



Review

Ethics of responsibility in psychiatric care

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Abstract

Responsibility is often defined in terms of accountability for actions based on ethical and legal norms. However, the concept is multidimensional and is relevant to many disparate disciplines. The concepts of responsibility and responsibility ethics are central to the context of disease/healthcare and the delivery psychiatric care services. The vulnerability of the patient as well as legal and institutional factors contribute to a variety of potential ethical dilemmas for caregivers. A thorough understanding the concept of responsibility and its ethical dimensions is very important to providing psychiatric care of high quality that protects patients and healthcare providers. This review examines the definition, application, and effects of the concept of responsibility and the ethics of responsibility in the practice of psychiatric nurses.

Keywords: Ethics of responsibility; psychiatric care; responsibility.

What is presently known on this subject?

- Responsibility is an important concept in all contexts of psychiatric nursing care because it occurs in asymmetrical relationship. The more vulnerable the recipient, to both external and internal dangers, the greater the responsibility of the caregiver. Psychiatric nurses can face ethical dilemmas for a variety of reasons.

What does this article add to the existing knowledge?

- The existing research examining responsibility and responsibility ethics in psychiatric care in the nursing literature remains insufficient. There is a need for additional data from Türkiye. This review assesses the definition and role of responsibility and responsibility ethics in psychiatric care in the context of the current literature and highlights the need for further research on the subject.

What are the implications for practice?

- Greater awareness of the concepts related to the ethics of responsibility and responsibility in psychiatric care will increase awareness of this complex and important topic, improve the quality of services, and could encourage additional research.

Responsibility is a multifaceted concept that plays an important role in various disciplines. The focus of the definition varies. For example, in ethics, responsibility is evaluated in terms of moral principles, while in pedagogy, it is examined in terms of maturation and adulthood. The concept of self (ego) is emphasized in the domain of psychology, as it highlights the interaction of the individual with society through moral

development. Philosophy looks at the interaction of responsibility and the boundaries of human freedom.^[1]

Weber^[2] proposed the term “ethics of responsibility,” which includes consideration of conditions and consequences, distinct from, but ideally to be used in concert with, the ethics of conviction, which is guided strictly by the morally correct choice. Weber gives an example of the state of obligation that governs action by saying, “A mature man is aware of a responsibility for the consequences of his conduct and really feels such responsibility with heart and soul. He then acts by following an ethic of responsibility and somewhere he reaches the point where he says: “Here I stand; I can do no other.” In other words, it is about doing what is required.^[3]

The Turkish Language Association, the regulatory body for the Turkish language, defines responsibility as individual accountability for one’s own behavior or the consequences of any event that falls under their authority.^[4] Those in the nursing profession assume a measure of accountability for acts such as providing treatment on behalf of individuals who require assistance. Nurses regularly makes decisions and actions for the well-being of the healthy and the sick.^[5]

However, the idea of accountability and responsibility for many nurses goes beyond a sense of duty related to patient treat-

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ment, it includes the desire for routine personal and professional development through research and other activities in the field, and interaction with colleagues and with the organizations where they are employed.^[6-8] Psychiatric care services are provided by nurses who are trained in mental health and psychiatric nursing, a formal subspecialty of nursing in Türkiye that includes special responsibilities and the likelihood of facing unique ethical dilemmas. It is important to consider ethical conflicts with an understanding of the concept of responsibility in psychiatric care services and in terms of professional development. Thus, along with descriptive responsibility, it should examine the limitations of actions and the potential consequences, and how some errors can be prevented. Aslantas^[9] noted that since psychiatry is a specialty that frequently presents ethical conflicts, established ethical standards and guidelines are particularly important. In order to establish comprehensive ethical standards for psychiatric nurses in Türkiye, the first step is to clarify the boundaries of professional responsibility. It is important to recognize that there is an asymmetrical relationship between the person who receives psychiatry-related health-care and the person who provides care.^[10] The responsibility of the caregiver grows according to the degree of vulnerability of the patient. The services to be provided by a psychiatric nurse should be evaluated as a responsibility of normative ethics.^[6]

Nurses want to help patients take responsibility for themselves and be independent. This support for patient autonomy and promoting a healthy and productive life is a central component of the conceptualizations and ethical definitions of most nursing theory.^[11] Peplau^[12] described a need to form a collaborative therapeutic relationship that includes doing what is expected and assuming moral and individual responsibility. A mentally ill individual who is hospitalized is dependent on responsible psychiatric care services that adhere to ethical standards. A complete and comprehensive analysis of responsibility areas is critical to ensuring quality of services. This review examines the definition of the concept of responsibility, responsibility ethics in the practice areas of psychiatric nurses, and the application in practice.

Responsibility and Ethics of Responsibility

The concept of responsibility cannot simply be defined according to academic or institutional standards of profes-

sional competence. The role of psychiatric nursing includes tasks with a high risk of consequences, a significant scope for action, and the corresponding expectations of independent decision-making. Responsibility is a feature relevant to both individuals and their environment.^[10] Considered in the context of normative ethics, the idea of responsibility and judgment of an action is based on criteria related to moral standards that mirror the external environment and/or the individual's own moral understanding. The descriptive understanding of responsibility, on the other hand, probes questions of who is responsible for what and under what conditions. Normative and descriptive responsibility are considered together in action-related assessments, based on the fact that the assumption of freedom of action and decision-making is logically a prerequisite.^[1] Kaufmann^[13] defined responsibility, in part, as acting to avoid possible harms and risks, however, Tewes^[14] underlined the uncertainty due to the lack of foreseeability, the knowledge of conditions that define the risk associated with action. Acquired knowledge on a particular topic (e.g., psychiatric care) and the sense of competence that this knowledge brings, contributes to the development of confident decision-making skills, including informed intervention in possible emergencies. Yet, the ability to assume and share responsibility can be affected by many factors, such as social inhibition due to concern about doing something wrong.^[15,16] Hoff^[10] stated that in addition to believing in values, the individual's feeling of effectiveness and control is a prerequisite for responsible behavior. He also referred to collective responsibility in formal or informal groups or institutions.

Responsibility involves an interaction: accepting active control of activities and their consequences, and the ability to respond, to be accountable. Accordingly, responsibility is characterized by the relationship between the subject, object (action-object), and a situation (related person).^[7,17] The social norms upon which responsibility is based may have legal, religious, ideological, or moral origins (Fig. 1). It concerns people's ability to answer for their actions. This process includes a variety of conditions. It is generally assumed that the individual voluntarily acts in accordance with his knowledge and belief.^[18]

The will to act is often considered alongside possession of information on the possible consequences of the action

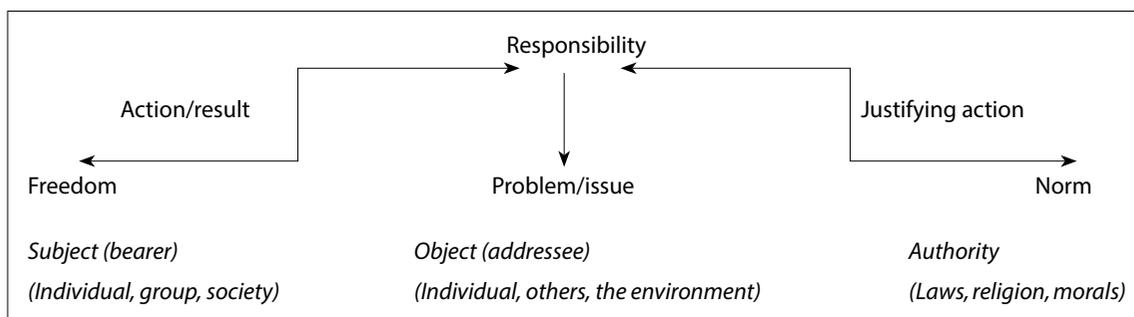


Figure 1. Relationships in responsibility.^[18]

and knowledge of responsibilities and potential effects. This awareness is frequently referenced in the evaluation of an action and the application of ethical and legal standards. One source notes that responsibility for action among those with full mental and physical capacity includes 3 aspects:^[3]

- The individual has a responsibility to understand and respond to the situation they face. This situation is answered with an action. Therefore, responsibility is first of all in the response.
- The individual assumes responsibility for situations with their actions and behaviors. (e.g., moral and legal, etc.).
- The individual knows that they can be held responsible for their actions by others and that they should take responsibility for their behavior and explain when necessary.

Lenk^[19] defined different types of the concept of responsibility:

- Responsibility for action concerns the forms of causal or preventive responsibility for the possible positive or negative consequences of actions that should be stated in verbal and/or written terms at the individual or institutional level.
- Role and duty responsibility relates to good-faith efforts and care in relation to participation in organizational and institutional activities, including professional responsibilities.
- Universal (moral) responsibility refers to the basic responsibility of individuals towards others. It includes role- and task-specific functions that are not transferable and must be performed individually for ethical reasons.
- Legal liability, in contrast to contrary to moral responsibility, is associated with the legally enforceable sanction of misconduct based on objective criminal criteria, rather than the actor's subjective view of obligation.

Humans think, communicate, and act. An entity who has the ability to take action has an obligation to pursue action in a number of situations. Accountability is an element of responsibility for behavior. The German philosophers, Apel and Habermas, examined the ethics of responsibility in the light of communication and discourse. According to Apel, the ability to communicate constitutes a transcendent a priori element. Habermas extended the analysis to the concept of responsibility in the ethics of discourse. In cases where there is a generally accepted approach, such as the norms of expression and action in a good communication mechanism, the consistency persists regardless of action or pressure. It is expected that standards will be ensured and that a consensus will make sense.^[3] Jonas^[20] stated that responsibility is a prerequisite of morality, but the concept itself does not contain a moral obligation. That is, an individual can act as "moral" or "not moral" only when he has a responsibility. This is a fundamental determinant of accountability.

The concept of responsibility is particularly relevant with respect to actions related to other individuals where there are specific ethics and directives involved. Individuals may as-

sume responsibility in some circumstances. As a thinking being, human beings have responsibilities in many areas, both for themselves and for the society in which they live. The idea of responsibility has existed and persisted as a norm since the earliest history of humanity. Psychological science considers responsibility a learned attitude to personal behavior in the context of individual special framework conditions. An individual can aspire to be honest, tolerant, and benevolent, and from this point of view, a responsible attitude encourages ethically correct actions such as honesty, acceptance, compassion, and generosity.^[21] Decision-making is based on the values and beliefs of the decision-maker and may also include consideration of the values of another.^[7] Individuals with responsibility act with awareness of their own possibilities and limits and take action knowingly and willingly. Responsibility for nurses can exist on several levels:^[6]

- Self (conscience, morality)
- Patients and their relatives
- Colleagues
- Workplace
- Professional (e.g., standards and ethics for nursing, etc.)
- Community (e.g., national law)

Psychiatric nurses are not only responsible for individual psychiatric care. They also have responsibility for nursing practices, nursing management, research, educational standards, and educational practices. Therefore, it is imperative that psychiatric nurses develop social and communication competence as well as individual and social moral responsibility awareness and skills.

Discussion

Responsibility is an important concept in all psychiatric contexts due to the asymmetric relationship between the caregiver and the beneficiary. The more vulnerable and sensitive the person receiving assistance is to external and internal dangers, the greater the responsibility of the one providing care.^[10] This becomes especially important in the context of services provided to individuals in psychiatric institutions. Psychiatric nurses have a key, frontline role, and therefore responsibility. These nurses have a duty of care for individuals whose lives are partially or completely limited due to illness. A principal goal of psychiatric care is strengthening the individual responsibility of the patient.^[7] Arndt^[23] said that responsibility ethics in nursing care should be supported with a structure of professional ethics and responsibility ethics. She classified the ethics of responsibility into 5 main groups:

- Respect for the values of life
- Definition what is good and right
- Principle of justice
- Integrity and honesty
- The principle of individual freedom and self-determination

Nursing ethics, like medical ethics, are included in applied ethics.^[24] Although the relationship between ethics in health and social fields and ethics in medicine and nursing has not been examined in detail, they are complementary. Yet, each has its own areas of study, and they are divided into subgroups according to characteristics.^[24,25]

Psychiatric nurses working in psychiatric institutions provide nursing services related to mental health and psychiatric disorders and they also help to uphold public order. Psychiatric nurses are required to provide services to patients not only when they give their consent to treatment and care, but also when they are likely to endanger the safety of other individuals or the public due to the symptoms of their illness. For example, in Germany, housing and compulsory treatment are regulated in the mental health laws of the federal states.^[26] Although there are studies on draft legislation on mental health in Türkiye, it has not yet been made law. However, there are laws regulating compulsory hospitalization. Nesipoğlu^[27] discussed the importance and necessity of mental health law in Türkiye in relation to the powers of the police and others, and notes that the use of a characterization of psychiatric patients as dangerous and the subsequent mandatory hospitalization is a controversial issue and that it does not comply with the World Health Organization goal of ensuring the integration of these patients into society. She emphasized the need for a national mental health law in order to protect the rights of psychiatric patients and promote reintegration into society. Coercive measures and other acts can obviously grossly violate the rights of those affected. Health personnel must work according to ethical principles and institutions must provide specific and accurate guidance and implement the appropriate procedures. This would include explaining patient rights and the law on compulsory hospitalization. Research has indicated that this is often not in effect.^[28,29]

Psychiatric care is evaluated multidimensionally in terms of the specificity of the disorder and the contributing factors.^[30] However, psychiatric patient services are still too often limited in scope and largely focused on recovery and medical control of the symptoms of the diseases. For example, Kamışlı and Dastan^[31] interviewed patients and found that aspects of holistic care, such as occupational therapy, and providing detailed information about drugs and other issues, as well as psychological support to encourage and sustain independent care and improve quality of life were weak. Recovery in mental disorders is defined by maintaining hope, assuming personal responsibility, and sustaining life beyond or independent of the illness.^[32] This involves the patient gradually taking responsibility for their life, with consciousness of their illness and recovery process. In a review of the literature related to personal recovery in mental illness, Leamy et al.^[33] identified 5 recovery processes: connectedness; hope and optimism about the future; identity; meaning in life; and empowerment. Lakemann^[34] reported on paradoxes that can arise related to the assignment of personal responsibility and the conflation of mental illness and substance abuse, and noted that these

complications can create very challenging conflicts for health professionals.

Weinmann^[35] commented on the lack of a reference that would facilitate a distinction between mental health/psychiatric illness and mental/psychiatric disorder, and considered this to be an important factor preventing adequate assumption of responsibility in psychiatric care. An uncertainty about job descriptions for nurses working in institutions where psychiatric services are provided can limit attempts to support treatment. Demands for a clear determination of the duties and jurisdiction of psychiatric nursing care, particularly given increased demands, are increasing in many countries.^[36,30] In this country, Ergün et al.^[37] examined the therapeutic environment and psychiatry services in 195 health institutions and found deficiencies in the facilities available for creating an environment suitable for therapy and practice. The authors noted that psychiatric nurses have a responsibility in this regard and encouraged initiatives to raise awareness and improve opportunities. Freedom in the professional context and appropriate environmental conditions are needed to be able to provide ethically sound services and support ethical behavior among caregivers. Arndt^[23] noted 2 conditions as standards for ethics in nursing practice:

- Developing the professional independence of nursing
- Primary responsibility is to the patient.

These conditions also apply to psychiatric nurses who are practitioners of psychiatric care. Naturally, the limitations and obligations of responsibility should be stated early and in the most explicit form, since it is important to establishing an effective therapeutic relationship. For example, in cases of psychiatric crisis, a nurse may need to take responsibility for the patient. In such cases, it is important that the transfer of responsibility back to the individual is carried out quickly in order not to damage the empowerment process.^[38] Taking responsibility for the patient is a complex and controversial issue, and continues to be an ethical problem in psychiatry. Dangerous behavior requires the intervention of nursing personnel. Lakeman^[39] warned against absolute patient autonomy, saying that the individual's need for others is an integral part of human life (not just at the beginning or end of life). Gahlings^[40] similarly separated patient autonomy from the freedom and autonomy of healthy individuals, emphasizing that the limitations of these individuals should be taken into account due to nursing ethics. The ethical coordinate system illustrated in Figure 2 clarifies conditions for intervention and respect for patient autonomy.^[22]

Paternalism can have an important influence. Paternalistic actions, including retaining decision-making power on behalf of the patient, are often justified on the assumption that the individual's capacity to act autonomously is limited because of the psychiatric disorder.^[34,41] Actions and treatment plans must be reviewed thoroughly from an ethical point of view that includes an awareness of paternalism. Patients should participate in the formulation of plans for care and goals for recovery.^[42]

Patients with a high sense of responsibility	Autonomy		
	Autonomy in individual situations - II	Autonomy, in principle, is inviolable. -I	Patients with low sense of responsibility
	Nurse makes decisions about psychiatric care on behalf of the patient in special situations -III	In this phase, the nurse is the sole decision-maker for psychiatric care on behalf of the patient. -IV	
Paternalism			

Figure 2. Ethical coordinate system.^[22]

In a literature review, Tewes^[14] listed fulfillment of the task of taking appropriate steps toward recovery and freedom of decision-making (autonomy) as prerequisites for the responsibility for care (legal power-authority). In general, the conditions for assuming responsibility are often related to the professional competence of the nurse. Professional competence is defined as technical competence (knowledge and skills) and individual competence (social competence and independence).^[43] Decisions made in professional relationships in psychiatric care services are related to knowledge of rules and management of events. Therefore, the psychiatric nurse needs a sufficient orientation and moral understanding of the legal aspects of nursing authority, in addition to expert knowledge in evidence and problem solving. Braeutigam^[44] defines hermeneutic (interpretive) competence as an integral part of ethical care. Authority and responsibility in nursing can include a wide range of action and requires the ability to evaluate events on an individual basis (reflective action) based on basic knowledge and skills (rule-based action); in other words, using the ability to reflect. This permits effective, empathic, and ethical action in a nursing intervention.^[45] Grieser et al.^[46] noted that the qualifications required for performing psychiatric care in German-speaking countries included analytic ability, flexibility, reflection, and purposeful action. In Türkiye, the Psychiatric Nurses Association (PHD), which works for the development of psychiatric care in our country in general, promotes activities that increase the social and communication, sociocultural awareness, personal and moral responsibility skills and motivation programs for nurses.^[47] The association also develops materials to help guide decision-making in psychiatric practice, as well as guidelines and other tools to make evidence-based knowledge ready for practice, and working groups to discuss relevant issues. According to the nursing regulation published by the Turkish Ministry of Health in 2010,^[48] nurses are obliged to monitor the development of the medical diagnosis and treatment of a patient and to notify the physician of undesirable situations that occur while performing treatment planned by physicians. Nursing care duties are also defined in the same regulation. The double responsibilities that nurses undertake in their work can lead to a view that their assistant role in diagnosis and treatment practices are superior to nursing care services, which have an independent function. Naturally, this

varies depending on the individual, institution, team, and other characteristics.^[49] However, it is important as an influence on efforts of nurses to assume individual responsibility, awareness of limits of the field, and efforts to develop them. Hofmann^[41] stated that a dialogue based on partnership between physicians and nurses is important for the quality of health services. Each occupational group evaluates the patient from a different perspective. A comprehensive view that includes both perspectives will benefit the patient.

Psychiatric nurses may face an environment that makes it difficult to effectively utilize or clearly understand their responsibility. Duties and the corresponding roles must be made clear to ensure that services are appropriately provided. Simsek Aslan and Buldukoglu^[50] examined the meaning of being a psychiatric nurse in individual interviews with 10 nurses working in the psychiatry service at 3 hospitals. The nurses, most of whom were undergraduate graduates, found it difficult to take responsibility for psychiatric care. The reasons they cited included the coexistence of many patient responsibilities, the lack of clear procedures, difficulty understanding patient profiles, and lack of information about the pertinent diseases. Academic education does not confer self-efficacy for practice; theory formed by scientific knowledge only helps to understand and explain the application. Abderhalden^[51] said that the formation of a theory is the basis of an independent discipline. Theories, models, and concepts systematize the knowledge and history of care practices in the context of professionalization. Importantly, however, nursing theory related to daily life application does not relieve the nurse of a decision-making position, since the decision-making action is a practice problem. Acquiring an attitude and behaviors that center on an individual with a mental disorder and making these behaviors a habit is important for professional work as a psychiatric nurse. A synthesis of knowledge, attitude, and reflection is important. This makes it possible to act quickly in potentially dangerous situations and to review with the background knowledge of theory. Tewes^[14] conducted subject-centered group discussions and recorded participant observations in a study exploring the responsibility of nursing care related to somatic disorders. The results included an observation that open responsibility structures in an institution are reflected in a positive nursing culture, and that

open-mindedness helps individuals to take responsibility. A lack of priority given to nursing care services as a consequence of economic pressure due to the earnings policies of hospitals, and problems related to defining the borders between nursing and medicine were factors that made it difficult to take responsibility.

Nursing is an independent professional field built on a relationship designed to address a problem.^[52] Consistent individual professional care can be effective.^[53] In some countries, a single nurse is appointed to a case for the entire period of treatment.^[54] Research has indicated that private liaison nurses in psychiatric institutions improve the patient's level of knowledge and increase patient and employee satisfaction.^[55] This construction also supports the assumption of explicit responsibility.^[56] The responsibility structures within the framework of psychiatric care services are made more concrete. Also notable, Bierhoff and Neumann^[17] stated that an individual's willingness to take responsibility (e.g., in helping situations) decreased in a group environment; for example, when faced with an emergency situation, there was less feeling of responsibility when part of a group. A specific contact or liaison nurse for each patient is beneficial to all parties.

Conclusion

It is assumed that the individual, acting with their free will, takes responsibility for situations that may arise as a result of their actions. The concepts of responsibility and ethical practice are foundational to professional psychiatric care services. Psychiatric nurses establish a human relationship focused on patients who may have complex psychiatric needs that includes caring, empathy, and respect. Nurses also have responsibility for shaping the services offered in many areas related to the profession, such as personal development, professional research, and the advancement of psychiatric care practices, with their colleagues and the institution where they work. In general, psychiatric nurses need motivation based on social, personal, and moral responsibility in order to perform optimally, as well as and the formal ability to enact this role. Responsibility ethics has an integrative role. There is a need for further research to define conditions that prevent taking on responsibility or cause the distribution of responsibilities in the psychiatric care services provided in psychiatric institutions and discussion of the results to ensure quality of care and professional satisfaction.

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