



Exploring Nursing Ethics and the Application of the Principle of Beneficence Across Diverse Healthcare Systems: A Comprehensive Review

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Abstract

Background: Nurses are central to healthcare systems, with their ethical practice significantly influencing patient care quality. The principle of beneficence—acting in the best interest of patients—lies at the heart of nursing ethics. Understanding this concept is crucial for enhancing the effectiveness and dignity of care provided across various healthcare contexts.

Methods: An integrative review was conducted, sourcing literature from databases such as PubMed, Scopus, and Google Scholar. The search utilized keywords related to beneficence, ethics, and nursing care, analyzing studies that explore the application and understanding of beneficence within nursing practice.

Results: The review revealed that while the principle of beneficence is widely recognized, many nurses lack a comprehensive understanding of its implications. Diverse interpretations of beneficence exist, complicating its consistent application in practice. Ethical dilemmas often arise when beneficence conflicts with patient autonomy, highlighting the need for a balanced approach. Furthermore, cultural and contextual factors significantly influence how beneficence is interpreted and enacted in nursing.

Conclusion: Beneficence remains a foundational ethical principle in nursing, yet its application is fraught with challenges. Enhancing nurses' understanding of beneficence through targeted education and training is essential for improving patient care outcomes. Future research should focus on developing tools to measure and implement beneficence effectively in nursing across different healthcare settings.

Keywords: Nursing Ethics, Beneficence, Patient Care, Ethical Dilemmas, Healthcare Systems.

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1. Introduction

Nurses are now regarded as the most significant human resource within the healthcare system; hence, the care they provide is a primary component of services in this system. Ethically based care is a prominent method within the nursing field, as described by theorists of nursing ethics [1-3]. An ethical nursing practice may revolutionize healthcare methods. Nursing ethics is regarded as a facet of bioethics, and it has just recently emerged. Bioethics is the application of ethical theories and principles to ethical concerns or dilemmas in healthcare. Consequently, comprehending these principles and values is seen as the first step in grasping ethics and its connection to health care [5-7]. Effective nursing care seeks to elevate the dignity of individuals across all dimensions and successfully implements this objective in practice, so constituting dignity-enhancing care. Consequently, the nursing profession is seen as a field with a health-centric approach that emphasizes caregiving scenarios and assists individuals in adapting to their illnesses while enhancing their functional ability despite the condition [4].

The history of nursing demonstrates that professional ethics, a well-established notion within the field, has been an intrinsic component of the profession from its inception and is globally acknowledged as a fundamental aspect of nursing practice. Beauchamp and Childress articulated four fundamental concepts of bioethics: autonomy, justice, beneficence, and non-maleficence [8-10]. These principles should be universally recognized and adhered to by all nurses in their profession to provide optimal, safe, and humane care for clients. One fundamental notion is "beneficence," regarded as the foundation of nursing and medical practices, whereby the execution of helpful acts may foster the drive for virtuous deeds [7]. The ethical concept of beneficence is fundamentally embedded in the purpose of the nursing profession, which is defined as the obligation to do actions that positively assist patients [11, 12]. "Beneficence" is identified as a fundamental element of bioethics, and its implementation may facilitate the acknowledgment of the significant and rightful interests of the patient [13]. The idea of beneficence, although prevalent in medical sciences, is difficult to describe accurately, and only a limited number of research in health sciences have explored this topic. In the nursing profession, despite the establishment of professional ethics, there is a lack of comprehensive comprehension of ethical principles [9]. Consequently, several interpretations and definitions have been suggested [14].

Diverse definitions of beneficence have emerged throughout various literatures, portraying this idea as fundamental to ethics and the act of doing "good" via compassion, kindness, generosity, and charity towards patients [10]. This idea is sometimes referenced in relation to benevolence, compassion, charity, or any activity that serves the welfare of others [14]. Singh and Ivory [15] define beneficence as the obligation of healthcare professionals to enhance patient well-being by doing research and using therapeutic procedures that maximize the likelihood of favorable patient outcomes. Furthermore, the concept of beneficence underscores the ethical need to promote welfare, which encompasses safeguarding patients' rights, averting damage, and assisting those in jeopardy [16-18]. Beneficence is seen as the need to provide treatment that yields good outcomes and safeguards patients, which is fundamental in all healthcare settings [19]. These perspectives affirm the challenges associated with applying the concept of beneficence, which necessitates the delineation of "what constitutes the patient's well-being" [20].

Conversely, research indicates that beneficence, as a fundamental component of bioethics, coexists with other ethical principles, including autonomy, justice, and confidentiality. Consequently, a significant challenge arises in reconciling the patient's right to choose with the caregiver's benevolent intentions [21, 22]. Furthermore, as noted, care measures that ensure beneficence may occasionally infringe upon other ethical principles, such as patient autonomy. Ethical conflicts are inherently present in nursing, as practitioners strive to meet their own needs, objectives, and endeavors in delivering care [23]. However, it is essential to acknowledge that nurses' ethical obligations necessitate prioritizing the patient's welfare, often at the expense of personal interests, in order to address the needs, well-being, and preferences of patients. Research indicates that ethical dilemmas are influenced by cultural and contextual factors, highlighting variations in cultural norms, social attitudes, and legal principles. Furthermore, studies

underscore the necessity for nursing care to consider the cultural, social, and ethical dimensions of patients to ensure beneficence [24-26].

The fundamental concern in the concept of beneficence is the dedication to patient welfare in nursing care [27]. Despite numerous studies examining this concept superficially, there is a paucity of focused research on bioethics within nursing sciences and the principle of beneficence, resulting in an absence of a comprehensive and clear understanding of this ethical principle in the context of nursing care provision. An integrative review study is a distinct review methodology that synthesizes existing empirical or theoretical research to enhance the knowledge of a particular phenomenon or healthcare issue [28]. Consequently, integrated reviews have the capacity to enhance the corpus of knowledge and advance nursing science, knowledge, research, practice, and policy. Moreover, such research elucidates the prevailing knowledge within each discipline, facilitate theoretical development, and possess direct applicability in clinical practice and health policy formulation [29-33]. Consequently, the findings of this research may elucidate the idea of beneficence in nursing. In light of the significance of the concept of beneficence in nursing care and its impact on patient satisfaction, we choose to examine the research undertaken on this topic.

2. Methods

Databases such as SID, Irandoc, Magiran, Google Scholar, Web of Science, PubMed, and Scopus were queried using the keywords "beneficence," "ethic," "nursing," and "care" in both English and Persian, either independently or in combination with Boolean operators: AND and OR, to identify published works.

3. The Ethical Principle of Beneficence

The ethical concept of beneficence is a fundamental component of the nursing code, sometimes referred to as the "moral heart of the nursing profession," hence a nurse must provide care only with the intention of benefiting the client. In nursing ethics, beneficence is seen as a commendable and altruistic moral obligation [34, 35]. The unfamiliarity with the definition of the idea of beneficence is seen as a significant obstacle, despite its importance in nursing care [36]. The analyzed research indicates that "doing good" is seen advantageous [12, 20, 22, 26, 34-37]. The challenge of applying this ethical concept necessitates a precise definition of "what constitutes good for a patient." [20] This definition has been articulated in various ways across multiple studies, including concepts such as doing good, maximizing positive patient outcomes, providing optimal care, representing the essence of care, and an ethical obligation to prioritize patient welfare [12, 16, 20, 22-26, 34-39].

Ethical decision-making must consistently prioritize the patient's best interest, necessitating that healthcare professionals provide better patient-centered treatment that considers patient priorities and preferences [12, 40-44]. On this foundation, individuals in all contexts and sectors of society should be motivated to do virtuous deeds and acts of compassion, ensuring that their professional and personal endeavors benefit the whole of the community. The result of this commendable action will yield optimal benefits for the patients and ensure superior care, ultimately enhancing their health and overall well-being, as the essence of ethical care lies in the pursuit of moral integrity and benevolence [45-47].

A benevolent action fosters the improvement and well-being of patients, and nurses must provide professional care to facilitate patient recovery. Beauchamp and Childress articulated the idea of positive beneficence, which has three components: preventing evil or injury, removing evil or harm, and promoting good [10, 45, 48]. Beneficence involves weighing the advantages of therapy against its risks and costs; hence, healthcare professionals should act to benefit the patient [49]. Edwards [50] asserts that beneficence pertains to enhancing the well-being of people with whom we engage. Typically, the principles of beneficence and non-maleficence are interconnected, since non-maleficence aims to avoid causing damage to patients while simultaneously striving to enhance individuals' well-being and health. Avoiding unnecessary interventions and actions that might result in permanent damage, such as death, is defined as non-maleficence. Beneficence and non-maleficence are often considered interrelated concepts; the former pertains to doing activities that confer benefits to others, while the latter concerns refraining from

behaviors that may cause damage to oneself or others. The coexistence of these two concepts renders disagreements between the care staff and the patient's relatives unavoidable [51]. While both concepts have significance, the obligation of non-maleficence is seen as a more robust commitment in healthcare, while the principle of beneficence mandates the promotion of "good" while eschewing "harmful" activities towards patients. The distinction between these two significant ethical concepts is that beneficence entails a moral need to actively assist patients rather than only to avert damage.

Recent studies indicate that healthcare institutions and organizations with a compassionate ethical environment may attain superior clinical outcomes, enhance patient and family happiness, and decrease patient mortality [52]. The significance of these two principles, as fundamental values of nursing, consistently shapes their conduct to prioritize patient welfare [36]. Nonetheless, nurses must recognize that altruistic behaviors may not always help patients and might sometimes contradict with the ethical ideal of autonomy. According to Ross's ethical principles, all individuals should prioritize elements such as the advantages or utility of outcomes and results, including the right and equitable distribution of rewards, risks, and costs.

Given that the professional obligation to honor patients' rights and their autonomy in decision-making is regarded as a universally acknowledged standard, it can be asserted that the contradiction in ethical decision-making is most pronounced when the principles of beneficence and autonomy conflict. In all clinical decision-making scenarios, both rookie and experienced nurses must acknowledge the patient's right to autonomy and ensure that their nursing care is advantageous for the patient's health outcomes [52]. Nurses must broaden the application of ethical concepts such as beneficence, autonomy, and patient advocacy in order to attain this standard of care [22].

The principle of beneficence necessitates the provision of equitable care based on need, devoid of discrimination for all patients [53]. Therefore, when nurses are compelled to make decisions that undermine a patient's autonomy, such decisions should be regarded as adhering to the principle of beneficence for the patient [52]. When beneficence and autonomy conflict, necessitating coercion for beneficence, the healthcare team must find a method to reconcile this dichotomy while preserving their self-esteem. In such instances, they may encounter cognitive dissonance, which refers to the mental tension that arises from holding conflicting attitudes or engaging in behaviors that contradict certain attitudes. Disregarding the concept of patient autonomy is seen as a significant concern; yet it may be justified when there are substantial reasons to enhance beneficence, provided it aligns with the patient's values. A nurse may emphasize beneficence above client autonomy only when there is a valid justification that the client's dignity will be upheld and that the client would really benefit from this approach. Nonetheless, nurses sometimes report encountering ethical issues regarding ethical principles; in such instances, it is advisable for nurses to choose the optimal care choice for patients, taking into account their requirements and preferences [25].

Beneficence may include patient autonomy, since "the best interests of patients are closely related to their preferences," which is a primary obligation of the healthcare team to all patients [54]. Beneficence is articulated as 'the principle of doing good and providing care to others' according to Berglund [54]. Conversely, honoring the needs, values, and preferences of patients and their families is fundamental to nursing care; thus, nurses must recognize these needs by documenting patients' life histories, as such needs and interests are shaped by religious, cultural, and social factors [16, 26, 41, 55]. This emphasis on values in care protects the client and guarantees that optimal choices are rendered effectively [55].

The need to foster beneficence in conventional medical ethics may manifest as paternalism, when the healthcare provider makes decisions based on the belief that they are acting in the patient's best interests. Nonetheless, others contended that this method undermines the person-centered ideals inherent in nursing ethics [56]. Health care reconciles the ethical ideals of beneficence and justice, delivering optimal treatment for patients while ensuring fair access for the whole community, all within the constraints of limiting resources and maximizing efficiency. The idea of fairness establishes a crucial connection between individual health significance and societal health promotion duties [57]. It is indeed ideal to support

individual choice while safeguarding against detrimental decisions; however, this is not always feasible [49]. Nonetheless, patient decisions may sometimes engender a contradiction between justice and beneficence [34]. Certain scholars prioritize beneficence above justice, despite the latter being grounded in profit, as seen in the healthcare system [57]. Nonetheless, health care priorities should emphasize distributive justice, implying that decisions must be made to allocate resources in a manner that maximizes benefits for the greatest number of patients relative to costs. Research indicates that the majority of ethical theories acknowledge different facets of beneficence and see it as a foundation for maximizing benefits for all patients [19].

The notion of beneficence in nurse management emphasizes the provision of safe, effective, timely, efficient, equitable, and patient-centered care, alongside accuracy, compassion, and staff cooperation [37]. In such ethical environments, nursing personnel get managerial support in decision-making for the benefit of patients [58]. From this perspective, the ethical concept of beneficence will surely be a fundamental component of the nursing profession's goal to alleviate patients' pain and suffering [59]. Accomplishing this necessitates that nurses possess ethical knowledge and insight, as their ethical commitment is crucial for enhancing patient and family trust, thereby facilitating the application of beneficence to alleviate pain and suffering, particularly in end-of-life and palliative care.

All patients must be treated with respect and safeguarded from potential damage; it is the professional's ethical duty to avoid causing harm. Consequently, beneficence and non-maleficence are linked to the patient's rights and the assurance of treatment that is devoid of danger or risk of harm [60]. Every care program and therapy must provide unequivocal benefits to the patient, and it is the nurse's fundamental duty to guarantee the individual's safety. Consequently, the nurse evaluates all care practices advantageous to the patient prior to their implementation [61,62]. In alignment with these principles, they demonstrated a commitment to patient safety, an intention to mitigate risk and harm, and a desire to assist in coping, irrespective of illness or functional impairment [63,64]. The failure to disclose medical errors jeopardizes the concept of beneficence, since it hinders other healthcare providers from obtaining pertinent knowledge and circumventing similar mistakes. Ethics and patient safety are interconnected; hence, a deficiency in honest communication and a lack of dedication to resolving adverse occurrences disrespects the norms of beneficence and non-maleficence, while also jeopardizing patient safety.

Truth-telling to the patient, as a matter of communication and trust, is seen as an application of beneficence that nurses must integrate with the patient's autonomy to achieve a balanced approach in their care. The objective of Truth-telling in healthcare is to get therapy that is both successful and aligned with the patient's interests and support. Healthcare professionals must consider the cultural, socioeconomic, and ethical disparities among patients [16, 26]. It is important to recognize that the primary principle in ethical decision-making regarding various options, particularly in situations of conflict and dilemmas, is to consider beneficence, which encompasses a rational assessment of cost-effectiveness concerning the intervention's results and patient outcomes [53].

Research indicates that although nurses possess substantial understanding of nursing ethics, the majority lack familiarity with the concept of beneficence in nursing care and its implications for patient welfare and benefit [34, 42]. Nonetheless, health promotion initiatives, legislation, research, and healthcare accessibility fundamentally embody the idea of beneficence [20]. Consequently, given the significance of the principle of beneficence in nursing care, it is essential to conduct pertinent research focusing on the idea of beneficence and its many facets as a crucial ethical principle.

4. Summary

The ethical concept of beneficence is seen as a significant concern and a fundamental value in nursing care, as the findings of the current research elucidate several facets of this principle. The insufficient familiarity with the definition of the beneficence concept in nursing care presents a significant challenge, necessitating further research to analyze the concept and develop suitable instruments for its measurement and

application across various nursing specialties and settings. Clarifying the idea of beneficence in nursing care seems to provide favorable results for patients benefiting from this principle.

Conversely, emphasizing the applicability derived from research aimed at alleviating and forecasting pain, equitable allocation of resources and care, implementing evidence-based practices, ensuring patient safety, communicating truthfully in appropriate contexts, providing palliative and end-of-life care, ultimately enhances patient well-being and health, diminishes mortality, and upholds human respect and dignity. Enhancing a dignified existence by the adherence to beneficence in nursing care, while also considering the principles of autonomy and fairness, would eventually elevate patient satisfaction. Consequently, it is recommended that more research be conducted to delineate the precise dimensions of beneficence, create a suitable instrument for measuring this notion in nursing care, and provide appropriate training in this regard.

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استكشاف أخلاقيات التمريض وتطبيق مبدأ الفائدة عبر أنظمة الرعاية الصحية المتنوعة: مراجعة شاملة

الملخص

الخلفية: يُعتبر الممرضون عنصرًا مركزيًا في أنظمة الرعاية الصحية، حيث تؤثر ممارستهم الأخلاقية بشكل كبير على جودة رعاية المرضى. يقع مبدأ الفائدة—العمل في مصلحة المرضى—في صميم أخلاقيات التمريض. إن فهم هذا المفهوم أمر بالغ الأهمية لتعزيز فعالية وكرامة الرعاية المقدمة في سياقات الرعاية الصحية المختلفة.

الطرق: تم إجراء مراجعة تكاملية، حيث تم جمع الأدبيات من قواعد بيانات مثل بيمد (PubMed)، سكوبس (Scopus)، وجوجل سكولار (Google Scholar) استخدمت عملية البحث كلمات مفتاحية تتعلق بمبدأ الفائدة، والأخلاق، ورعاية التمريض، وتم تحليل الدراسات التي تستكشف تطبيق وفهم مبدأ الفائدة ضمن ممارسة التمريض.

النتائج: أظهرت المراجعة أنه على الرغم من أن مبدأ الفائدة مُعترف به على نطاق واسع، فإن العديد من الممرضين يفتقرون إلى فهم شامل لتبعاته. توجد تفسيرات متنوعة لمبدأ الفائدة، مما يعقد تطبيقه المتسق في الممارسة. وغالبًا ما تنشأ معضلات أخلاقية عندما يتعارض مبدأ الفائدة مع استقلالية المريض، مما يبرز الحاجة إلى نهج متوازن. علاوة على ذلك، تؤثر العوامل الثقافية والسياقية بشكل كبير على كيفية تفسير وتنفيذ مبدأ الفائدة في التمريض.

الخاتمة: يظل مبدأ الفائدة مبدأً أخلاقيًا أساسيًا في التمريض، إلا أن تطبيقه مليء بالتحديات. إن تعزيز فهم الممرضين لمبدأ الفائدة من خلال التعليم والتدريب المستهدف أمر ضروري لتحسين نتائج رعاية المرضى. ينبغي أن تركز الأبحاث المستقبلية على تطوير أدوات لقياس وتنفيذ مبدأ الفائدة بفعالية في التمريض عبر مختلف البيئات الصحية.

الكلمات المفتاحية: أخلاقيات التمريض، الفائدة، رعاية المرضى، المعضلات الأخلاقية، أنظمة الرعاية الصحية.