertiary care units and in all primary health settings. See Nurse Specialist .
Professional development	Professional development in nursing is defined as the establishment of higher level of competence in the range of knowledge and skills needed to perform duties or support interventions, be they in clinical practice, management, education, research, regulation or policy-making.
Professional nurse	The professional nurse is a graduate of the university B.Sc. program in nursing, who has undergone a minimum of 4 years nursing education after completing 12 years of general education.
Professional regulation	An umbrella term, which should incorporate reference to all the structures, processes and outcomes, associated with the governance of the profession. Often and inaccurately used in a narrow, reductionist sense, solely in relation to professional discipline.
Registration	Entry of a name in a professional register, after meeting certain standards of education and/or practice. Usually a requirement for professional practice. Not necessarily synonymous with licensure. See Licensure .

Regulation	All of those legitimate and appropriate means (governmental, professional, private and individual) whereby order, identity, consistency and control are brought to the profession. The profession and its members are defined; the scope of practice is determined; standards of education and of ethical and competent practice are set; and systems of accountability are established through these means. See Governance .
Regulatory system	All the mechanical structures associated with the regulation of a profession. A variety of different systems can achieve effective regulation, albeit based on similar principles.
Results based approach	The success of a plan or strategy is judged by the achievement of previously identified observable outcomes or products. It uses the result-based management, which is a process of inter-related elements of planning, monitoring and evaluation.
Scope of practice	The range of activities that can be carried out by a nurse. It defines the limits of practice of a licensed/registered nurse.
Skilled Nurse or Midwife	The skilled nurse or midwife is a graduate of a program at the high school level who has undergone a minimum of 3 years nursing or midwifery education after completing 9 years of general education.
Standard	The desirable and achievable level of performance against which actual practice is compared.
Support workers (auxiliary to nursing)	This term refers to all unlicensed assistive personnel engaged in nursing activities.
Technical Nurse or Midwife	The technical nurse is a graduate of a program at the diploma or associate degree level who has undergone a minimum of 2 years nursing or midwifery education after completing 12 years of general education.
Training of Trainers (TOT)	A system of preparing master trainers to be responsible in another area that they have been trained.

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