ORIGINAL ARTICLE

Nursing Empowerment: Insights from Academic Nurses in Pakistan

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ABSTRACT

Background: Professional development and nurse empowerment are closely related. Empowered nurses become change agents to challenge traditional mindsets and are well-equipped to handle contemporary challenges successfully.

Objective: To identify the nursing faculties' perceptions concerning nurse empowerment.

Methods: In this qualitative descriptive study, fifteen nursing faculties from different public sector nursing colleges in Sindh, Pakistan, participated. Convenience sampling was used to conduct one-on-one in-person interviews between November and December of 2023. Three open-ended questions were utilized to collect data. The data was analyzed using the Creswell & Porth (2018) descriptive analytical approach.

Results: Total 15 interviews were conducted. The nurses' ability to make an informed judgment based on evidence is 'nurse empowerment'. Dissension, discrimination, organizational structure problems, and a power-avaricious mindset were all obstacles to nursing empowerment. The aspects that showed promise for nurse empowerment were restructuring the organization, strengthening the role of regulatory authorities, offering opportunities for higher education, and cultivating an evidence-based culture. Empowerment of nurses can be attained *via* collaboration, having a clear vision for the future, and pursuing professional development, persistently.

Conclusion: Nurses must speak up for their rights and break the ice. To achieve professional empowerment with autonomy and respect for their own and career advancement, nurses must work even harder.

Keywords: *Decision-making capacity, Kanter's structural model for empowerment, marginalized individuals, nurse empowerment, and nursing faculty.*

INTRODUCTION

Power is "the ability to positively influence others, be used to accomplish specific tasks, and/or to control others (negatively)". Another aspect of power is the capacity to extricate oneself from repressive circumstances and pursue an independent position [1]. Empowerment is a free-form, subjective, cooperative experience that promotes personal and professional development. On the other hand, misusing authority might prevent a marginalized person from advancing in their career. As their wrongs go uninvestigated, the mighty continue to go unaccounted for. As a result, those who are ostracized are portrayed as conceited and ineffective, which often violates accountability. Disadvantaged individuals fall short of realizing their full potential [2].

Nurses give people in need safe, affordable healthcare. To accomplish this important purpose, they need to be capable of making proper clinical judgments [1]. Because of entrenched beliefs, the current organizational culture pushes behaviors in the wrong direction, which is highly troubling. The outcome is the division between privileged and disadvantaged groups [2]. The Nurse

job satisfaction declines. Research has demonstrated that low levels of job satisfaction are linked to subpar clinical and academic outcomes, as well as an increase in burnout. It makes the scarcity of nurses worse [1].

There is a dearth of research in Pakistan on this important topic. Researchers at the private Aga Khan University in Karachi found in a study [2] that in a physician-centered environment, nurses felt helpless and alone. In a similar vein, female nurses in another study [3] believed that social norms forced them to tie their tongues. The nurses stopped taking action. The study's findings recommended that nurses modify their custom of keeping quiet. Creating an image of self-reliance and empowerment was considered a component of increasing self-confidence. Nursing faculties must take the lead since they are in a prime position to promote nursing empowerment. By using teaching behaviors, they could serve as an inspiration to the upcoming nurse generation [3]. This study attempted to clarify the meaning of "nursing empowerment". The purpose of this study is to define nurse empowerment and explore the methods involved in attaining it. The present study aimed to define nurse empowerment, characterize the factors that facilitate or impede its advancement, and recommend strategies for promoting nurse empowerment.

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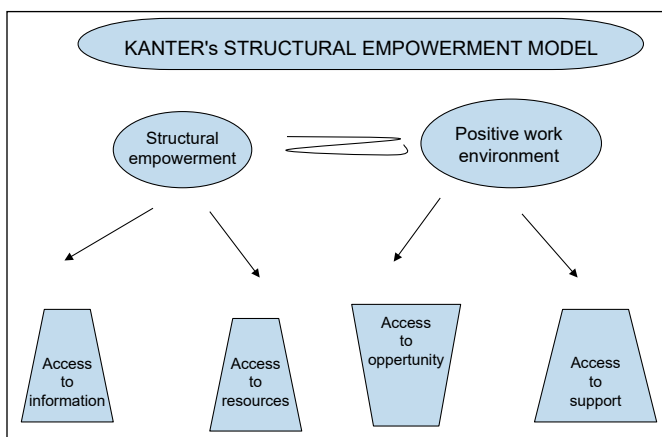
Fig. (1): Kantar's structural model of empowerment.

THEORETICAL FRAMEWORK

The theoretical foundation of the research is based on "Kanter's structural model of empowerment." Numerous social factors and situations can result in opportunities, knowledge, resources, and support [4]. Fig. **(1)** provides a simple illustration of the relationship between empowerment and structural opportunities or structure power [5]. The approach makes it easier to analyze the connection between structural empowerment and nurses' level of involvement at work. Better work performance and a decreased risk of burnout were the two benefits of the partnership. Employees have a good drive when this occurs [6]. Sincere leadership techniques give followers and leaders structural power [7]. Empowered leaders are crucial in helping people reflect and work as a catalyst to achieve established team goals when followers are mentally worn out. Empowerment removes emotions of loneliness and increases one's sense of freedom [8].

MATERIALS AND METHODS

The purpose of this descriptive qualitative research study was to define nurse empowerment and explore the methods involved in attaining it. An ethical evaluation letter was released by the Peoples University of Medical & Health Sciences for Women's Ethics evaluation Committee in Nawabshah, Shaheed Benazirabad. Fifteen faculty members recruited from different nursing institutions and colleges in Sindh, Pakistan, were invited to participate in the study. In November and December of 2023, the information collection process came to an end. One of the study's inclusion criteria was that the faculty member must have taught in a nursing institution for at least two years. Using phenomenological design, we produced faculty members' perspectives and firsthand narratives of the "nurse empowerment" phenomenon.

A semi-structured interview is a data collection method that we use to get significant raw data. A convenience sampling method was employed to choose research subjects. Three open-ended questions were utilized in the in-person interview with each subject. These were
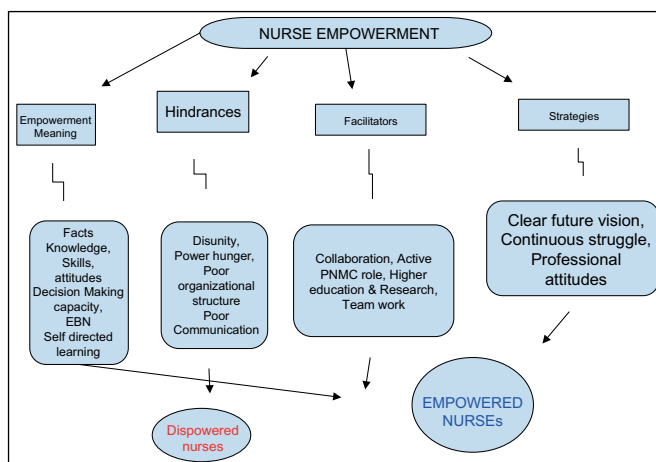

Fig. (2): Nursing empowerment definition and related factors.

the queries; 1) What does nurse empowerment mean to you personally? 2) Are nurses empowered? If not, explain why, as well as what may or should be done to improve the current situation. For every interview, thirty to fifty minutes were allotted. One investigator took notes, while the lead investigator performed the interview.

The participants' desire to have the interview not be recorded on camera was granted. An interview was conducted in three stages: opening, questions and responses, and closure. For every participant, a brief demographic profile was created. To clear up any confusion surrounding the participants' responses, the lead investigator probed them with more questions. Up until saturation, data has been gathered on both research phenomena.

Interview transcripts were carefully scanned, and key areas were highlighted by reading the transcripts aloud. Using three main headings from the questions, we classified key components of the concept of nurse empowerment, the reasons for having or not having nurse empowerment, and measures for improving sections. The coding tree was known ahead of time. Nurse empowerment was the coding tree's central subject. The four sub-themes included the definition of empowerment, barriers to achieving empowerment as a nurse, and methods for achieving empowerment as a nurse (**Fig. 2** for coding tree). After two interviews were independently coded by each investigator, all of the interview codes were checked by the primary investigator. With agreement, they created three main themes and twelve subthemes. This was achieved by examining every interview and identifying the commonalities and discrepancies across all of the interviews that were conducted. A structural empowerment model was utilized to deduce several themes that were identified. This entire descriptive-analytical process was carried out by hand. Creswell & Porth (2018) [9] recommend this data analysis technique.

RESULTS

To achieve data saturation for this qualitative study, we performed 15 interviews. Data saturation was reached after 13 interviews, but we conducted two more to increase trustworthiness. The demographic details of the research participants are displayed in Table **1** and include mean and SD as well as the following: age, gender, educational background, designation, and service experience.

The Meaning of Empowerment for Nurses

All participants had a clear grasp of the meaning of nurse empowerment. The broad word encompassed the ability to make decisions, the desire to act morally to avoid wrongdoing, the conviction that one is acting morally, and the information and abilities required to make well-informed decisions.

As noted by Participant #2, the empowerment of nurses extends their ability to make decisions by acquiring and implementing appropriate behaviors.

"Making decisions based on facts rather than assumptions is a key component of nurse empowerment. You possess the appropriate behavior and attitude, along with current knowledge and skills, to make well-informed decisions."

Participant #07 asserts a direct correlation between nurse empowerment loyalty and professional growth. She drew the link between the goal of enhancing the nursing community and empowerment.

"The empowerment of nurses is hidden beneath your attitude toward career advancement. Being a nurse is a privilege, and your primary duty is to do the right thing. You always want to speak out against injustices done to the nursing community."

The lack of empowerment among nurses is a barrier to the transition from task-based nursing to evidence-based practice, as highlighted by Participant #11. This means that nurses must carry out unique research focused on the demands of the population they plan to serve in the future.

"Times have shifted. Professionals make up nurses. Research involves nurses. Because of this, nurses must adopt evidence-based practices to develop into autonomous, self-directed learners."

Reasons for Nurses' Feelings of Empowerment or Lack Thereof

Ten faculties opposed "nurse empowerment", while five supported it. 'Disunity, power-acquisitiveness, discrimination, and negative organizational structure' were the reasons given by the participants for the low level of nurse empowerment. Organizational reorganization, proactive regulatory body involvement, higher education options, and more research activities have all been associated with nurses' empowerment.

The "prevailing tensions in the nursing profession," according to Participant # 14, are a curse and a serious threat to nurse empowerment.

"Nurses battle with one another. Leg pulling is a common occurrence in the nursing profession. Their hearts are brimming with jealousy. On the main post, they can't see you. They are split as a result."

The third participant identified two primary elements that impede nurses' empowerment: negativity and conflict.

"We won't attain empowerment till we are not prepared to change ourselves. Having good experience, earning more degrees, and holding a position of authority do not make you a powerful person. You have great professional stature and perks, but you are not part of the decision-making process. Being empowered gives you the ability to influence other people. That's true empowerment."

Participant #8 emphasized that quality, not quantity, is the path to empowerment.

"It's a sophisticated con. Look at us. We are steadily expanding (numerically only). We have a sizable group

Table 1: Study participants' demographic characteristics.

Participant	Age (years)	Sex	Education	Designation	Work Experience (years)
P1	45	Male	Masters in Nursing	Associate Professor	15
P2	32	Male	BSN generic	Lecturer	04
P3	46	Female	BSN Post RN	Assistant Professor	14
P4	36	Male	BSN Post RN	Lecturer	08
P5	47	Male	Masters in Nursing	Assistant Professor	15
P6	41	Male	BSN Post RN	Lecturer	09
P7	43	Female	BSN Post RN	Lecturer	13
P8	47	Male	BSN Post RN	Associate Professor	14
P9	46	Male	Masters in Nursing	Lecturer	15
P10	31	Male	BSN generic	Lecturer	04
P11	37	Female	BSN Post RN	Assistant Professor	13
P12	38	Male	BSN Post RN	Assistant Professor	13
P13	47	Male	Masters in Nursing	Assistant Professor	15
P14	42	Male	BSN Post RN	Lecturer	12
P15	35	Female	BSN generic	Lecturer	07

here. But where's the quality? Folks, we're still nowhere. We're trying to discover who we are. It is often claimed that nurses are the backbone of the medical community. This bone is shattered despite that. Is there someone who can fix it? Are we ready to start implementing corrective measures? To which I said, "Yes, but dim."

Participant #4 was primarily concerned with open communication and well-defined agendas.

"We cannot work together to achieve our agendas. In our numerous social and professional engagements, we always discuss various professional issues. Using problem-solving strategies is advised. However, what, then,... We drink coffee and bemoan the state of affairs. "Go home... nothing substantial."

The negative interactions that the higher authority has with professionals were highlighted by Participant #13.

"It looks impressive that nurses are moving in the right direction. I think so !!. You know that the nurses have been ignored for a very long time. There were moments when we didn't know where we stood or what our proper function was. When others speak well of us, we can feel proud of who we are and what we do. Positive indications that our efforts are valued are increasing. Advanced degrees are being pursued by nurses both domestically and abroad. Jobs are offered to us *via* competitive exams. Senior nurses have progressed to more senior positions. This indicates that we are on the right track with our march for empowerment.

Strategies for Empowering Nurses

Participant # 07 praised the Pakistan Nursing & Midwifery Council's proactive involvement in creating a new and enhanced professional image while expressing hope for the future.

"Nurses have worked extremely hard to advance both personally and professionally. This task is also under the purview of the Pakistan Nursing and Midwifery Council, which has taken significant steps in this direction, including the establishment of standard practice protocols and updated curricula, professional activities about nursing being conducted throughout the nation, general bachelor's, master's, and doctoral programs in nursing being established, and a variety of career options available both domestically and internationally. Additionally, our progress is evidenced by nurses' International enrollment into master's and doctoral programs."

Participant #09 encouraged nurses to pursue further education and research endeavors, endorsing their need for knowledge.

"It's fantastic that so many nurses in the area are engaged in research. It implies that the development of evidence-based instruction and practice is greatly valued. It is undoubtedly upbeat. The very act of nurses conducting research suggests their wish to move away from customary chores and toward evidence-based approaches. Although it is a modern demand, I argue that the need for evidence-based practice and education is closely linked to the struggle for nurses' empowerment."

"What is the best way to empower nurses?" was the final question. A dozen participants expressed hope for the near future of nurse empowerment.

Participant #12 pushed for a unionization of nursing professions.

"First and foremost, foster peace among all ranks. It requires a fiduciary mindset. A course of action that prioritizes your career over your objectives."

A key suggestion made by Participant #15 was to prioritize your approach to problem-solving.

"Note, which is the first? The source of the issue must be determined. Every time we solve an issue, we concentrate on the outcome. We don't consider the problem's source. To properly accomplish the process of identifying the roots of an issue, it is necessary to have well-defined objectives. Achieving our shared goals is not insurmountable, even while learning to dedicate ourselves to a relationship is difficult."

Participant #06 berated nurses for giving up on their fight for empowerment. She continued by saying that nurses cannot afford to take a backseat. She underlined that nurses must take personal responsibility.

"It makes sense that we would like to stay in our comfort zones. Given that it is exhausting, it may be a sign. All of us tend to overlook significant items. When we think we've done enough, we submit it so others can contribute. That is terrible. You realize that you put in more effort now that you are a senior. So, first, clear up any confusion you may have had. Rationality is subordinated to emotional exhaustion. If your false beliefs are disproved, your future visions might become more solid."

Participant #4 proposed a fiduciary approach as a tool for professional empowerment.

"Humans are naturally jealous and avaricious. Attitudes and ideas are both detrimental. People work hard until they receive something in return. An individual's efforts diminish when they perform below expectations. But people can also harbor jealousy. When they see that you are receiving more than they had previously set aside for you, they try to break the chain. As a result, there is chaos and less effort and input. Both strategies need to be modified. You have not given up on your goal, regardless of the outcome. Others must take credit for what they accomplished in furthering society. In my view, one ought not to oppose change.

Recall that we must work only for ourselves. Consequently, do not postpone expecting miracles."

Nurses should improve their ability to exchange information to resolve conflicts, according to Participant #10.

"There seems to be a communication breakdown between nurses and other medical specialists. These kinds of communication weaken boundaries, both personal and professional. You belong to a big community, and certain people don't own you, in my opinion. They attempt to minimize you. I'm always curious to know why. Why? Although I believe 'respect breeds respect', my experiences and observations contradict this. I feel like an outcast when I'm not given the respect I deserve. I resisted being pulled away. Putting you in a situation where you have to cry is encouraging."

Participant #02 inspired nurses to take charge and reach their full potential.

"Dedication and commitment are necessary components of nursing leadership. These days, leaders who seize opportunities are overvalued. They should be locals in our town. They genuinely understand our issues and how to resolve them. If leaders do not completely support the admirable goal of professional autonomy, they are meaningless objects. Thus, the time has come for a real and steadfast leader. We are not bearing anything in that sense. They require an established group of backers. I believe nurses will be granted autonomy and acknowledged for their innovative leadership soon."

DISCUSSION

This qualitative study set out to find out how nurse faculty members view empowerment, as well as to examine the state of affairs at the moment and potential avenues for empowerment in specific local contexts. Despite the qualitative character of the study's limited generalizability, important discoveries were investigated that could contribute to a better understanding of the issue. The results demonstrate the core idea of nurse empowerment. "A nurse's empowerment is his/her capacity to make a logical decision based on evidence." Gaining the ability to lead from the front is the primary source of self-worth and confidence.

By motivating others, nurses can foster a personal and professional growth environment. It has been demonstrated through an analytical study that nurses' views of power and access to work empowerment structures impacted their degree of autonomy in both direct and indirect ways. Kanter's structural empowerment Model supports this relationship. The partnership optimizes productivity at work. As a result, feeling autonomous and empowered is closely related to making wise decisions [10]. Lack of structural and psychological power causes nurses to isolate themselves and believe they are unimportant [11]. For meaningful practice experiences and results, the degree of engagement and autonomy in decision-making was necessary [12].

In light of the study recommendations [3]; we argued that the evidence must be considered to make accurate decisions. Utilizing power in a vacuum is just difficult. The nurses were counseled to exercise their authority about politics, knowledge, and moral standards. Making decisions with authority requires thinking beyond the box and taking action to protect others' rights. Thus, empowerment is the first step towards launching creative decision-making [3]. This idea is also supported by a study on the theme, 'an educational model for nurse empowerment [13]. This study suggested building a capacity for reducing the theory-practice gap. Nurses' feelings of exhaustion and irritation from an overwhelming workload are the root cause of ineffective behavior. Maintaining empowerment requires developing nursing competency [13].

Capable nurses have confidence in themselves. This position gains more credibility from the study [14]. This qualitative phenomenological investigation uncovered empowered nurses' essential characteristics. Core characteristics include important people, teammates, and students. Self-determination creates a thirst for lifelong learning. Ongoing learning tactics include identifying students' learning gaps and placing them in conducive learning situations. It grants nurses total control [15].

Organizational cultures should encourage cohesion since they feel fragmented and power-hungry. It's a common belief that solidarity and unity are necessary to achieve professional power. Uniting for the same goal signifies unity. Nurses experience rudeness from colleagues in the field due to self-serving objectives. Setting personal objectives first impedes professional liberty and empowerment. A code of ethics governs how the organization promotes an inclusive environment [16]. Empowerment creates a safe and supportive environment for gaining confidence rather than putting people at risk [16]. The hierarchical organizational structure fosters autocracy. Nurses' sense of powerlessness and the organizational culture's propensity for bureaucracy are closely related. It demoralizes nurses and erodes their sense of self [17].

Restructuring organizations, the active role of the regulating body (PNMC – Pakistan Nursing & Midwifery Council) providing chances for higher education, and engaging in research-based activities are all necessary for nurse empowerment. Nurses must seek those cutting-edge resources to uphold their standing. Organizational chaos is shown in the discrepancy between organizational values and how they are applied [3]. The involvement of regulatory authorities may enable marginalized nurses' proactive decision-making. Including nurses in developing policies is the way to handle this challenging issue. A nurse should play a strategic role rather than one that is chaotic or reactive.

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Nurses should be able to persuasively understand the background and content of the policy-making process to develop and implement policies in the fullest definition of the word [18]. Ultimately, nurses should never give up on education and new knowledge production.

Numerous elements influence fostering higher education and developing nurses' research skills. Encouraging a culture of research begins with lowering the cost of higher education. It boosts newcomers' research capacity, gives them confidence to prepare for research, and promotes an evidence-based culture. The research culture will be paved by this move. Most nurses downplay their participation in research, saying they don't have the skills. This calls for the right guidance and mentoring. If they are given proper credit for their research, nurses will continue it. Motivated individuals easily grasp learning opportunities [19]. In short, empowerment is a road made clear by nurses' professional and personal accomplishments. Integrity, future orientation, respect, and autonomy are some of these values [20]. An ideal work environment is created through professional collaboration. It gives nurses a sense of fulfillment and respect. In conclusion, it will lead to shared leadership, an essential facilitator of professional empowerment [21].

CONCLUSION

The concept of "nurse empowerment" has been thoroughly examined in light of the viewpoints of nursing faculty, and Kantar's "structural model of empowerment" has been employed for analysis. A thorough explanation is given, along with a definition proposal. Several problems, such as organizational structure, discrimination, power-hungry, and division, obstruct nurse empowerment. Nurses are empowered by organizational restructuring, the regulatory body's active engagement, higher education accessibility, and the promotion of an evidence-based approach. Three strategies for empowering nurses were identified: addressing ongoing disagreement, establishing a clear future vision, and cooperating. Research is needed regarding nurses' limited aspirations for gaining empowerment. It's also said that nurses should push themselves more because it hurts them to remain in their comfort zones. It will take more effort and a range of tools to overcome the culture of silence. Persistent work will soon pay off in the form of success.

ETHICS APPROVAL

The Peoples University of Medical & Health Sciences for Women, Nawabshah, SBA ethical review committee provided the ethical approval letter for this study, with letter # PUMHS/SBA/PVC/ 101 dated 01-06-2021. All procedures performed in studies involving human participants were following the ethical standards of the institutional and/ or national research committee and the Helsinki Declaration.

CONSENT FOR PUBLICATION

Informed consent was obtained from the participants of this study.

AVAILABILITY OF DATA

The authors attest that there is no conflict of interest and that the corresponding author may obtain the data to support the study's conclusions upon request.

FUNDING

CONFLICT OF INTEREST

The authors declare no conflict of interest.

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AUTHORS' CONTRIBUTION

The research was conceived by the first and second authors. With the assistance of the second author, the third and second authors created a proposal. A letter of authorization for an ethical review was pursued by the second author. Collectively, the authors contributed to the data gathering, analysis, and manuscript writing. For publication, the second author corresponds with the journal.

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