

Working abroad – to do or not to do

Life as a dental hygienist in the UK is pretty well-documented. Direct access in 2013 was a major step forward in this country, but what is it like overseas? We ask *BDJ Team* reader panellist **Rachael England** that very question.



I decided to move to Dubai in June 2013, the thought had been in my mind for some time and after four years living in the South-East of England and an hour's commute each way to the clinic I applied for a job with a well-established business. Following an embarrassing Skype interview I was offered a position and they organised my visa and licence while I packed up the house!

The visa and licensing process was my first experience of Dubai bureaucracy. The whole process took three months, which is quite quick. A huge amount of paperwork was needed and involved me writing to every practice I had worked for over the previous five years, good standing certificate from the GDC, proof of my indemnity and a transcript from hygiene school; just to name a few things. When I arrived in Dubai I also had to take a viva style exam at the Dubai Health Authority and while I waited for the results took some time to find an apartment and start getting acquainted with life.

Life in Dubai

Most personal administrative tasks take a huge amount of patience and visiting of various departments, each giving conflicting advice. Luckily after the first two year visa is up and it's time to renew it becomes slightly less painful because you're used to the 'Dubai way'.

I stayed here for Christmas this year and I really missed my family and friends; friendships in Dubai remind me a lot of those I have from military life, close bonds because you're all experiencing life away from home. My social life is great, despite myths about life here we are allowed to drink and women can drive (although not at the same time), I am treated with the utmost respect as a woman and feel very safe around the city.

I've even fostered a rescue dog, so life here still reflects how it was at home, although it's not

unusual to meet people who have lions as pets and just a few weeks ago Jackie Chan was in a helicopter outside my apartment!

Working life

I started work at the clinic fairly soon and after a while noticed patterns in the types of problems or dentistry people have depending on their country of origin, for example lots of

lifestyle. That's something you don't really think about at home.

Health care primarily relies on insurance in Dubai, and quite often dentistry isn't covered or is severely limited. It also creates a gulf of inequity between the service workers and labourers who only have very basic access to

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gold crowns in Central Asia, huge composites from Eastern Europe. The dental knowledge of some patients is extremely poor and can prove a real challenge to introduce new health behaviours. Smoking is still very much acceptable here. Shisha is popular and smoking in restaurants and bars is still going on, despite there being laws against it.

It is fascinating meeting patients from such diverse countries and backgrounds, from billionaires to housemaids. The language barrier can really pose a challenge too and I often worry about the understanding of the medical history and lifestyle factor discussions being fully understood. You may experience this in the UK, but only in certain pockets of the country – and more so in London. I'm quite a visual artistic person; using good old pictures and videos which say a thousand words and help with the language barrier. Experiencing so many cultural differences and sensitivities have given me such a new rich education and made me aware of taking extra care when recommending products or making suggestions to people about diet and

emergency medicine. I also find that unless a patient's insurance will cover their work, people will decline treatment more often than not.

My patient base is quite narrow, expatriates cannot retire here, so we rarely treat people much older than 50-55, and I've only seen one denture in the last 28 months!

Children's dental health on the other hand appears to be neglected. The decayed, missing, filled teeth (DMFT) is 3.8, above the standards set by the World Health Organisation, who state DMFT should be no more than 3 in a population, while 80% have unhealthy gums. It's an area I'm planning to research for my dissertation in Master of Public Health this year. A future Oral Health Strategy in Dubai needs to be aware of the knowledge, attitudes and practices of different cultures when making its recommendations.

Would I recommend working abroad? Absolutely!

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