

Factors Affecting the Health of Women with Disabilities and the Role of the Nurse in the Covid-19 Pandemic

Abstract

Approximately 15% of the world's population is made up of people with disabilities. Disabled people are disadvantaged in many ways. With COVID-19, many changes have occurred in daily life, such as mandatory quarantine practices and the use of masks. The burdens on health services have increased, and vital services have been interrupted. However, the decrease in the number of personnel in the enterprises, the increase in the burden of economic, home, and child care, and the increase in violence have affected individuals socially. However, during the pandemic, disabled women were more affected by these conditions than men. For this reason, nurses who provide primary care have a role in protecting women's health. The aim of this study is to examine the factors affecting the health of disabled women and the role of the nurse in the COVID-19 pandemic.

Keywords: Covid-19, disabled persons, nurse's role, pandemic, women's health

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Introduction

Disability is defined as a state of deterioration of the body or mind. This situation restricts the individual's certain activities and interactions with the world according to the type and severity of their disability.¹ There are approximately one billion people with disabilities in the world.² This number accounts for 15% of the world's population.² According to the 2018 report of the United Nations (UN) gender equality and women's empowerment unit, the rate of women with disabilities over the age of 18 is 19.2%, and the rate of men is 12% globally.³ According to the 2020 report of the UN, one out of every five women is disabled.⁴ The report that has been prepared jointly by the British Embassy in Türkiye, the Family Planning Foundation of Türkiye, and the UN Population Fund has shown that the rate of women with disabilities is higher than that of men in Türkiye.⁵ Being an individual with disabilities affects the elderly, children, and women more.³ This is because women with disabilities are exposed to gender-based discrimination, sexual violence, and abuse and have less access to health services.³

The SARS-CoV-2 virus, which broke out in China in December 2019, was declared a pandemic by the World Health Organization on March 11, 2020.⁶ Women with disabilities have limited access to health care because health centers and necessary equipment are not easily accessible the disabled, and health professionals do not have enough knowledge about the care of these individuals.⁵ During the pandemic, these restrictions increased, and the well-being of individuals with disabilities and their use of rights decreased by 1.39 times, and their natural support mechanisms decreased by 1.42 times.⁸ In a study conducted in the United Kingdom during the COVID-19 pandemic, it was determined that the death rate increased 3.5 times in women and 3.1 times in men who had high degrees of disability. For this reason, nurses who provide primary health care for women with disabilities have critical roles. This review was conducted to examine the impact of the COVID-19 pandemic on the health of women with disabilities and the role of the nurse.⁹

Economic Factors and the Health of Women with Disabilities during the Covid-19 Pandemic

In the COVID-19 pandemic, businesses have had to downsize, and female individuals with disabilities have been the first to be affected by this situation.¹⁰⁻¹² According to

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the 2020 report of the UN, women with disabilities worked in jobs without social security, were dismissed, had difficulty returning to work, and had to do more housework during the pandemic.^{4,13} While the workload of women with disabilities increased by 15% during the pandemic in Türkiye, 18% of those working remotely and from home were deprived of travel and food allowances.¹⁴ In a study conducted in Jordan, 84% of women with disabilities could not meet their basic needs such as food, house rent, medicine, and health services during the pandemic, primarily due to financial reasons.¹⁵ The increasing poverty in the pandemic increased pregnancy-related deaths, sexually transmitted diseases, abuse, and violence.^{16,17} The violence experienced by women with disabilities increased by 18.7% during the pandemic.¹⁴ The economic difficulties experienced also brought about psychological problems.¹⁸ In a study conducted during the COVID-19 pandemic, it was determined that unemployed people with disabilities were worried about employment and that the level of anxiety was 2 times higher in the unemployed group than in the employed.¹⁸ Therefore, the lower welfare level of women with disabilities would naturally bring health problems compared to other individuals.

Social Factors Affecting the Health of Women with Disabilities during the Covid-19 Pandemic

There are some studies on social factors affecting the health of women with disabilities during the pandemic.¹⁹⁻²² These social factors are that women with disabilities need someone else's help; their sexuality is ignored;²³ they are more exposed to violence; they cannot take measures to reduce virus transmission;²³ their communication is restricted;¹⁹ and there is not enough documentation and information.²³

Most women with disabilities need help or guidance while carrying out their daily activities and receiving care.^{20,21} For example, a woman with a spinal cord injury gets help from another person; a woman with impaired sight uses her sense of touch; and a woman with impaired hearing uses lip reading to communicate.²⁰ During the pandemic, women with impaired hearing could not lip-read due to masks, and individuals who helped women with disabilities refrained from entering crowded places such as hospitals, all of which limited access to health-care services.^{20,21} Having to use the sense of touch and the inability to effectively wear the mask increased the risk of transmission.²⁰

In a study conducted during the COVID-19 period, it was stated that people with disabilities felt dependent on others for their basic needs and were worried about this situation.²⁰ Araten-Bergman and Shpigelman²⁴ determined that the face-to-face communication of women with disabilities decreased from approximately 91-31.5% during the pandemic, and this situation limited communication. Morrow, Patel, and Duff²⁵ stated that the use of masks reduced the success of communication. These problems disrupted family planning services and antenatal and gynecological care visits, prevented early diagnosis, and increased the risk of infection, unwanted pregnancies, and death rates in women with disabilities.^{21,26-29} In the study conducted by the Turkish Federation of the Blind with women with disabilities, it was stated that 45.3% of the women were not adequately informed about health services and pandemic hospitals.¹⁴ For this reason, it is necessary to strengthen home care services to reduce the risks that

women with disabilities may face, and these women should not be ignored during health-care planning.⁷

During the pandemic, household chores, the burden of childcare, and violence increased.⁷ In this period, the exposure of women with disabilities to different types of violence increased 3 times compared to other women.³⁰ Discrimination and stigma became more common.³⁰ The uncertainty brought by the pandemic, the burden of gender roles, and the risk of contamination for the individual or his/her loved ones caused psychological pressure.^{10,30,31} For these reasons, social support services where women with disabilities can get help are important.⁷

Changes in Health care and the Health of Women with Disabilities during the Covid-19 Pandemic

During the COVID-19 pandemic, many changes have taken place in the delivery of health-care services.³³ Many hospitals and health-care services were allocated for pandemic services worldwide, and non-pandemic preventive care services, primary care, and non-emergency services were reduced.³²⁻³⁶ Gynecological services, antenatal follow-up visits, pregnancy education, family planning, and breastfeeding counseling services were examples.³²⁻³⁶ For this reason, it was suggested that some services related to public health during the pandemic be carried out online, by phone calls, or through appointment systems.^{34,36} However, communication problems among women with disabilities and their inability to access health-care services prevented them from using these systems.³¹ The Turkish Federation of the Blind stated that approximately 44% of women with disabilities needed psychological support due to the priority given to pandemic-related health-care services, but 93% of these women could not receive psychological support.¹⁴ In the study by the Non-Governmental Organization for Humanity and Inclusion in Jordan, it was determined that 88% of women with disabilities could not make regular hospital visits.¹⁵ In the report published by the UN's Department of Economic and Social Affairs, it was stated that 22% of married women with disabilities could not meet their family planning needs from the date when COVID-19 showed up until May 2020.³⁷ To eliminate these risks, health services for all women with disabilities should be organized to cover pandemic conditions. Educators who know sign language should be included in education programs, and accessible information sources should be provided.^{14,33}

The Health of Women with Disabilities and the Role of the Nurse during the COVID-19 Pandemic

Nurses are actively involved in pandemic management and maintaining health services.³⁶ These health services also include the care given to women with disabilities.³⁸ When the services provided by nurses to improve women's health are integrated into the system to benefit women with disabilities, a positive change can be observed in their health.³⁹ The first factor in achieving this positive change is the establishment of appropriate communication between the nurse and the woman with disabilities and the determination of the woman's needs.^{27,30} In today's conditions, the reduction of hospital visits, the use of masks, and the lack of health personnel's knowledge of sign language restrict this communication.^{7,30,36,38,39} Nurses, who are also responsible for providing holistic care under pandemic conditions, should take part in sign language training and the provision of guides prepared in Braille to communicate with these women.⁴⁰⁻⁴⁴ They should not ignore the sexual lives of women with disabilities and

use visual material in education programs. The difficulties caused by the stigma and discrimination applied to women with disabilities during the pandemic should be evaluated. Nurses should use technology to help women with disabilities receive health-care services.^{43,44} It is also necessary to explain the routes of transmission, symptoms, prevention methods, COVID-19 tests, and places to receive social services to women with disabilities who have limited access to information during the pandemic.^{17,20,27,43}

Conclusions and Recommendations

The changes in economic, social, and health services, together with the existing difficulties, weaken the economic power of women with disabilities and restrict their communication and access to health services. In addition, they pose a risk for increased morbidity and mortality rates. At this point, the nurse, who gives holistic care, plays a critical role. In addition to services such as preconception, antenatal care, family planning, and breastfeeding counseling in screening programs to improve women's health, nurses, who are responsible for providing information about the prevention methods and symptoms of COVID-19, should offer opportunities to women with disabilities so that these services are accessible.

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