

## THE EVOLUTION AND EDUCATIONAL IMPERATIVES OF COMMUNITY HEALTH NURSING IN SAUDI ARABIA

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### Abstract

Community health nursing plays a pivotal role in Saudi Arabia's evolving healthcare landscape, serving as a cornerstone of primary healthcare delivery and contributing significantly to public health outcomes. This study examines the historical development, current practices, and educational imperatives of community health nursing in Saudi Arabia. Drawing on recent research, including Aljohani's (2024) study on community health nursing practices and learning needs, this article explores the challenges and opportunities facing community health nurses in the Kingdom. The analysis reveals that Saudi Arabia has a relatively young community nursing workforce with significant educational needs, particularly in utilizing health education theories, health informatics, and community assessment methodologies. As Saudi Arabia pursues its Vision 2030 healthcare transformation goals, enhancing the educational preparation and professional development of community health nurses emerges as a critical imperative. This article provides recommendations for strengthening community health nursing practice and education to align with international standards and meet the evolving healthcare needs of the Saudi population.

**Keywords:** community health nursing, Saudi Arabia, primary healthcare, nursing education, healthcare transformation, Vision 2030

### INTRODUCTION

Community health nursing represents a vital component of healthcare systems worldwide, providing essential services that promote health, prevent disease, and improve the overall wellbeing of populations (World Health Organization [WHO], 2023). In Saudi Arabia, community health nursing has evolved significantly over recent decades, paralleling the country's broader healthcare transformation efforts and playing an increasingly important role in achieving national health objectives (Aljohani, 2024).

As Saudi Arabia pursues its ambitious Vision 2030 agenda, which includes comprehensive healthcare reforms aimed at improving quality, accessibility, and efficiency, community health nurses stand at the forefront of these changes (Saudi Vision, 2021). Positioned within Primary Health Care Centers (PHCCs) across the Kingdom, these nurses serve as essential healthcare providers, educators, and advocates for diverse communities (Saudi Ministry of Health [MOH], 2018).

Despite their critical importance, community health nursing in Saudi Arabia faces numerous challenges, including workforce development issues, educational gaps, and evolving role expectations (Al Khashan et al., 2021). Recent research by Aljohani (2024) highlights significant learning needs among community health nurses in the Kingdom, particularly in areas such as health education theory, health informatics, community assessment, and research participation.

This study examines the evolution of community health nursing in Saudi Arabia, with particular attention to the educational imperatives that must be addressed to strengthen this vital profession. Drawing on current research and contextualizing it within Saudi Arabia's healthcare transformation efforts, this analysis provides insights into the challenges and opportunities facing community health nursing in the Kingdom and offers recommendations for enhancing nursing education and practice to meet evolving healthcare needs.

## **Historical Development of Community Health Nursing in Saudi Arabia**

### **Early Foundations**

The development of community health nursing in Saudi Arabia is intertwined with the broader evolution of the Saudi healthcare system. Prior to the establishment of the Ministry of Health in 1950, healthcare in Saudi Arabia was primarily traditional, with limited formal nursing services (Al Khashan et al., 2021). The discovery of oil in the 1930s and subsequent economic growth provided resources for healthcare development, but formal nursing education and community-based care emerged relatively late compared to Western countries.

The first nursing school in Saudi Arabia was established in 1958, marking the beginning of formalized nursing education in the Kingdom. However, the initial focus was on hospital-based care rather than community health nursing (Alruwaili et al., 2023). Throughout the 1960s and 1970s, the Saudi healthcare system expanded significantly, but remained heavily reliant on expatriate healthcare workers, including nurses from countries such as the Philippines, India, and Egypt.

### **Development of Primary Healthcare System**

A significant milestone in the evolution of community health nursing in Saudi Arabia was the establishment of a comprehensive primary healthcare system in the 1980s, following the Alma-Ata Declaration of 1978, which emphasized primary healthcare as essential for achieving "Health for All" (Al Khashan et al., 2021). This period saw the proliferation of PHCCs across the Kingdom, creating new settings and opportunities for community health nursing practice.

By the 1990s, the Saudi Ministry of Health had established hundreds of PHCCs throughout the country, providing preventive and basic curative services to communities. These centers created new roles for nurses beyond the hospital setting, although the specific identity and scope of community health nursing remained somewhat undefined compared to more established nursing specialties (Alruwaili et al., 2023).

### **Saudization and Nursing Development**

The late 1990s and early 2000s witnessed increased efforts toward "Saudization" of the healthcare workforce, including nursing. This nationalization initiative aimed to reduce dependency on expatriate workers and create employment opportunities for Saudi citizens (Al Khashan et al., 2021). For nursing, this meant expanding educational programs and creating incentives for Saudi nationals to enter the profession.

Despite these efforts, nursing in Saudi Arabia, particularly community health nursing, continued to face challenges related to professional identity, social perceptions, and educational preparation. Cultural factors, including gender segregation norms and the social status of nursing, influenced the development of the profession and the attraction of Saudi nationals to community health nursing roles (Alruwaili et al., 2023).

### **Recent Transformation Efforts**

The past decade has seen accelerated transformation of healthcare in Saudi Arabia, with significant implications for community health nursing. The launch of Saudi Vision 2030 in 2016 included the Health Sector Transformation Program, which emphasizes preventive care, quality improvement, and digital transformation (Saudi Vision, 2021). These initiatives have elevated the importance of primary healthcare and, by extension, community health nursing.

Recent reforms include the establishment of the Nartqy program for quality improvement in healthcare centers and the Adaá program, a monitoring dashboard to facilitate quality improvement decision-making (Saudi MOH, 2018). Digital transformation initiatives, including the Mawid electronic appointment system and the Wasfati electronic prescription service, have changed how community health nurses interact with patients and manage care (Aljohani, 2024).

These developments represent significant progress but also create new challenges and educational imperatives for community health nurses who must adapt to evolving roles, technologies, and expectations within Saudi Arabia's transforming healthcare landscape.

## **Current State of Community Health Nursing in Saudi Arabia**

### **Demographic Profile**

Recent research provides insights into the demographic characteristics of community health nurses in Saudi Arabia. According to Aljohani (2024), the community nursing workforce in Saudi Arabia is relatively young, with a mean age of 35 years, compared to 46 years in the United States and 42.5 years in Australia (National Council of State Boards of Nursing, 2022; Australian Health and Aged Care, 2023). This younger workforce may bring energy and adaptability but may also have less experience and require more educational support.

Educational preparation is a significant concern, with 67% of community health nurses holding diploma-level qualifications rather than bachelor's degrees (Aljohani, 2024). This contrasts with international trends toward higher educational preparation for nurses. The high proportion of diploma-prepared nurses may impact the scope and quality of community health nursing practice and the profession's ability to fulfill expanded roles in preventive care and health promotion.

### **Infrastructure and Resources**

Saudi Arabia has invested significantly in healthcare infrastructure, including PHCCs where community health nurses practice. As of 2022, there were 2,120 PHCCs serving a population of approximately 32.2 million citizens (Saudi General Authority for Statistics, 2022). Health resources per 10,000 population include 0.66 PHCCs, 32.7 physicians, and 60.9 nurses (Saudi MOH, 2023).

Despite the increase in the physician ratio since 2018, the nurse ratio has decreased slightly, reflecting challenges in maintaining an adequate nursing workforce amid competing demands from the acute care sector and limitations in national nursing production pipelines (Aljohani, 2024). This decline in the nursing workforce occurs at a time when community health services are increasingly important to Saudi Arabia's healthcare strategy.

The distribution of healthcare resources across the Kingdom varies, with major cities such as Riyadh, Jeddah, and Madinah having higher concentrations of facilities and personnel. In 2022, PHCC visits for these cities were reported as 7,966,093 for Riyadh, 3,689,528 for Jeddah, and 3,968,919 for Madinah (Saudi MOH, 2023). This high volume of visits underscores the significant demands placed on community health nurses in these urban centers.

### **Current Practices and Roles**

Aljohani's (2024) research provides valuable insights into the current practices of community health nurses in Saudi Arabia. The study found that the most frequently performed activities include:

1. Health education
2. Supporting individuals unable to take action for themselves
3. Using health informatics to support nursing care
4. Applying different levels of health prevention interventions

These findings suggest that Saudi community health nurses are actively engaged in core preventive and supportive care activities, consistent with international nursing roles. The emphasis on health education aligns with similar findings from other countries, such as China, where health education and disease prevention are primary activities for community nurses (Ma et al., 2019).

The study also revealed less frequently performed activities, including:

1. Participating in research initiatives
2. Identifying community health needs
3. Utilizing epidemiological trends for improvement strategies
4. Accessing professional resources to assess community health nursing interventions

These gaps suggest limitations in the research, assessment, and evidence-based practice components of community health nursing in Saudi Arabia. The low participation in research activities mirrors findings from studies in other countries but represents a significant area for development if community health nursing in Saudi Arabia is to advance as a knowledge-based profession (Ma et al., 2019; Phelan et al., 2018).

### **Digital Transformation and Technology Integration**

A notable aspect of current community health nursing practice in Saudi Arabia is the integration of health informatics and digital technologies. The Saudi Ministry of Health has implemented several digital initiatives that directly impact community health nursing practice, including electronic medical record systems, telehealth services, and mobile health applications (Alruwaili et al., 2023).

Aljohani (2024) found that using health informatics to support nursing care was among the most frequently performed activities by community health nurses, reflecting the progress of Saudi Arabia's digital health transformation. This technological integration represents both an achievement and a challenge, as it requires continuous learning and adaptation from nurses who may have varying levels of digital literacy.

A systematic review by Alruwaili et al. (2023) highlighted the significant role of technology in enhancing community health nursing practice in Saudi Arabia, noting improvements in patient engagement, care delivery efficiency, and data management. However, the review also identified challenges related to technological infrastructure, user acceptance, and training needs that must be addressed for successful technology integration.

### **Educational Imperatives for Community Health Nursing**

#### **Identified Learning Needs**

Aljohani's (2024) research provides valuable insights into the educational needs of community health nurses in Saudi Arabia. The study identified several key areas where nurses expressed significant learning needs:

1. **Health Education Theories and Strategies:** Community health nurses indicated a strong need for education in health education theories and their practical application. This suggests that while health education is frequently performed, nurses may lack theoretical frameworks to optimize their educational interventions.
2. **Health Informatics:** Despite the frequent use of health informatics in practice, nurses expressed a need for further education in this area. This paradox likely reflects the rapid evolution of health information technologies and the challenge of keeping pace with these changes.
3. **Evaluation of Outcomes:** Nurses indicated learning needs related to evaluating individual, family, and community outcomes in partnership with healthcare team members. This suggests a gap in assessment and evaluation skills that are essential for evidence-based practice.
4. **Health Prevention Interventions:** Although applying different levels of health prevention interventions was among the most frequently performed activities, nurses still expressed learning needs in this area, suggesting a desire for more advanced or specialized knowledge.

These identified learning needs align with previous research on community health nursing education. Valaitis et al. (2014) and Akhtar-Danesh et al. (2010) developed and implemented questionnaires to assess community health nurses' learning needs in Canada, finding similar educational gaps related to health promotion, population health assessment, and policy development.

#### **Educational Level and Professional Development**

The high proportion of diploma-prepared nurses in Saudi community health nursing (67%) represents a significant educational imperative (Aljohani, 2024). International trends increasingly emphasize bachelor's-level preparation as the minimum educational requirement for professional nursing practice, particularly in community and public health roles that require independent judgment, critical thinking, and leadership skills.

The educational gap in Saudi community health nursing likely contributes to some of the practice limitations identified by Aljohani (2024), particularly in areas such as research participation, community assessment, and utilization of professional resources. These activities typically require advanced education and critical appraisal skills that may be underdeveloped in diploma-level nursing programs. Addressing this educational gap requires both immediate continuing education initiatives and longer-term strategies to increase the proportion of bachelor's-prepared nurses in community health settings. Governmental initiatives to support diploma nurses in pursuing bachelor's degrees would align with Saudi Vision 2030's emphasis on workforce development and healthcare quality improvement (Saudi Vision, 2021).

#### **Research Capacity and Evidence-Based Practice**

The limited participation in research activities among Saudi community health nurses represents a significant educational imperative. Aljohani (2024) found that participating in research invitations and research groups were among the least frequently performed activities by community health nurses. This gap in research engagement limits the profession's ability to generate context-specific evidence for practice and contribute to healthcare innovation.

Building research capacity among community health nurses requires educational interventions at multiple levels. Basic research literacy and evidence appraisal skills should be strengthened through continuing education, while opportunities for participation in research teams and projects should be expanded. Collaboration between academic institutions and PHCCs could create pathways for community health nurses to engage in applied research relevant to their practice settings.

The limited utilization of professional websites and resources to assess community health nursing interventions, as identified by Aljohani (2024), further underscores the need for educational initiatives that strengthen evidence-based practice skills and connect Saudi community health nurses with international professional networks and knowledge resources.

#### **Community Assessment and Population Health**

A notable gap in current practice is the limited identification of community health needs (Aljohani, 2024). Community assessment is a fundamental competency for community health nursing internationally, providing the foundation for population-focused interventions and resource allocation (Rayan-Gharra et al., 2022).

Educational initiatives to strengthen community assessment skills should incorporate contemporary frameworks such as the Dahlgren-Whitehead model of health determinants, which emphasizes the multiple layers of influence on health outcomes, from individual characteristics to broader socioeconomic conditions (Dahlgren & Whitehead, 2021). This model provides a comprehensive approach to understanding community health needs that goes beyond traditional biomedical perspectives. Developing stronger community assessment competencies would enable Saudi community health nurses to more effectively identify population health priorities, advocate for resources, and evaluate the impact of interventions. This aligns with Saudi Vision 2030's emphasis on preventive care and population health improvement (Saudi Vision, 2021).

### **Aligning Education with Saudi Vision 2030 and Global Standards**

#### **Saudi Vision 2030 and Healthcare Transformation**

Saudi Vision 2030 and its associated Health Sector Transformation Program represent ambitious plans to reform and improve healthcare in the Kingdom (Saudi Vision, 2021). These initiatives emphasize preventive care, quality improvement, digital transformation, and workforce development, all of which have significant implications for community health nursing education.

Educational imperatives for community health nursing must align with these national priorities. For example, the emphasis on preventive care underscores the need for stronger educational preparation in health promotion theories, behavior change strategies, and community-based interventions. The focus on quality improvement necessitates education in quality measurement, process improvement methodologies, and outcome evaluation.

Digital transformation initiatives such as electronic health records, telehealth, and mobile health applications create educational imperatives related to health informatics, digital literacy, and technology-enabled care models. Workforce development priorities highlight the need for educational pathways that advance the qualifications of existing community health nurses and attract new entrants to the profession.

#### **International Standards and Competencies**

Aligning Saudi community health nursing education with international standards and competencies would strengthen the profession and improve practice. Various international frameworks exist that could inform educational development, including the Canadian Community Health Nursing Standards of Practice referenced by Aljohani (2024).

These international standards typically emphasize competencies such as:

1. Health promotion and disease prevention
2. Community assessment and diagnosis
3. Policy development and advocacy
4. Partnership and collaboration
5. Evidence-based practice and research
6. Professional responsibility and accountability

Educational initiatives should aim to develop these core competencies while adapting them to the Saudi cultural, social, and healthcare context. This approach would strengthen the professional identity of community health nursing in Saudi Arabia while ensuring alignment with global best practices.

#### **Cultural Competence and Contextual Relevance**

While international standards provide valuable guidance, educational initiatives must be culturally competent and contextually relevant to Saudi Arabia. This includes consideration of:

1. **Islamic Principles:** Incorporating Islamic values and ethics that are fundamental to Saudi society and healthcare
2. **Cultural Practices:** Respecting traditional health beliefs and practices while promoting evidence-based care
3. **Gender Considerations:** Addressing gender-related issues in healthcare delivery and nursing education
4. **Family Structures:** Recognizing the central role of the family in Saudi healthcare decisions and support systems
5. **Linguistic Needs:** Ensuring educational materials and approaches are appropriate for Arabic-speaking learners

Rayan-Gharra et al. (2022) emphasized the importance of culturally sensitive approaches to community health assessment in diverse populations. This principle extends to educational initiatives for community



health nurses, which must be designed with sensitivity to Saudi cultural contexts while promoting evidence-based practice.

### **Recommendations for Strengthening Community Health Nursing Education Educational Pathway Development**

To address the educational imperatives identified in this analysis, several recommendations for educational pathway development emerge:

1. **Bridging Programs for Diploma Nurses:** Develop accessible, flexible bridging programs that enable diploma-prepared nurses to earn bachelor's degrees while continuing to work in community settings. These programs could utilize blended learning approaches combining online education with periodic in-person sessions.
2. **Specialized Community Health Nursing Certification:** Establish post-basic certification programs in community health nursing that provide specialized knowledge and skills for nurses already working in PHCCs. These certifications could address specific learning needs such as health education, community assessment, and health informatics.
3. **Graduate Education Pathways:** Develop master's-level programs in community health nursing to prepare advanced practice nurses, educators, and leaders in this specialty. These programs could be developed in collaboration with international universities to ensure high quality and global relevance.
4. **Continuing Professional Development:** Implement structured continuing professional development programs that address identified learning needs through short courses, workshops, and online learning modules. These should be accessible to nurses throughout the Kingdom, including those in remote areas.

### **Practice-Education Partnerships**

Strengthening the connection between education and practice environments would enhance community health nursing development:

1. **Academic-Practice Partnerships:** Foster formal collaborations between nursing schools and PHCCs to create learning opportunities, research initiatives, and quality improvement projects that benefit both education and practice.
2. **Clinical Preceptorship Programs:** Develop structured preceptorship programs that prepare experienced community health nurses to mentor students and new graduates, strengthening the clinical education component of nursing programs.
3. **Joint Appointments:** Create joint appointments for nursing faculty to practice in community settings and for expert clinicians to teach in academic programs, bridging the theory-practice gap.
4. **Learning Communities:** Establish communities of practice that bring together educators, researchers, and clinicians to address community health challenges through collaborative learning and innovation.

### **Technology-Enhanced Learning**

Leveraging technology for nursing education aligns with Saudi Arabia's digital transformation goals:

1. **Simulation and Virtual Reality:** Utilize simulation and virtual reality technologies to create realistic learning experiences for community health nursing students, particularly for scenarios that are difficult to encounter in clinical placements.
2. **Mobile Learning Platforms:** Develop mobile applications that provide just-in-time learning resources, clinical decision support, and continuing education for community health nurses in their practice settings.
3. **Telepreceptorship:** Implement telepreceptorship models that connect community health nursing students in remote areas with expert preceptors through video conferencing and other digital technologies.
4. **Learning Management Systems:** Utilize robust learning management systems to deliver standardized educational content to community health nurses throughout the Kingdom, with tracking of competency development and continuing education credits.

### **Research and Evidence-Based Practice**

Strengthening research capacity and evidence-based practice requires targeted educational initiatives:

1. **Research Methods Education:** Enhance research methods education in nursing curricula and continuing education programs, with specific applications to community health nursing practice.
2. **Journal Clubs and Evidence Reviews:** Implement journal clubs and evidence review sessions in PHCCs to develop critical appraisal skills and promote integration of research evidence into practice.

3. **Collaborative Research Networks:** Establish research networks that connect academic researchers, community health nurses, and other stakeholders to conduct relevant, practice-based research.
4. **Research Mentorship Programs:** Develop mentorship programs that pair novice community health nurse researchers with experienced researchers to build capacity for independent investigation.

### Implementation Challenges and Strategies

#### Workforce and Resource Constraints

Implementing educational initiatives for community health nursing faces several challenges:

1. **Nursing Shortage:** The existing nursing shortage in Saudi Arabia, particularly in community settings, makes it difficult for nurses to participate in educational programs while maintaining clinical responsibilities.
2. **Financial Resources:** Educational programs require significant financial investment for development, faculty, technology, and student support.
3. **Faculty Expertise:** There may be limited faculty with expertise in community health nursing education, particularly at advanced levels.
4. **Geographic Distribution:** The wide geographic distribution of community health nurses across the Kingdom creates challenges for delivering consistent educational programs.

Strategies to address these constraints include:

1. **Educational Release Time:** Establish policies that provide community health nurses with protected time for educational activities, supported by adequate staffing models.
2. **Scholarship Programs:** Expand scholarship programs for community health nursing education at all levels, from bachelor's completion to doctoral study.
3. **Faculty Development:** Invest in faculty development programs that prepare nurse educators with expertise in community health nursing, including international educational experiences.
4. **Regional Education Centers:** Establish regional education centers that bring educational resources closer to community health nurses throughout the Kingdom.

#### Cultural and Social Factors

Cultural and social factors may influence community health nursing education:

1. **Gender Considerations:** Traditional gender roles and segregation practices may impact educational delivery and clinical placements.
2. **Professional Status:** The social status of nursing in Saudi society may affect recruitment and retention of students and faculty.
3. **Language Barriers:** Language differences between educational materials (often in English) and practice environments (primarily Arabic) may create challenges.
4. **Family Responsibilities:** Cultural expectations regarding family responsibilities, particularly for female nurses, may limit participation in educational programs.

Strategies to address these factors include:

1. **Culturally Sensitive Program Design:** Design educational programs that respect cultural norms while promoting professional development.
2. **Flexible Learning Options:** Provide flexible learning options, including part-time study and distance education, that accommodate family responsibilities.
3. **Arabic-Language Resources:** Develop high-quality Arabic-language educational resources for community health nursing.
4. **Professional Image Enhancement:** Implement initiatives to enhance the professional image of community health nursing in Saudi society.

#### Policy and Regulatory Environment

The policy and regulatory environment for nursing education and practice may present challenges:

1. **Scope of Practice Limitations:** Regulatory limitations on nursing scope of practice may restrict the application of advanced knowledge and skills.
2. **Educational Standards Variation:** Variation in educational standards across institutions may lead to inconsistent preparation of community health nurses.
3. **Continuing Education Requirements:** Lack of mandatory continuing education requirements may limit participation in professional development activities.
4. **Interprofessional Collaboration Barriers:** Regulatory and practice barriers to interprofessional collaboration may hinder team-based approaches to community health.

Strategies to address these challenges include:

1. **Nursing Practice Act Modernization:** Advocate for modernization of nursing practice regulations to support expanded roles for well-prepared community health nurses.

2. **Standardized Competency Frameworks:** Develop and implement standardized competency frameworks for community health nursing education and practice.
3. **Mandatory Continuing Education:** Establish mandatory continuing education requirements for license renewal, with specific content related to community health nursing.
4. **Interprofessional Education Initiatives:** Implement interprofessional education initiatives that prepare community health nurses to collaborate effectively with other healthcare professionals.

## CONCLUSION

Community health nursing in Saudi Arabia has evolved significantly over recent decades, paralleling the country's broader healthcare transformation efforts. As Saudi Arabia pursues its Vision 2030 agenda, community health nurses stand at the forefront of initiatives to enhance preventive care, improve healthcare quality, and advance digital transformation.

Recent research by Aljohani (2024) provides valuable insights into the current state of community health nursing practice in Saudi Arabia, revealing both strengths and significant educational imperatives. The relatively young community nursing workforce, with a high proportion of diploma-prepared nurses, faces challenges in areas such as research participation, community assessment, and utilization of professional resources. At the same time, these nurses demonstrate active engagement in core activities such as health education, supportive care, and health prevention interventions.

Addressing the educational imperatives for community health nursing in Saudi Arabia requires a comprehensive approach that includes developing educational pathways, strengthening practice-education partnerships, leveraging technology for learning, and building research capacity. These initiatives must be culturally sensitive and aligned with both Saudi Vision 2030 priorities and international standards for community health nursing practice.

Implementation challenges related to workforce constraints, cultural factors, and regulatory environments must be anticipated and addressed through strategic approaches that balance innovation with feasibility. By investing in the educational development of community health nurses, Saudi Arabia can enhance the contribution of these vital healthcare professionals to achieving national health objectives and improving the wellbeing of communities throughout the Kingdom.

As Saudi Arabia continues its healthcare transformation journey, strengthening community health nursing education emerges as a critical imperative—one that requires collaboration among educational institutions, healthcare organizations, professional associations, and government agencies. Through such collaborative efforts, community health nursing in Saudi Arabia can evolve into a more advanced, evidence-based profession that meets the complex health needs of Saudi communities in the 21st century.

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