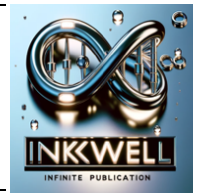




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Original Article

Quality of Life Amongst Saudi Physiotherapists: A Review of Burnout, Job Satisfaction and Work-Related Well-Being

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Abstract

Background. Physiotherapists are integral to the development of Saudi Arabia's healthcare system; however, their quality of life (QoL) and work-related well-being have not been comprehensively examined. Identifying determinants such as job satisfaction, burnout, workload, cultural adaptation, and professional recognition is critical to maintaining a resilient, motivated workforce. **Method.** This narrative literature review synthesised evidence regarding QoL among physiotherapists in Saudi Arabia. Systematic searches of PubMed, Scopus, Web of Science, and Google Scholar (2010–2025) identified English-language empirical studies conducted in Saudi Arabia or involving cross-national comparisons. Study selection adhered to a PRISMA-style process with independent validation. Data were systematically extracted on study design, sample characteristics, QoL measures, and key outcomes, and findings were synthesised thematically within national and global contexts. **Results.** Fourteen studies met the inclusion criteria. Saudi physiotherapists reported moderate to high occupational stress, primarily due to heavy workloads, ambiguous career progression, and inconsistent organisational support. Expatriate physiotherapists, who represent a significant portion of the workforce, encountered additional challenges related to cultural adjustment, communication, and inconsistent orientation practices. International comparisons revealed similar QoL concerns globally, although healthcare reforms under Vision 2030 present unique contextual influences in Saudi Arabia. Significant gaps persist in national data regarding burnout prevalence, mental well-being, and work-life balance. **Conclusion.** The QoL of physiotherapists in Saudi Arabia is influenced by the interplay of workload, organisational, and cultural factors. Strengthening professional support, career development opportunities, and workforce policies may enhance well-being and retention. Further large-scale, methodologically robust studies are necessary to inform evidence-based workforce planning and policy.

Keywords: Quality of Life, Physiotherapists, Saudi Arabia, Job Satisfaction, Burnout, Vision 2030

Introduction

The term quality of life (QoL) refers to an individual's comprehensive sense of well-being, encompassing physical, mental, social and environmental dimensions. The World Health

Organization (WHO; n.d.) characterises QoL as an individual's perception of their position in life within the framework of the cultural and value systems they inhabit and in relation to their goals,

expectations, standards and concerns. In health research, QoL is frequently referred to as health-related quality of life (HRQoL), given that physical and mental health profoundly influence an individual's overall QoL.

The WHO Quality of Life (WHOQOL) assessment instruments employ standardised questionnaires to assess the physical, psychological, social and environmental domains. HRQoL models, such as the Wilson–Cleary model, associate objective health status and individual or environmental factors with subjective QoL (Wilson & Cleary, 1995). Ferrans et al. (2005) revised the Wilson–Cleary model to emphasise how personal and environmental factors influence biological functions, symptoms and functional status, which in turn affect QoL. These frameworks highlight how QoL is a complex concept that is contingent upon age, physical fitness and work–life circumstances (i.e. stressors and support). In the context of employment, quality of work life (QWL) is significant, although healthcare workers consider both professional and personal aspects when evaluating the quality of their lives (Ferrans et al., 2005).

Validated tools, such as the WHOQOL-BREF and the 36-Item Short Form Survey (SF-36), assess an individual's physical, psychological and social well-being. Researchers have emphasised the importance of models explaining the different components of QoL and their causal relationships (Ferrans et al., 2005). Physiotherapists' QoL encompasses their job satisfaction, emotional well-being, physical health (e.g. risk of lifting injuries) and work–life balance. A recent study indicated that the lifting and repetitive motions typical in physiotherapy increase the risk of attrition, work-related accidents and disorders that affect physical therapists' QoL and work performance (Al Ali et al., 2024). Moreover, the

demands of the physiotherapy profession may impair practitioners' QoL (Ali et al., 2024), prompting research into factors such as physical activity, body mass index (BMI) and stress that may enhance their QoL.

Physiotherapists play a vital role in Saudi Arabia's expanding healthcare system, driven by population ageing, lifestyle-related diseases and national reform initiatives under Vision 2030. Despite this growing demand, concerns about physiotherapists' QoL, including job satisfaction, physical strain, work–life balance and professional recognition, remain underexplored. Existing studies suggest that physiotherapists face significant occupational pressures (Alsenan et al., 2025), yet national research examining their QoL has been limited. As such, the current review aims to synthesise current evidence to address this gap and provide a clearer understanding of the challenges affecting the physiotherapy workforce in Saudi Arabia.

Conceptual Framework

QoL in the health workforce reflects an individual's perception of their well-being across the physical, psychological, social and environmental domains (WHO; n.d.). Models such as the revised Wilson Cleary framework (Ferrans et al., 2005) and contemporary QoL approaches (e.g. Testa & Simonson, 1996; Reeve et al., 2013) emphasise the interaction between health status, environmental demands and personal factors. For healthcare practitioners, these elements intersect with professional stressors, including workload, autonomy and leadership, all of which shape overall QWL (Van Laar et al., 2007).

In Saudi Arabia, the physiotherapy profession has expanded rapidly, increasing the urgency of understanding how QoL frameworks apply within

this national context (Alanazi et al., 2023). Thus far, limited research has examined how systemic changes, workforce growth and evolving clinical demands influence physiotherapists' QoL, highlighting a clear knowledge gap, which this review seeks to address (Watson et al., 2025).

Job Satisfaction and Work Conditions

Research consistently indicates that physiotherapists in Saudi Arabia report moderate to low job satisfaction, shaped by leadership quality, workload and limited opportunities for advancement (AlEisa et al., 2015; Alkassabi et al., 2018). Alkassabi et al. (2018) found that whilst peer relationships and professional development were viewed positively, dissatisfaction stemmed from unclear promotion pathways and inadequate supervisory support (Eker et al., 2004). These can also reinforce the same patterns, highlighting administrative complexity and variable managerial competence as key stressors.

Meanwhile, transformational leadership is positively associated with autonomy, engagement and perceived professional value, underscoring the importance of organisational culture in shaping QWL (AlEisa et al., 2015; Alkassabi et al., 2018; Morsiani et al., 2017). Emerging evidence also suggests that early-career physiotherapists experience higher burnout risks due to workload pressures and a lack of structured mentorship (Alsenan et al., 2025).

Occupational Income Perception

Studies indicate that physiotherapists perceive their profession as undervalued within the Saudi healthcare hierarchy. For example, Alodaibi et al. (2022) reported low ratings of occupational prestige and salary satisfaction, noting that limited public awareness of physiotherapy roles

contributes to diminished professional identity. Eker et al. (2004) emphasised how income disparities across institutions and regions further affect morale and retention.

Physical Health and Musculoskeletal Disorders

Work-related musculoskeletal disorders (WMSDs) remain one of the most significant factors affecting physiotherapists' QoL (Takrouni et al., 2025). In fact, high prevalence rates of lower back pain have been reported across various regions (Takrouni et al., 2025; Alshuwehi et al., 2025), which has been attributed to manual handling, repetitive strain (Alsenan et al., 2025), and insufficient ergonomic resources. Updated evidence (Takrouni et al., 2025) suggests that fatigue, prolonged standing, and heavy caseloads further increase the risk of WMSD, contributing to absenteeism and reduced clinical performance among physiotherapists. Additionally, preventive strategies, such as ergonomic redesign, staffing adjustments and training in safe handling, remain inconsistently implemented across facilities, which can reinforce the need for national standards (Alghadir et al., 2017).

METHODOLOGY

A narrative literature review was conducted to synthesise the available evidence on QoL amongst physiotherapists in Saudi Arabia. The primary objectives were to identify the critical occupational, psychological and organisational determinants of physiotherapists' QoL; synthesise national results within a global framework; and highlight both policy and research implications in accordance with Saudi Vision 2030.

Data extraction followed a structured process in which information was collected on the study

design, sample size, participant demographics, setting, QoL measurement tools and primary outcomes. Attrition numbers were verified directly from each study where attrition data were missing or unclear. A workforce distribution was included to provide clearer contextual demographics once consistent national reporting figures were obtained. This step aimed to improve clarity on physiotherapy workforce composition across regions, genders and employment sectors. Potential biases, including publication bias (due to reliance on peer-reviewed studies), language bias (English-only inclusion) and selection bias (given variability in survey recruitment methods) were considered.

PRISMA-Style Narrative Flow Summary

A total of 32 records were identified through database searches. After removing duplicates, 27 unique records remained. Title and abstract screening excluded nine records due to irrelevance to physiotherapy or QoL outcomes. Full-text screening was conducted for 18 articles, of which four were excluded due to a lack of empirical data. A final total of 14 studies met all inclusion criteria and were included in the thematic synthesis.

Next, a narrative literature review was conducted. A comprehensive search was performed in PubMed, Scopus, Web of Science and Google Scholar using combinations of controlled vocabulary and free-text terms, including 'physiotherapist', 'physical therapist', 'quality of life', 'job satisfaction', 'burnout', 'mental health', 'work-life balance' and 'Saudi Arabia'. Boolean operators (AND/OR) were applied. A sample search string (PubMed) was as follows: ('physiotherapist' OR 'physical therapist') AND ('quality of life' OR 'job satisfaction' OR 'burnout' OR 'work-life balance') AND 'Saudi Arabia'. The

initial search and screening were conducted by one reviewer, followed by validation by a second reviewer. The inclusion criteria were as follows: (1) English-language empirical studies (2010–2025), (2) physiotherapist-targeted or allied health-related QoL research and (3) studies conducted in Saudi Arabia or with cross-national comparisons. The exclusion criteria included nonempirical articles, conference abstracts and studies that were not related to professional well-being. A total of 32 records were identified, of which 14 met the inclusion criteria after screening.

Data were extracted on study design, setting, outcomes measured and findings. A thematic synthesis was conducted to classify the evidence into five domains: workload and burnout, compensation and career advancement, work-life balance, job satisfaction and psychological well-being. International studies were analysed to contextualise the Saudi data, identify parallels and variations in the QoL drivers and outline directions for future research. This approach facilitated a comprehensive understanding of how occupational and systemic issues jointly affect QoL amongst physiotherapists in Saudi Arabia's changing healthcare context.

Ethical Consideration

This study was based entirely on previously published literature and did not involve human participants or identifiable personal data. Therefore, ethical approval and informed consent were not required. The review was conducted in accordance with the principles of research integrity and transparent reporting. As this review involved no human participants or identifiable data, informed consent was also not required.

Results

Physiotherapy Professionals in Saudi Arabia

The Saudi government vigorously advocates the benefits of rehabilitative services; for example, its national health strategy includes therapeutic and rehabilitative care as a strategic foundation (Saudi Health Council, 2022). Indeed, the overarching objective of the Health Sector Transformation Program, which forms part of Vision 2030, is to improve the quality and accessibility of healthcare, including the integration of rehabilitation care, in the country (Alanazi et al., 2023).

This policy context emphasises the need for stable and content physiotherapy personnel. Nonetheless, workforce planning must account for achieving a high QoL. Maintaining the employment of competent physiotherapists requires focusing on how they work and whether their overall well-being is nurtured. Current information suggests that, whilst the number of physiotherapists in Saudi Arabia is increasing, there is a disparity between the workforce's dispersion and regional demand (Wasfi et al., 2024). Ensuring the sufficiency of the physiotherapy workforce requires not only hiring and training additional physiotherapists but also improving the conditions affecting their QoL.

Physiotherapists in Saudi Arabia predominantly practice in government and private healthcare facilities. Recent national reports from the Saudi Commission for Health Specialties (SCFHS) and the Ministry of Health (MoH) indicate steady growth in the physiotherapy workforce in accordance with Vision 2030 goals. The rapid expansion of the physiotherapy workforce in Saudi Arabia has important implications for QoL and QWL amongst clinicians. Recent national registry data indicate that the SCFHS has documented approximately 12,544 licenced physiotherapists across the country (SCFHS, n.d.), reflecting substantial workforce growth in line with Vision

2030 rehabilitation priorities. Furthermore, a 2024 study conducted by the Saudi MoH revealed that there are 2225 physiotherapists employed by the ministry for a population of approximately 32 million, indicating a ratio of 0.69 per 10,000 individuals (Wasfi et al., 2024). Incorporating the private sector into the data increases this ratio to 1.92 per 10,000.

Regional variations in the physiotherapist-to-population ratio exist. For instance, the Riyadh region recorded approximately 0.4 physiotherapists per 10,000 individuals, whereas the Al Jouf region reported 2.5 physiotherapists per 10,000 (Wasfi et al., 2024). Saudi Arabia's physiotherapist-to-population ratio surpasses the regional median, although it remains significantly lower than that of other high-income nations. By comparison, neighbouring Kuwait has approximately 1.2 physiotherapists per 10,000 individuals, whereas Bahrain, Oman and the United Arab Emirates have just 0.1–0.4 per 10,000 (Wasfi et al., 2024). These comparisons situate the status quo in Saudi Arabia from the local and global contexts.

Key Factors Affecting Physiotherapists' QoL in Saudi Arabia

Several interconnected factors, including workload and burnout, compensation, work-life balance, job satisfaction, professional development, psychological stress and mental health, impact Saudi physiotherapists' QoL. In terms of physiotherapists' workloads and burnout, the work involved in this profession entails significant physical and cognitive demands. These factors have been recognised in regional studies and correspond to global findings. Recent research from Saudi Arabia indicates that many physiotherapists work long hours whilst managing substantial caseloads. For

instance, Al-Imam and Al-Sobayel (2014) found that Saudi physiotherapists experience moderate burnout, noting a significant correlation between their workloads and the exhaustion aspect of burnout. Similarly, Student and workforce surveys identify excessive working hours as a significant concern that negatively impacts physiotherapists' physical and mental well-being (Alshewaier, 2025). In allied healthcare professions, extended shifts are linked to higher rates of burnout and reduced life satisfaction. A study conducted in Riyadh found that 8-hour shifts led to greater life satisfaction and reduced burnout compared with 12-hour shifts (Alotaibi et al., 2025). Consequently, excessive workloads and inadequate work-life balance can substantially diminish physiotherapists' QoL.

Physiotherapists' compensation and benefits represent another significant area of concern. A survey conducted in Riyadh amongst 69 physiotherapists found that many respondents reported dissatisfaction with their compensation, the promotion opportunities provided and the fringe benefits they obtain from their current posts (Alkassabi et al., 2018). Low or stagnant wages can adversely impact QoL by inducing financial stress and a feeling of being undervalued. Comparable trends have also been observed in other nations. For instance, Croatian physiotherapists working in private practice indicated greater job satisfaction than their peers in government-funded settings, which can be partially attributed to their greater financial compensation (Puhanić et al., 2022). Hence, enhancing remuneration and career-related incentives may improve physiotherapists' QoL.

Achieving a healthy work-life balance requires flexible scheduling and reasonable working hours. In Saudi Arabia, the duration of shifts and on-call responsibilities affects physiotherapists'

personal lives. As mentioned above, physiotherapists working 12-hour shifts reported lower levels of job and life satisfaction than their counterparts working 8-hour shifts (Alotaibi et al., 2025). Extended working hours contribute to fatigue and diminish opportunities for family and leisure activities. Additionally, obligations such as on-call duties or weekend clinics can disrupt physiotherapists' work-life balance. Whilst large-scale studies on work-life balance in Saudi Arabia are lacking, evidence concerning allied health professions indicates that shorter shifts and more predictable schedules may enhance life satisfaction and decrease burnout (Alotaibi et al., 2025).

Related to the above, job satisfaction is a significant QoL indicator, particularly in relation to professional development. Research conducted in Saudi Arabia indicates that physiotherapists exhibit moderate overall job satisfaction. For instance, Alkassabi et al. (2018) found that physiotherapists demonstrated ambivalence regarding their job satisfaction, indicating that they were neither fully satisfied nor fully dissatisfied. The factors influencing satisfaction in this context included interpersonal relationships with colleagues and the characteristics of the work itself. Another study found that only 37% of Saudi physiotherapists reported global job satisfaction, with higher satisfaction noted in relation to professional development and teamwork, but lower satisfaction in terms of supervisory relationships and the work environment (AlEisa et al., 2015).

Professional growth opportunities have also been identified as a significant factor affecting physiotherapists' QoL. In this regard, physiotherapists with greater access to career advancement and training opportunities generally reported increased job satisfaction. In one study,

professional development opportunities showed an adjusted odd ratio (OR) of 1.4 in relation to job satisfaction (AlEisa et al., 2015). In contrast, administrative issues, such as inadequate supervision and insufficient feedback, contributed to job dissatisfaction. Thus, job satisfaction amongst Saudi physical therapists is variable and frequently hindered by organisational constraints. Furthermore, low job satisfaction can negatively impact QoL by influencing motivation, confidence and career aspirations.

Stress, anxiety and mental exhaustion are factors that negatively impact QoL. Musculoskeletal pain resulting from the physical demands of physiotherapy work can lead to psychological distress. For instance, a 2025 survey of Saudi physiotherapists revealed a significant prevalence of work-related lower back pain and related psychological distress in this population, with stress identified as a strong predictor of pain and diminished well-being (Alsenan et al., 2025). However, the survey mostly focused on pain-related outcomes. Research amongst healthcare professionals in the Arab region has also revealed considerable levels of work-related stress. In a study involving allied health professionals, 90% of participants reported experiencing at least moderate levels of burnout and/or traumatic stress (Alotaibi et al., 2025). This finding indicates that Saudi physiotherapists are also likely to encounter moderate to high levels of stress. Mental health strains, including burnout and anxiety, can be diminished by addressing fatigue, mood disturbances and decreased life satisfaction.

In summary, the interplay of work-related factors, such as demanding schedules, substantial workloads and inadequate compensation,

alongside psychosocial factors, such as stress and lack of support, significantly impacts the QoL of physiotherapists in Saudi Arabia.

Work-Related Circumstances and QoL of Saudi Physiotherapists

Recent studies have investigated the work-related circumstances and welfare of Saudi physiotherapists. Al-Imam and Al-Sobayel (2014) performed a cross-sectional survey of 119 Saudi physiotherapists who were primarily employed in government facilities. They evaluated occupational burnout using the Maslach Burnout Inventory. A moderate level of burnout was identified across all subscales, with most physiotherapists experiencing moderate to high levels of burnout. Significantly, increased workload and certain specialties (e.g. paediatric physiotherapists) were associated with greater fatigue. The findings of this study highlight how burnout is a widespread concern correlated with specific work-related circumstances.

Similarly, Al-Eisa et al. (2015) surveyed 166 physical therapists (Saudi and non-Saudi) regarding their overall job satisfaction. Only 37% indicated global job satisfaction. The highest level of satisfaction was related to professional growth and peer collaboration, whereas the lowest level was related to supervisors and the work environment. Meanwhile, logistic regression revealed significant indicators of increased job satisfaction, including female gender, advanced age, a positive supervisor relationship, a supportive work environment and opportunities for professional progress (OR \approx 1.4). The authors proposed a number of solutions to increase physiotherapists' job satisfaction and retention, including enhanced supervision and career pathways.

In a study conducted across public and private facilities in Riyadh, Alkassabi et al. (2018) utilised the Job Descriptive Index to assess employee satisfaction. They found that most physiotherapists exhibited ambivalence regarding their employment, expressing being 'neither satisfied nor dissatisfied'. Satisfaction was elevated in terms of intrinsic elements (the nature of physiotherapy work) and coworker relationships, but it was diminished for extrinsic factors (compensation, promotions and fringe perks). Significantly, almost 22% of physiotherapists indicated that they would resign if doing so was feasible, implying moderate turnover intention. This study determined that augmenting leadership and organisational support helped increase physiotherapists' job satisfaction.

Al Ali et al. (2024) assessed QoL amongst Saudi physiotherapists using the WHOQOL-BREF amongst the 258 participating practitioners; the median overall QoL score was moderate: around 63 on a 0–100 scale. As the majority of physiotherapists reported engaging in modest levels of physical exercise, QoL was found to be positively correlated with both physical activity and age and negatively correlated with BMI. Notably, 98% of the participants had satisfactory overall QoL. This study revealed that Saudi physiotherapists generally perceived themselves to have a somewhat favourable QoL, driven by lifestyle factors. Furthermore, the profession's challenging characteristics serve as background factors affecting physiotherapists' QoL.

Surveys conducted amongst Saudi physiotherapy students and professionals reveal challenges that indirectly affect their QoL. For example, a student survey indicated physical stress and prolonged education as primary concerns, although only 35% of respondents identified physical stress as

the most significant issue affecting their QoL (Alshewaier, 2025). This study highlighted how excessive working hours, which persistently deplete practitioners' physical and mental energy, represent a significant issue within the profession. These insights highlight how physiotherapists regard their workload as a significant source of stress.

Collectively, studies conducted in the Saudi context have indicated that the physiotherapy workforce is moderately satisfied but experiencing significant strain. Burnout is prevalent, whilst job satisfaction is generally higher for intrinsic work factors than for extrinsic factors, such as compensation or organisational support. These factors likely result in moderate overall QoL, as indicated by Al Ali et al. (2024), although there remains potential for improvements via organisational changes.

Global Comparison

Comparing findings from Saudi Arabia with global data provides additional context concerning the significance of QoL issues amongst physiotherapists. The prevalence of burnout and stress amongst physiotherapists is widely acknowledged at an international level. For example, a systematic 2024 review analysed 32 studies involving approximately 6000 physical therapists from 17 countries. The results revealed an overall burnout prevalence of approximately 8%, with emotional exhaustion reported by 27% of therapists (Venturini et al., 2024).

Yet, job satisfaction amongst physiotherapists differs by country. Research in Croatia found that physiotherapists were predominantly satisfied with their employment, particularly with their colleagues and advancement prospects; however, they stated that support from

supervisors was lacking (Puhanić et al., 2022). Moreover, burnout was assessed as moderately high in terms of the dimensions of weariness and disengagement (Puhanić et al., 2022). In contrast, physiotherapists' satisfaction in Saudi Arabia appeared lower (37% compared with elevated levels in Croatia), possibly indicating disparities in work culture or management practices between the two countries (AlEisa et al., 2015; Puhanić et al., 2022). Research in other Western nations has suggested that assistance and autonomy enhance physiotherapists' satisfaction, whilst bureaucracy and excessive caseloads diminish it. Similar trends have been observed in Saudi Arabia (Alkassabi et al., 2018; AlEisa et al., 2015).

Additionally, allied health surveys conducted in other regions have confirmed the abovementioned findings regarding the impact of shift work. In particular, a US study found that physiotherapists working 12-hour shifts experienced significantly greater burnout and reduced life satisfaction than their counterparts working 8-hour shifts (Alotaibi et al., 2025). Research conducted in Canada and Scandinavia found that physiotherapists' QoL is linked to factors such as workload, recognition and working conditions (Berman, 1990; Hudon et al., 2015; Rosenberg & Bonsaksen, 2022).

The QoL challenges faced by Saudi physiotherapists are not distinctive. Issues such as heavy lifting, extended working hours and limited opportunities for career advancement are also prevalent worldwide. However, certain factors in the Saudi context, characterised by recent professionalisation, rapid healthcare expansion and cultural factors, may exacerbate distinct issues related to workforce nationalisation (Saudisation) and gender roles in the healthcare sector.

Discussion

Implications for Healthcare Policy and Workforce Development

The findings discussed above have significant implications for policymakers and healthcare leaders in Saudi Arabia, especially regarding workforce allocation and planning. In light of Vision 2030's emphasis on enhancing rehabilitation services (Wasfi et al., 2024), maintaining an adequate and equitably distributed physiotherapy workforce is essential. Achieving this objective requires both training new physiotherapists and retaining current practitioners. The Saudi physiotherapy workforce has expanded considerably, with approximately 12,544 licensed physiotherapists registered with the Saudi Commission for Health Specialities (SCFHS, n.d.), which aligns with Vision 2030's aim to broaden rehabilitation services nationwide.

Adverse Effects of Stress and Discontent on Employee Retention

In allied health professions, elevated job stress and burnout have adverse effects on the retention of healthcare personnel (Alkassabi et al., 2018). Furthermore, moderate satisfaction amongst physiotherapists could lead to higher turnover, which means that efforts must be made to ensure high satisfaction and retention (AlEisa et al., 2015). Relevant policy actions may include establishing staffing quotas (Saudisation targets), financing physiotherapy education programmes in underprivileged areas and assessing regional workforce requirements, as suggested in prior rehabilitation workforce evaluations (Wasfi et al., 2024).

Competitive Salaries

Offering competitive salaries and well-defined career development pathways could also improve physiotherapists' QoL and foster retention. Surveys conducted in Saudi Arabia revealed dissatisfaction with pay and promotion, underscoring the need to review physiotherapists' compensation structures (Alkassabi et al., 2018; AlEisa et al., 2015). Establishing tiered career ladders or specialist tracks (e.g., paediatric or sports therapy) may provide physiotherapists with clear goals and incentives. Opportunities for professional advancement are another significant predictor of job satisfaction (AlEisa et al., 2015). Thus, facilitating postgraduate training and continuing professional development could enhance skills and elevate physiotherapists' sense of value and morale.

Hospital Regulations

Regulators and hospital administrators should implement policies designed to manage physiotherapists' workloads and schedule more effectively. This could involve restrictions on the number of patients assigned to each physiotherapist, the addition of required rest periods and the reduction of shift durations. Research amongst allied health professionals has shown that shorter shifts are associated with greater life satisfaction and lower burnout (Alotaibi et al., 2025). Hence, hospitals could implement pilot programmes comparing 8-hour and 12-hour shifts or adopt team-based scheduling to maintain coverage whilst preventing overwork. Monitoring physiotherapy burnout metrics, similar to methods used in nursing, might also provide early warning data indicating when intervention is needed, thus facilitating more efficient tasking. Biggs et al. (2025) also identified significantly elevated burnout levels amongst UK physiotherapists attributed to certain characteristics, such as moral injury and

perfectionism, suggesting that regular monitoring might help identify at-risk individuals before turnover or detrimental outcomes occur.

Enhancing physiotherapists' work environments and supervision requires changes in leadership approaches and organisational culture. Evidence from Saudi Arabia and international literature underscores the significance of supportive supervision, constructive feedback, and positive coworker relationships in improving physiotherapists' satisfaction and quality of life (AlEisa et al., 2015; Alkassabi et al., 2018). Training healthcare facility managers to adopt transformational or servant leadership styles has the potential to increase physiotherapists' job satisfaction (Alkassabi et al., 2018). The implementation of peer support programmes, mentoring initiatives, and open communication channels can further strengthen morale among physiotherapists. Additionally, recognising exemplary practitioners and providing wellness resources, such as counselling and stress management workshops, may help address mental health challenges effectively.

At the same time, the elevated levels of stress, burnout and musculoskeletal issues amongst physiotherapists identified in previous studies indicate the necessity of health-oriented interventions in this population. Occupational health services must incorporate ergonomic training to mitigate the risk of injury and implement mental health screening for physiotherapists. Promoting regular physical activity amongst physiotherapists, which has been positively associated with improved QoL, could also be an integral component of wellness programmes (Al Ali et al., 2024). Following the COVID-19 pandemic and considering other stressors, physiotherapists must be provided with

sufficient psychological support and work-life balance to maintain workforce sustainability.

In terms of informed policymaking, continuous data collection and monitoring are essential. The recent WHO-Eastern Mediterranean Region (WHO-EMRO) report on rehabilitation highlighted that whilst the supply of physiotherapists in Saudi Arabia significantly exceeds regional standards, the distribution does not align with demand (Wasfi et al., 2024; WHO, n.d.). However, this analysis relied solely on MoH data and excluded private-sector therapists. A national survey of all current physiotherapists—one that covers the public and private sectors—would facilitate a more precise understanding of the workforce dynamics and QoL indicators. Standardising QoL and job satisfaction surveys, potentially as a component of SCHS licensing or workplace accreditation, would facilitate the accurate monitoring of trends over time.

In summary, healthcare policymakers should consider physiotherapists' quality of life as essential to overall healthcare quality. Satisfied and healthy physiotherapists are more likely to remain in the profession and provide high-quality therapy, thereby supporting the Saudi Arabian government in achieving its health objectives. Implementing targeted interventions, such as increased compensation, supportive management, and regulated workloads, may improve performance and retention (AlEisa et al., 2015; Alkassabi et al., 2018).

Gaps in the Literature and Future Research Directions

Although existing research has expanded, significant gaps persist in comprehensively understanding physiotherapists' QoL in Saudi Arabia. Further studies employing standardized

instruments such as the WHOQOL-BREF or SF-36 are required to quantify both overall and domain-specific QoL among physiotherapists. Such research would enable robust comparisons across different populations and time periods.

Prior surveys have also been geographically confined (often to Riyadh or major hospitals) and have involved modest sample sizes. National-level studies that encompass various locations, sectors (public versus private) and specialties (e.g. paediatrics, geriatrics and sports) are required. Similarly, qualitative research (focus groups and interviews) could help to investigate the reasons why particular factors influence QoL and collect suggestions for further improvements.

Given that most previous studies have been cross-sectional in nature, collecting and analysing longitudinal data would be valuable for extending current findings on the topic. For example, longitudinal research could be used to monitor changes in QoL and burnout over the course of a physiotherapist's career or in response to interventions (e.g. revised shift schedules). Such data would also assist in establishing causal relationships (e.g. whether reducing work hours could significantly enhance QoL). Furthermore, broader factors, including cultural and societal influences, such as expectations placed on female therapists, community esteem and familial support, have received limited research attention to date. As Saudi Arabia diversifies its workforce by incorporating more women and expatriates, future studies should investigate the impact of demographics and cultural dynamics on QoL.

Additionally, intervention studies involving trials or pilot projects that implement modifications (e.g. schedule adjustments, leadership training and wellness programmes) and assess their

impact on QoL are nearly non-existent in the literature. To address this issue, future studies could evaluate such activities to help inform policy. For instance, determining whether flexible work hours or increased monitoring reduces turnover could directly inform the management of physiotherapists' workloads.

In terms of benchmarking against other nations, comparative analyses could investigate the reasons behind the superior QoL reported by physiotherapists in some countries. Whilst generic international data on burnout exist, research on country-specific QoL is limited. Thus, collaborative research in the Gulf region or beyond could lead to the identification of optimal approaches for improving physiotherapists' QoL.

Despite the breadth of evidence synthesised in this review, several limitations should be acknowledged. First, the use of a narrative review methodology, whilst appropriate for mapping broad patterns across heterogeneous studies, inherently limits reproducibility and increases the potential for interpretive bias. Unlike systematic or scoping reviews, narrative approaches rely heavily on author-driven selection and thematic organisation, which may affect the balance of the perspectives presented.

Second, although a structured search strategy was applied, the possibility of search incompleteness cannot be fully eliminated. Relevant studies, particularly regional reports, grey literature or non-indexed publications from Middle Eastern contexts, may not have been captured. This is especially pertinent in areas wherein formal research on physiotherapists' work-related circumstances and QoL remains limited or unevenly distributed across regions.

Third, the synthesis of findings draws on studies with substantial methodological heterogeneity. Many of the included publications were cross-sectional or single-region studies based on convenience sampling and used varied instruments to assess job satisfaction, burnout, or work environment factors. As a result, the interpretation of convergent or divergent findings may reflect a degree of subjective synthesis, particularly where evidence is limited or inconsistent.

Finally, this review did not include a formal quality appraisal of the included studies. The absence of structured assessment tools restricts our ability to evaluate the methodological rigour of individual studies or to weigh conclusions in accordance with study quality. As such, future reviews employing systematic methods with standardised appraisal frameworks must be conducted to strengthen the reliability and generalisability of the findings in this area.

Addressing the abovementioned gaps in the literature requires collaboration amongst academic researchers, healthcare facilities and the SCHS. Relatedly, integrating QoL measures into healthcare workforce planning will help ensure that forthcoming initiatives are grounded in evidence and precisely directed.

Conclusion

This narrative review synthesises current evidence on the QoL and QWL of physiotherapists in Saudi Arabia, highlighting the complex interplay of occupational, organisational and cultural factors that shape workforce well-being. Whilst the available literature suggests areas in which physiotherapists face significant challenges of workload pressures, professional stress or reduced autonomy, these findings should be

interpreted cautiously, given the predominance of cross-sectional designs and the variability in measurement tools.

The broader implications of this review underscore the importance of supportive leadership, structured professional development and context-sensitive workforce planning as key components of a sustainable physiotherapy profession. As Saudi Arabia continues to expand its rehabilitation services in alignment with national health transformation goals, understanding the experiences and needs of local and expatriate physiotherapists will remain essential for strengthening retention, engagement and service quality.

Furthermore, future research should prioritise rigorous, longitudinal and nationally representative studies, along with standardised assessments of QoL and QWL, to generate clearer insights and guide evidence-informed policymaking. By addressing these gaps, future studies can support more targeted strategies that enhance the well-being and effectiveness of the physiotherapy workforce within the evolving Saudi healthcare system.

Author Contributions

All authors significantly contributed to the work reported, including conception, study design, execution, data acquisition, analysis, and interpretation. They actively participated in drafting, revising, or critically reviewing the manuscript, provided final approval of the version to be published, agreed on the journal submission, and accepted accountability for all aspects of the work.

Data Availability Statement

The authors will transparently provide the primary data underpinning the findings or conclusions of this article, without any unjustified reluctance. If need from editorial team.

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Reference

- Al Ali, R. E., Alrowaishd, S. A., Abu Thyab, E. Z., Almarzuqi, R. K., Al Awaji, M. I., Aldhahi, M. I., & Ibrahim, Z. M. (2024). Enhancing the quality of life for physical therapists: Insights from a cross-sectional study. *Frontiers in Public Health*, 12, 1286727. <https://doi.org/10.3389/fpubh.2024.1286727>
- Alanazi, A. M., Almutairi, A. M., Aldhahi, M. I., Alotaibi, T. F., AbuNurah, H. Y., Olayan, L. H., Aljuhani, T. K., Alanazi, A. A., Aldriwesh, M. G., Alamri, H. S., Alsayari, M. A., Aldhahir, A. M., Alghamdi, S. M., Alqahtani, J. S., & Alabdali, A. A. (2023). The intersection of health rehabilitation services with quality of life in Saudi Arabia: Current status and future needs. *Healthcare*, 11(3), 389. <https://doi.org/10.3390/healthcare11030389>
- AlEisa, E., Tse, C., Alkassabi, O., Buragadda, S., & Melam, G. R. (2015). Predictors of global job satisfaction among Saudi physiotherapists: A descriptive study. *Annals of Saudi Medicine*, 35(1), 46–50. <https://doi.org/10.5144/0256-4947.2015.46>
- Alghadir, A., Zafar, H., Iqbal, Z. A., & Al-Eisa, E. (2017). Work-related low back pain among physical therapists in Riyadh, Saudi Arabia. *Workplace Health Saf.*, 5, 337–345. <https://pubmed.ncbi.nlm.nih.gov/28121518/>

- Al-Imam, D. M., & Al-Sobayel, H. I. (2014). The prevalence and severity of burnout among physiotherapists in an Arabian setting and the influence of organizational factors: An observational study. *Journal of Physical Therapy Science*, 26(8), 1193–1198. <https://doi.org/10.1589/jpts.26.1193>
- Alkassabi, O. Y., Al-Sobayel, H., Al-Eisa, E. S., Buragadda, S., Alghadir, A. H., & Iqbal, A. (2018). Job satisfaction among physiotherapists in Saudi Arabia: Does the leadership style matter? *BMC Health Services Research*, 18(1), 422. <https://doi.org/10.1186/s12913-018-3184-9>
- Alodaibi, F. A., Alotaibi, M. A., Almohiza Mohammad, A., & Alhowimel Ahmed, S. (2022). Perceptions of practising physiotherapists in Saudi Arabia about their role in the health promotion of patients with musculoskeletal conditions: A qualitative study. *Global Health Promotion*. 29(4), 27–34. <https://pubmed.ncbi.nlm.nih.gov/35570733/>
- Alotaibi, T. F., Altayyar, A., Al Muflih, M., Alqahtani, N., Alhawiti, N., AlOtaibi, B. A., Al Ossaimi, S., Aljohani, H. Y., Alqahtani, M., Ismaeil, T., Al Qahtani, M., & Al Garni, S. (2025). Impact of shift length on burnout and job or life satisfaction among allied healthcare professionals. *The Internet Journal of Allied Health Sciences and Practice*, 23(2), 5. <https://nsuworks.nova.edu/ijahsp/vol23/iss2/5/>
- Alsenan, A. A., Seyam, M. K., Shawky, G. M., Atya, A. M., Abdel Ghafar, M. A., & Hasan, S. (2025). Work-related low back pain and psychological distress among physiotherapists in Saudi Arabia: A cross-sectional study. *Healthcare*, 13(15), 1853. <https://doi.org/10.3390/healthcare13151853>
- Alshewaier, S. A. (2025). Knowledge and attitudes of physiotherapy students towards their profession in Saudi Arabia. *Journal of Pioneering Medical Sciences*, 14(S1), 376–381. <https://doi.org/10.47310/jpms202514S0149>
- Alshuweih, H.H., Zadeh, S.A.M., Al-Sharman, A., Nambi, G., Azab, A. R., Elsayed, S. H., Abdelbaset, W. K., & Abdelbaset, W. K. (2025). Prevalence and risk factors associated with work-related musculoskeletal disorders among physiotherapists in United Arab Emirates. *Scientific Reports*, 15, 38878. <https://doi.org/10.1038/s41598-025-22619-6>
- Bergman, B. (1990). Professional role and autonomy in physiotherapy: A study of Swedish physiotherapist. *Scandinavian Journal of Rehabilitation Medicine*, 22(2), 79–84. <https://pubmed.ncbi.nlm.nih.gov/2363028/>
- Biggs, D., Blackburn, L., Black, C., & Shanmugam, S. (2025). Physiotherapy under pressure: A cross-sectional study on the interplay between perfectionism, moral injury, and burnout. *PLOS ONE*, 20(2), e0299173. <https://pubmed.ncbi.nlm.nih.gov/39899497/>
- Eker, L., Tüzün, E.H., Daskapan, A., & Sürenkök, O. (2004). Predictors of job satisfaction among physiotherapists in Turkey. *J Occup Health*, 46(6), 500–505. <https://pubmed.ncbi.nlm.nih.gov/15613776/>
- Ferrans, C. E., Zerwic, J. J., Wilbur, J. E., & Larson, J. L. (2005). Conceptual model of health-related quality of life. *Journal of Nursing Scholarship*, 37(4), 336–342. <https://doi.org/10.1111/j.1547-5069.2005.00058.x>
- Hudon, A., Laliberté, M., Hunt, M., & Ehrmann Feldman, D. (2015). Quality of physiotherapy services for injured workers compensated by workers' compensation in Quebec: A focus group study. *Healthcare Policy*, 10(3), 32–47. <https://pmc.ncbi.nlm.nih.gov/articles/PMC4748341/>
- Morsiani, G., Bagnasco, A., & Sasso, L. (2017). How staff nurses perceive the impact of nurse managers' leadership style in terms of job satisfaction: A mixed method study. *J Nurs Manag*, 25(2), 119–128. <https://pubmed.ncbi.nlm.nih.gov/27917561/>
- Puhanić, P., Erić, S., Talapko, J., & Škrlec, I. (2022). Job satisfaction and burnout in Croatian physiotherapists. *Healthcare*, 10(5), 905. <https://doi.org/10.3390/healthcare10050905>
- Reeve, B. B., Wyrwich, K. W., Wu, A. W., et al. (2013). ISOQOL recommends minimum standards for patient-reported outcome measures used in patient-centered outcomes research. *Quality of Life Research*, 22(8), 1889–1905. <https://pubmed.ncbi.nlm.nih.gov/23288613/>
- Rosenberg, M. K., & Bonsaksen, T. (2022). Job satisfaction among psychomotor physiotherapists in Norway: Associations with overwork and physical demands. *Inquiry*, 59, 469580221126763. <https://pubmed.ncbi.nlm.nih.gov/36168300/>
- Saudi Health Council. (2022). National health strategy: Strategic foundations. <https://www.sch.goc.sa>
- Saudi Commission for Health Specialties. (n.d.). Home. Retrieved December 12, 2025, <https://scfhs.org.sa/en>.
- Takrouni, H. A., Mousa, G., Yaseen, K. M., & Alshehri, M. A. (2025). Work-related low back pain among physical therapists in the Makkah Region, Saudi Arabia: A cross-sectional study. *Healthcare*, 13(3), 309. <https://doi.org/10.3390/healthcare13030309>

- Testa, M. A., & Simonson, D. C. (1996). Assessment of quality-of-life outcomes. *New England Journal of Medicine*, 334(13), 835–840. <https://pubmed.ncbi.nlm.nih.gov/8596551/>
- Van Laar, D., Edwards, J. A., & Easton, S. (2007). The Work-Related Quality of Life scale for healthcare workers. *J Adv Nurs*, 60(3), 325–333. <https://pubmed.ncbi.nlm.nih.gov/17908128/>
- Venturini, E., Ugolini, A., Bianchi, L., Di Bari, M., & Paci, M. (2024). Prevalence of burnout among physiotherapists: A systematic review and meta-analysis. *Physiotherapy*, 124, 164–179. <https://doi.org/10.1016/j.physio.2024.01.007>
- Wasfi, R. M., Alenezi, F. S., Alzubaidi, L. M., & Hassanein, M. (2024). The supply and demand for rehabilitation health workforce in Saudi Arabia. *Eastern Mediterranean Health Journal*, 30(5), 344–349. <https://doi.org/10.26719/2024.30.5.344>
- Watson, G., Rodger, R., Buhler, M., Tofi, U., Gauld, R., & Perry, M. A. (2025). Strategies that impact the workforce retention of physiotherapists and other allied health professionals: A scoping review. *European Journal of Physiotherapy*, 1–17. <https://doi.org/10.1080/21679169.2025.2469108>
- Wilson, I. B., & Cleary, P. D. (1995). Linking clinical variables with health-related quality of life: A conceptual model of patient outcomes. *JAMA*, 273(1), 59–65. <https://pubmed.ncbi.nlm.nih.gov/7996652/>
- World Health Organization. (n.d.). WHOQOL: Measuring quality of life. <https://www.who.int/tools/whoqol>.