

EXPLORING THE ISSUES AND CHALLENGES FACED BY PHYSICALLY DISABLED NURSES IN THE PROVISION OF CARE AT TERTIARY CARE HOSPITALS OF PESHAWAR

Original Research

Daud^{1*}, Bakhtyar Ali Shah², Hazrat Nabi³, Noshad Ahmad⁴, Muhammad Ishaq⁵, Saddam Hussain⁶

¹Assistant Professor, City University of Science and Information Technology, Peshawar, Pakistan.

²Assistant Professor, Institute of Nursing Sciences, Khyber Medical University, Peshawar, Pakistan.

³MSN Scholar, Institute of Nursing Sciences, Sarhad University of Science and Information Technology, Peshawar, Pakistan.

⁴Assistant Professor, Life Care College of Nursing and Allied Health Sciences, Peshawar, Pakistan.

⁵Assistant Professor and Principal, Dream College of Nursing and Allied Health Sciences, Nowshera, Pakistan.

⁶Assistant Professor, Reflex College of Nursing and Health Sciences, Peshawar, Pakistan.

Corresponding Author: Daud, Assistant Professor, City University of Science and Information Technology, Peshawar, Pakistan, Mdaud981@gmail.com

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ABSTRACT

Introduction: Disability is a condition that limits, restricts, or impairs physical function and the ability to perform daily activities. Globally, 16% of the population lives with disabilities, and a significant number of nursing professionals are affected. Nursing is a physically demanding profession, and restricting it to individuals without disabilities may exclude skilled and competent individuals. However, physically disabled nurses face unique challenges in providing care, which can affect their ability to effectively perform their duties.

Objective: This study aimed to explore the issues and challenges faced by physically disabled nurses in the provision of care at tertiary care hospitals in Peshawar.

Methods: A qualitative descriptive phenomenological study design with thematic analysis was conducted to explore the issues and challenges faced by physically disabled nurses in the provision of care at tertiary care hospitals in Peshawar. Ten participants were interviewed using purposive sampling techniques. Face-to-face semi-structured interviews were conducted, and their responses were recorded. Subsequently, the interviews were transcribed verbatim, and a thorough thematic analysis was performed using an inductive approach, following Braun and Clarke's six-phase framework.

Results: The analysis yielded 46 codes, 22 categories, and five key themes. The five main themes were Workplace Challenges for Disabled Nurses, Psychological and Emotional Challenges, Patient Perceptions and Provision of Care, Professional Growth and Career Advancement, Reforming Institutional Policies, and Strengthening Support Systems for Disabled Nurses.

Conclusion: This study provides valuable insights into the issues and challenges faced by physically disabled nurses in the provision of care at tertiary care hospitals in Peshawar. Understanding these challenges is crucial for healthcare leaders, policymakers, and educators to develop targeted strategies and interventions that promote inclusivity and support for disabled nurses in hospitals. Addressing these challenges and fostering an accommodating work environment are essential for enhancing care quality, ensuring equitable professional opportunities for disabled nurses, and improving patient outcomes in Peshawar and beyond.

Key Words: Qualitative study, challenges, Disability, Nurses, Physically disabled nurses, Provision of care, and Tertiary care hospitals.

INTRODUCTION

The term “disability” refers to a state of incapacity or impairment that restricts an individual's physical or cognitive functioning (1). Physical disability is a condition that limits, restricts, or impairs physical function and the capacity of a person to perform daily activities (2). The disabilities represented were post-polio syndrome, fused foot, fused wrist, club foot, club hand, herniated disk, multiple sclerosis, muscular dystrophy, rheumatoid arthritis, and spinal cord injury (3).

Disability is on the rise worldwide, affecting 16% of the global population (2). In the UK, 21% of adults, totaling 10.8 million, have some form of disability (4). Approximately 50 million people in the United States have a disability (5). South Africa reports a 7.7% national prevalence, with a higher rate in females (6). Around 31 million people, constituting 6.2% of the population of Pakistan, have disabilities. However, the actual percentage may be higher due to flaws in the census data collection process (7). As a predominantly female profession, the prevalence among nurses, remains unspecified but is expected to be higher (4).

Disability can significantly affect a person’s life, including their ability to access employment. To address inequalities, over 40 countries enacted anti-discrimination and disability laws in the 1990s, mandating reasonable modifications to enhance accessibility, equality, and inclusion in employment (8). Despite improvements, people with disabilities remain underrepresented in higher education after more than 30 years (9). In nursing, educators act as gatekeepers to the profession and have a crucial role in deciding the inclusion of students with disabilities in this profession (10).

Nursing is a complex profession grounded in unique knowledge. It involves a caring relationship recognizing patient uniqueness to promote health. Nursing is a humanistic profession with artistic and scientific components (11). It requires compassion and clinical skills to provide holistic care to individuals, families, and communities. Nurses are crucial frontline providers in healthcare, working in diverse settings like hospitals, clinics, community centers, schools, and long-term care facilities. They are the backbone of patient care and recovery. Nurses also play an essential role in health promotion, disease prevention, and patient education, vital for improving public health outcomes (12).

Nursing involves a wide range of physically demanding tasks essential for patient care. Nurses frequently assist with moving the patients between beds and chairs, repositioning them to prevent bedsores, and aiding in walking, all of which require lifting, pushing, and supporting patients' weight.(13) Administering medications, such as giving injections and starting IV lines, demands fine motor skills and dexterity, which can be physically taxing for long shifts (14).

Monitoring vital signs involves handling medical instruments with precision, requiring steady hands and endurance. In emergencies, nurses must act swiftly and efficiently, performing strenuous tasks like CPR and moving patients, contributing to physical fatigue and demanding stamina. Handling medical equipment and supplies, from lightweight syringes to heavy oxygen tanks, requires strength and coordination (15). Additionally, working in physically taxing environments like the crowded hospitals of Peshawar can cause mental and emotional stress, leading to symptoms such as muscle tension and fatigue, demanding effective stress management (16).

Despite the physical demands of nursing, it's crucial not to exclude individuals with physical disabilities, as healthcare utilizes more cognitive skills than physical nerves (17). Modern healthcare depends on cognitive abilities for accurate diagnosis, effective treatment, and proficiency in utilizing medical software and electronic health records (18). Understanding, expressing, and emotional intelligence are necessary for effective patient education and communication (19). To improve patient outcomes, research and evidence-based practice rely on cognitive skills for study design, data analysis, and clinical application (20). Furthermore, cognitive abilities are essential for strong coordination and teamwork to maintain interdisciplinary collaboration within healthcare teams (21).

Therefore, Limiting the nursing profession to those without physical disabilities may exclude talented and intelligent people from this profession who might become outstanding nurses (17). Employing experienced nurses with disabilities can also alleviate the nursing shortage. A nurse may be physically disabled but his knowledge and skills are not (22). However, nurses with disabilities may face biases and stigma, affecting job experiences. Workplace negativity can contribute to feelings of ineffectiveness and helplessness leading to leaving their job (2)(23).

Literature highlights the employment of disabled nurses in healthcare settings (11)(24). However, there is lack of literature on the challenges they faced in the provision of care in workplace. The study aimed to explore the issues and challenges faced by physically disabled nurses in the provision of care at tertiary care hospitals in Peshawar. Exploring challenges is essential for improving healthcare quality, understanding co-worker attitudes, and identifying the supports necessary to promote engagement in workplace. The study findings may be implicated in policy making to enhance workplace support, while fostering an effective environment and opportunities for professional growth. Moreover, the findings may also help the disabled individuals in making decisions regarding whether or not to pursue a career in the nursing profession.

METHODOLOGY

This qualitative phenomenological study explored the challenges faced by physically disabled nurses providing care at tertiary care hospitals in Peshawar. The study was conducted in three hospitals: Lady Reading Hospital, Khyber Teaching Hospital, and Hayatabad Medical Complex. Registered nurses with physical disabilities and a minimum of two years of clinical experience were selected to participate. This criterion ensured that the participants had sufficient professional experience to provide significant perspectives on the challenges faced in patient care.

This study aimed to capture the perspectives of individuals who have explored the clinical environment with a physical disability, enhancing the reliability and depth of the findings. The study included registered nurses with physical disabilities holding a bachelor's degree or higher and at least two years of clinical experience in direct patient care. Nurses with physical disabilities in administrative positions and those who were unwilling to participate were excluded.

Purposive sampling was used to select the participants. Ten nurses were interviewed to ensure data saturation when no new themes or information emerged. Necessary approval was obtained from the Ethical Review Committee (ERB) and Advanced Study Research Board (ASRB) of Khyber Medical University, and from the authorities of the three hospitals. Written and verbal informed consent was obtained from all participants, and the interview dates were scheduled. Interviews were conducted in private, audio-recorded, and utilizing English as a medium of communication using a semi-structured question guide with open-ended and probing questions. Participants were asked to record the sessions.

Confidentiality was maintained by assigning hypothetical identification numbers to responses. The audio transcripts were verbatimised after each interview. Hand notes and facial impressions were also recorded. Each observation has been described in the relevant theme description section. The interview sessions lasted 35-60 minutes, allowing a thorough exploration of experiences while respecting participants' time and ensuring data quality. Data were analyzed using the Braun and Clarke 6 steps thematic analysis method. Data were transcribed from audio to written forms. Line-by-line readings were obtained to understand the collected data. Codes were assigned to meaningful data segments. Similar codes were grouped into categories and themes, using an inductive approach. Themes were refined by examining their coherence and relevance. The study results were reported following qualitative research reporting guidelines.

RESULTS

The participants were physically disabled nurses from three tertiary care hospitals in Peshawar: Hayatabad Medical Complex (HMC), Lady Reading Hospital (LRH), and Khyber Teaching Hospital (KTH). The ages of the participants ranged from 25 to 40 years. The group consisted of three males and seven female participants.

The study sample comprised nurses with a range of physical disabilities, thereby enhancing the scope and depth of the research findings. With regard to the nature of the physical disabilities, three participants presented with foot drop, while two participants had clubfoot. Moreover, each of the remaining five participants was diagnosed with a different condition, including Brachydactyly, club hand, post-polio syndrome, partial paralysis of the hand, and partial paralysis of the leg. The heterogeneity in the types of physical disabilities among the participants facilitated a detailed exploration of the multifaceted challenges faced by physically disabled nurses in the provision of patient care. The characteristics of the participants are presented in the table below.

S.NO	Age, years	Gender	Address	Education level
P1	35	Female	Swabi	POST-RN
P2	28	Female	Peshawar	POST-RN
P3	27	Male	Waziristan	BSN
P4	30	Male	Shangla	BSN
P5	29	Female	Chitral	POST-RN
P6	31	Female	Chitral	POST-RN
P7	40	Female	Peshawar	POST-RN
P8	30	Female	Chitral	POST-RN
P9	25	Female	Karak	BSN
P10	33	Male	Swat	POST-RN

Thematic Analysis: A total of five themes are extracted regarding issues and challenges faced by physically disabled nurses in the provision of care in tertiary care hospitals of Peshawar. These themes are Workplace Challenges for Disabled Nurses, Psychological and Emotional Challenges, Patient Perceptions and Provision of Care, Professional Growth and Career Advancement, Reforming Institutional Policies and Strengthening Support Systems for Disabled Nurses (Figure 01).



Theme 1: Workplace Challenges for Disabled Nurses

The theme “Workplace Challenges for Disabled Nurses” emerged from participants' statements regarding the structural, operational, and systemic barriers they face in the workplace. These barriers impact their mobility, job performance, and overall work experience. Most interviewees emphasized the difficulties they face due to inadequate workplace adaptations and the demanding nature of their roles. Some nurses also highlighted challenges related to employment retention and role adjustments, which affect their ability to sustain long-

term careers. Additionally, environmental stressors were identified as significant contributors to workplace difficulties. This theme was generated from five categories: Work-Related Physical Demands, Workplace Adaptations, Employment Retention Issues, Role Adjustments, and Environmental Stressors. (Figure 02).



Theme 2: Psychological and Emotional Challenges

The theme “Psychological and Emotional Challenges” in the study emerged as a result of participants' statements about their experiences with emotional and mental strain in the workplace due to stigma, discrimination, and workplace dynamics. Most interviewees highlighted the psychological burden of navigating a challenging work environment while managing the demands of the nursing profession. A few nurses also expressed concerns about workplace discrimination and social isolation, which exacerbated their emotional distress. Additionally, some participants reported experiencing fear of retaliation when advocating for their rights. This theme was derived from four categories: Workplace Discrimination, Emotional Strain, Mental Health Impacts, and Social Isolation. (Figure 03)



Theme 3: Patient Perceptions and Provision of Care

The theme “Patient Perceptions and Provision of Care” in the study emerged as a result of participants' statements about the challenges disabled nurses face in building trust with patients and adapting their care delivery practices. Most interviewees emphasized the impact of patient perceptions on their ability to provide optimal care. A few nurses also highlighted difficulties related to communication

challenges and the need for patient education and advocacy. Additionally, some participants shared strategies they employ to adapt their care practices despite these barriers. This theme was developed from four subthemes: Patient Trust Issues, Adapting Care Practices, Communication Challenges, and Patient Education and Advocacy. (Figure 04)



Theme 4: Professional Growth and Career Advancement

The theme “Professional Growth and Career Advancement” in the study emerged as a result of participants' statements about the challenges disabled nurses face in their pursuit of career development, promotions, and leadership roles. Most interviewees emphasized the barriers they encounter due to physical, social, and institutional constraints. A few nurses also highlighted biases in promotion processes and the lack of mentorship and networking opportunities, which hinder their professional growth. Additionally, some participants expressed concerns about career development gaps that limit their advancement in the nursing profession. This theme was developed from four subthemes: Barriers to Advancement, Bias in Promotion, Access to Mentorship and Networking, and Career Development Gaps. (Figure 05)



Theme 5: Reforming Institutional Policies and Strengthening Support Systems for Disabled Nurses

The theme “Reforming Institutional Policies and Strengthening Support Systems for Disabled Nurses” in the study emerged as a result of participants' statements about the systemic challenges and gaps in institutional support for disabled nurses. Most interviewees emphasized how the absence of inclusive policies and inadequate accommodations hinder their full participation in the workforce. A few nurses also highlighted the lack of training and awareness, which affects their integration into the workplace. Additionally, some participants expressed concerns about insufficient support systems and workplace culture, which further limit their professional growth. This theme was developed from four categories: Policy Gaps, Training and Awareness, Support Systems, and Workplace Culture and Inclusivity. (Figure 06)



DISCUSSION

This study highlights the multifaceted challenges that physically disabled nurses face in the provision of care at tertiary care hospitals of Peshawar. These challenges emerge from various barriers that hinder their mobility, affect their job performance, and shape their overall work experience, making it difficult for them to perform their professional responsibilities effectively.

The theme of workplace challenges for disabled nurses emerged from participants' experiences with physical disabilities while providing patient care. Participants expressed difficulty in standing and handling patients for prolonged periods. Workplace adaptation is challenging and absenteeism is common. This study revealed that sufficient support and feasible duty allocation for physically disabled nurses would enable them to provide healthcare and help reduce the burden on nursing professionals. Helen Stor and colleagues conducted a study promoting disabled nursing students to complete their studies and enroll in jobs, highlighting issues that demotivate physically disabled nurses from progressing (25). Their results showed that staff perception, negative attitude, and lack of understanding of disability were the main barriers to the progression of the nursing profession.

A similar study in 2010 using an exploratory descriptive design showed that hospital nurse managers' negative attitudes and concerns regarding physically disabled nurses' working performance decreased their perceptions and abilities (26). A study by Ijiri suggested that the number of students with physical disabilities seeking admission to nursing schools would increase, necessitating the need to address disability issues among professionals. A viable solution is to create a diverse environment that can accommodate physically disabled nurses (27).

There are a number of stressors that affect hospital and clinical situations; nurses among the first-line professionals have direct interaction with patients and are vulnerable to these stressors. Major stressors include high patient acuity levels, admissions, discharges, and communication barriers, leading to depression, anxiety, stress, and emotional symptoms (28). Participants emphasized that emotional strain and workplace discrimination negatively impacted mental health, causing isolation. Negative attitudes from colleagues and lack of peer support reduced working ability and interest, increasing disability stigma and job insecurity. They suggested equal work appointment and task consideration increase confidence and job perception; peer support reduces feeling disabled and motivates healthcare work.

A study by Mugo and colleagues supports that psychological safety, nurse well-being, and patient safety are interconnected and essential for emotional wellness. They define a psychologically safe environment as one where individuals feel safe to convey ideas, question, and admit mistakes without fear. Psychological safety is characterized by open communication, a supportive environment, and effective team dynamics. Psychologically safe nurses are more satisfied, less likely to skip work, and achieve better patient safety results. It is linked to decreased stress and burnout, enhancing mental health and job satisfaction (29).

Another phenomenological qualitative study by Wang Y revealed that the six aspects of an authentic psychological experience are knowledge and related capabilities, psychological and emotional changes, psychological stress, ordering the manpower, cooperation of team, learning and post-event reflection, and learning from it. As this study forces that by improving the psychological and emotional well-being an effective team working, organized staff can be maintained, additionally they suggest that improving knowledge of the nurses is valuable in this perspective (30).

To understand patient satisfaction, patient perception of care should be understood first. Schmidt's 2003 study categorizes patient perception into four categories: seeing the individual patient, explaining procedures, responding to questions, and watching over staff activities (31). Participants explained that trust issues regarding competency develop in patients due to disability, reducing care seeking from disabled nurses. They suggested assistive technologies and cognitive skills could help overcome stigma. Participants emphasized that effective communication, patient education, and advocacy can resolve misunderstandings and develop rapport between patients and disabled nurses.

Effective communication plays a crucial role in reducing tensions, addressing empathy challenges, recognizing institutional barriers, navigating difficult situations, and understanding differences between patients and physically disabled nurses. It can bridge perception gaps, foster a more inclusive health care environment, dispel misunderstandings about disabled nurses' capabilities, enhance patient recovery, promote adherence to treatment, improve psychological well-being, and contribute to better overall quality of life for patients and healthcare providers (32).

Further support comes from patients' perceptions of care provided by nurses. Studies indicate patients should place greater trust in nurses' cognitive skills and clinical expertise rather than focusing on physical disabilities (33). Research highlights that patient advocacy should not be compromised by a nurse's physical disability, as their ability to provide high-quality care remains intact. Patient education plays a crucial role in fostering awareness and understanding, ensuring biases and misconceptions do not hinder the professional contributions of physically disabled nurses in healthcare settings (34).

Career development and growth are critical for evaluating professional success. Regular training and workshops develop skills for professional growth. Participants highlighted barriers to advancement due to limited training. Exclusion from leadership roles restricts professionalism. Inequality in task allocation and exclusion from emergency department duties create a sense of discrimination. Difficulty in approaching mentors often leads to a lack of direction for progress, causing developmental problems in their careers.

A study by Mariana M shows similar results, emphasizing the need to enhance inclusivity of disabled nurses in professional tasks. Organizations should ensure disabled nurses have equal opportunities to participate in duties and training programs. Recruiting a diverse workforce fosters an inclusive culture valuing all staff contributions. The study suggests healthcare institutions develop managers' transformational capabilities to reduce biases, promote equity, and strengthen team unity. Implementing these measures can create a supportive environment enhancing job satisfaction and performance (35).

Another study revealed how biases develop among nursing professionals and disparities arise from discrimination in work allotments. They suggest equal allotments without discrimination due to disabilities. If unresolved, a profession already facing a shortage will experience demotivation (36). Rozani Violetta suggests that promotion of nursing professionals should be based on occupational factors and performance, connecting to equal work involvement and competencies. A supportive organizational environment also promotes the profession (37).

The policies of an institute significantly affect the development of an effective working environment. A supportive environment encourages employees to engage in an institute's prosperity and adhere to policies. The participants expressed that policy gaps and insufficient accommodation for disabled nursing professionals hindered their performance. The lack of disability-sensitive training necessitates adaptive training to improve the job adaptability. Most participants suggested implementing a support system for physically disabled nurses, increasing counselling services, and mentorship opportunities. They also proposed reducing the gap between inclusive leadership and the rights of nurses with physical disabilities.

A study by Pereira in 2019 supports this theme, stating that violations of nursing professionals' rights, particularly those with physical disabilities, can foster a discouraging work environment. They emphasized the need for inclusive policies to protect and support nurses with disabilities. Where such policies exist, they stressed the importance of continuous improvement to better accommodate physically disabled nursing professionals and ensure a more equitable workplace (38).

Nurses' voice: policy, practice, and ethics A study by Aroskar explored nursing professionals' perspectives that policies managing patient care and nursing professionals need more centered development. They specify key points for legislators and policymakers. Nurses are viewed as a critical source for healthcare facilities, legislators, and policymakers to develop policies that affect nurses and patient care (39). A study by Squires also supports these results, promoting research on utilizing physically disabled nurses' cognitive thinking rather than focusing on their physical disability (40).

CONCLUSION

This phenomenological qualitative study explored the issues and challenges faced by physically disabled nurses in the provision of patient care. Five themes emerged after applying thematic analysis: Workplace Challenges for Disabled Nurses, Psychological and Emotional Challenges, Patient Perceptions and Provision of Care, Professional Growth and Career Advancement, and Reforming Institutional Policies and Strengthening Support Systems for Disabled Nurses. Due to a lack of facilities, physically disabled nurses face significant challenges in their careers, often leading them to leave their jobs earlier than their physically well colleagues. Proper facilities and support systems can enhance the professional experience and career retention of physically disabled nurses. Well-managed accommodations could improve job perception and efficiency, encouraging more physically disabled individuals to pursue the nursing profession. Interactive sessions should be organized so that physically disabled nurses can discuss and address their unique challenges. Given the current nursing shortage, such initiatives could help bridge this gap by supporting and retaining disabled nurses, while promoting inclusivity and diversity in the healthcare workforce.

AUTHOR CONTRIBUTION

Author	Contribution
Daud*	Substantial Contribution to study design, analysis, acquisition of Data Manuscript Writing Has given Final Approval of the version to be published
Bakhtyar Ali Shah	Substantial Contribution to study design, acquisition and interpretation of Data Critical Review and Manuscript Writing Has given Final Approval of the version to be published
Hazrat Nabi	Substantial Contribution to acquisition and interpretation of Data Has given Final Approval of the version to be published
Noshad Ahmad	Contributed to Data Collection and Analysis Has given Final Approval of the version to be published
Muhammad Ishaq	Contributed to Data Collection and Analysis Has given Final Approval of the version to be published
Saddam Hussain	Substantial Contribution to study design and Data Analysis Has given Final Approval of the version to be published

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