INFLUENCE OF NURSES' EMPOWERMENT ON QUALITY CARE: A COMPREHENSIVE STUDY OF THE LITERATURE

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ABSTRACT

BACKGROUND:

The empowerment of nurses is a fundamental strategy for patient safety and consequently, for the success of health institutions. This review aimed to identify in the scientific literature the influence of nurses' empowerment on the quality of care.

METHODS:

An integrative review of literature, in which the PRISMA guidelines were followed, was completed. Articles were evaluated using the Joanna Briggs Institute (2020) Critical Appraisal Tools. The search for primary research articles was carried out in PubMed, Scopus, and Web of Science databases. Data were analyzed using content analysis methods.

RESULTS:

Twelve studies were identified and included in this review. Three themes emerged: (1) the relationship between nurses' empowerment and quality of care; (2) opportunities and challenges of implementing empowerment in nursing; and (3) recommendations for the empowerment of nurses.

CONCLUSION:

Empowerment should be encouraged from college education and maintained in health institutions through continuing education and improvement of working conditions that allow nurses to provide efficient and effective care.

KEYWORDS

empowerment, nurses, nursing, patient safety, quality of healthcare

INTRODUCTION

At first, the term "empowerment" was generally used by feminist women, but later it gained wider usage [1]. In the 1960s in the United States, the term "empowerment" was predominantly associated with feminist movements, where women sought to gain power, autonomy, and control over their own lives. Over time, the concept of empowerment transcended the feminist realm and began to be applied in various areas, including healthcare and, more specifically, in nursing practice. The expanded use of the term "empowerment" reflects a broader societal shift towards valuing autonomy, active participation, and equality [1,2]. "Empowerment" means having power over own life; it is the development or strengthening of skills that lead to positive changes in various aspects of life [2].

As a term associated with management, "empowerment" is related to the process of increasing the decision-making power of individuals and in promoting professional development through cooperation, information sharing, training, and teamwork [3]. Thus, empowering is giving authority, responsibility, and freedom to employees, assessing situations, and providing knowledge and training so that employees can be successful [4,5]. As it is a process that increases autonomy, empowerment is directly associated with the delegation of activities and increased employee motivation [3]. Empowering is to give power. Power, as a term used in management, can be divided into legitimate, reward, expert, referent, and coercive power. So, empowering is to increase legitimate power, develop through education and training, support in reaching resources and opportunities, and increase confidence and motivation [3]. In other words, employee empowerment involves autonomy, competence, community, and fulfillment [3,5].

Regarding the types of empowerment, it is commonly classified into social, educational, economic, political, and psychological [6]. In nursing, the term is widely used and discussed, as it encompasses professional growth and development, fundamental elements for nurses' job satisfaction, and quality care [7]. Empowering nurses gives them more decision-making power and promotes the delegation of activities and information sharing, thus increasing the confidence and motivation of the nursing team [5]. In the field of nursing, structural and psychological empowerment are widely addressed [2]. Structural empowerment is related to access to information, support, resources, and opportunities so that employees can achieve certain goals [2]. Psychological empowerment refers to the individual's internal motivation, resulting in psychological well-being [8]. Studies that address the structural empowerment of nurses associate it with improvements in professional performance [4,9], and therefore, in the quality of care. The psychological empowerment of nurses is also directly associated with professional competence [10].

The more qualified the nursing care, the more successful the health institution. Thus, with the increase in competitiveness in the health sector, efforts are being made to increasingly improve the quality of care provided to individuals and the community [4,11,12]. Empowerment in nursing and healthcare services is pivotal for improving the quality of care. When healthcare professionals, especially nurses, are empowered, they experience increased autonomy, leading to improved patient outcomes, enhanced communication, higher job satisfaction, and retention. Empowerment also promotes innovation, continuous improvement, and a patient-centered approach, ultimately contributing to a more effective and compassionate healthcare delivery system [2,4,7,10]. The empowerment of nurses has become a fundamental strategy for patient safety and, consequently, for the success of health institutions [2,7,13]. Thus, the objective of this study was to identify in the scientific literature the influence of nurses' empowerment on the quality of care. To achieve this, primary research articles on the topic were searched in the PubMed, Scopus, and Web of Science databases. After data analysis using content analysis, themes such as the relationship between nurses' empowerment and the quality of care; opportunities and challenges of empowerment implementation; and recommendations for nurses' empowerment emerged. These themes were then discussed throughout the paper.

METHOD

DESIGN
An integrative review of the literature was conducted through the five steps described by Whittemore and Knafl (2005) [14]. This design facilitates a dynamic exploration of the subject while also fostering critical thinking, providing an opportunity to engage others in meaningful discourse on the topic. In this approach, the synthesis of qualitative and quantitative studies is performed through a process that involves problem identification, literature search, data evaluation, data analysis, and presentation of the review [14].

SEARCH STRATEGY
The terms used in the search for articles were: "nurs*" AND "empowerment" AND "quality of care". Three databases were searched. Searching in the PubMed and Web of Science databases was done by title and abstract, and in the Scopus database by title, abstract, and keywords of the studies. The search for articles published in English was performed in December 2022 and it was not limited by publication date. No date limits were imposed to ensure a comprehensive and inclusive review, enabling the inclusion of a greater number of articles.

INCLUSION AND EXCLUSION CRITERIA

Primary research articles related to "nurse empowerment and quality of care", whose full texts were available on the Internet in English, were included in this review. Systematic or literature reviews, or discussion articles were excluded.

SEARCH OUTCOME

The selection of articles was guided by the PRISMA [Preferred Reporting Items for Systematic Reviews and Meta-analyzes] [15]. A total of 365 articles were initially found through the electronic databases used, and 184 duplicate articles were removed. The number of articles then decreased to 181. Titles and abstracts of the 181 articles were read. Eight articles were excluded for not being original research and 161 for addressing other subjects. Finally, a total of 12 articles were read in detail, and all were included in a quality assessment (Figure 1).

DATA EXTRACTION

General information was organized through a descriptive instrument containing reference, title, journal, country, aim, design, participants, main results, and limitations of the selected articles (Table 1). Relevant data are also included in the quality assessment of selected publications (Table 2).

ANALYSIS

Data analysis was carried out by following several steps, where similar information extracted from the selected articles was compared and organized into themes [14]. Content analysis was used. Through this method, new information based on the synthesis of results from previous original studies can be analyzed and shared [16]. The selected 12 studies were read several times; information was compared, and similar information was coded and organized by themes. Codes identified through data comparison were presented in three themes: (1) the relationship between nurses' empowerment and quality of care; (2) opportunities and challenges of implementing empowerment in nursing; and (3) recommendations for the empowerment of nurses. [Do not delete section break]

FIGURE 1. PRISMA FLOW DIAGRAM OF SEARCH, SCREENING, AND SELECTION OF ARTICLES FOR THE INTEGRATIVE LITERATURE REVIEW
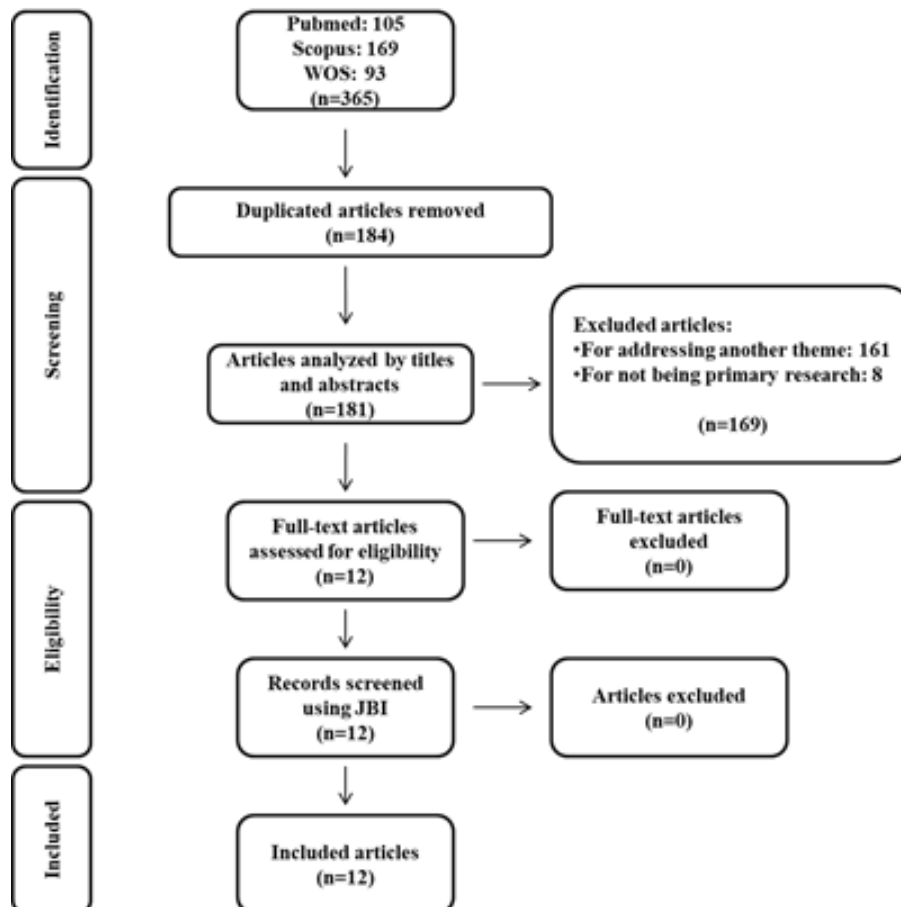
TABLE 1. REVIEWED ARTICLES AND SUMMARY OF RESULTS FOR THE SELECTED PUBLICATIONS USED IN THIS REVIEW STUDY

Author (year)	Title/Journal/Country	Aim	Design/Participants	Results	Limitations
Abbasi et al. (2018) [18]	"Effect of moral empowerment program on moral distress in intensive care unit nurses"/Nursing Ethics/Iran	"To provide a moral empowerment program to nursing directors, school of nursing, and the heads of hospitals to reduce moral distress in nurses and improve the quality of care."	A clinical trial carried out in two groups and three stages with 60 nurses. Data were collected using the standard Hamric's Moral Distress Scale.	It was identified that a moral empowerment program can reduce moral distress. Therefore, this kind of program should be implemented to improve the quality of care.	Subjects, the setting, and the criteria for inclusion in the sample were not mentioned. Strategies to deal with confounding factors were unclear.
Ahmad et al. (2022) [19]	"Organizational support and perceived environment impact on quality of care and job satisfaction: a study with Pakistani nurses"/ International Journal of Workplace Health Management/ Pakistan	"To examine the relationship of organizational support and perceived environment on quality of care and job satisfaction, with organizational commitment as a mediator for the first variable."	A cross-sectional study of 352 nurses through a self-designed survey.	It was observed that the empowerment of nurses mediates the relationship between organizational support with the quality of care.	Lack of information about the validation of data collection instruments. Strategies to deal with confounding factors were not mentioned.
Arshadi Bostanabad et al. (2022) [20]	"Clinical competency and psychological empowerment among ICU nurses caring for COVID-19 patients: A cross-sectional survey study"/ Journal of Nursing Management/Iran	"To determine clinical competency and psychological empowerment among ICU nurses caring for COVID-19 patients."	A cross-sectional study of 207 nurses. A clinical competency survey instrument and the Spreitzer psychological empowerment questionnaire were used.	A significant positive relationship between clinical competency and psychological empowerment was identified.	-

Asif et al. (2019) [21]	"Linking Transformational Leadership with Nurse-Assessed Adverse Patient Outcomes and the Quality of Care: Assessing the Role of Job Satisfaction and Structural Empowerment"/ International Journal of Environmental Research and Public Health/Pakistan	"To examine the relationships between transformational leadership (TL), structural empowerment (SE), job satisfaction (JS), nurse-assessed adverse patient outcomes (APO), and the quality of care (QOC)."	A cross-sectional study of 600 nurses. Data were collected through five different scales.	We found a positive relationship between structural empowerment and quality of care.	All participants were female.
Aslani et al. (2016) [22]	"Nurses' Empowerment in Self-Care Education to Stroke Patients: An Action Research Study"/International Journal of Community Based Nursing and Midwifery/ Iran	"To improve the nurses' practice in self-care education to stroke patients."	A qualitative study of 27 nursing personnel. Data were collected via interviews and focus groups.	Themes: professional development and effective factors on patient education.	Unclear information about the methodology and its congruence with research objectives. Lack of information about the researchers and their relationship with participants.
Hosseinzadeh & Barzegar (2016) [23]	"Survey the relationship between professional ethics and improve the quality of care with nurses, staff empowerment of the perspective of Ayatollah Rouhani	"To determine the relationship between the ethics of the profession and improve the quality of care with nurses, hospital staff empowerment from	A descriptive study of 163 nurses. Data were collected through a questionnaire.	Significant relations between professional ethics, quality of care and staff empowerment were identified.	Strategies to deal with confounding factors were not mentioned.

	hospital of Babol"/ International Journal of Medical Research & Health Sciences/Iran	the perspective of Ayatollah Rouhani."			
Hu et al. (2022) [24]	"Clinical nurses' moral courage and related factors: an empowerment perspective"/ BMC Nursing/ China	"To investigate moral courage and related factors among frontline nurses from an empowerment perspective"	A cross-sectional study of 226 nurses. Data were collected using a form of demographic characteristics, Conditions for Work Effectiveness II (CWEQ-II), Spreitzer's Psychological Empowerment Scale (PES) and Nurses' Moral Courage Scale (NMCS).	Structural and psychological empowerment affect the promotion of moral courage, and moral courage is important in improving the quality of care.	All participants were female. Strategies to deal with confounding factors were not mentioned.
Kuokkanen et al. (2016) [25]	"Newly graduated nurses' empowerment regarding professional competence and other work-related factors"/ BMC Nursing/ Finland	"To determine how newly graduated nurses assess their empowerment and to clarify professional competence compared to other work-related factors."	A descriptive, cross-sectional and correlational study of 318 nurses. The Qualities of an Empowered Nurse scale and the Nurse Competence Scale were used and a form of demographic/background characteristics were used.	It was observed an association between nurse empowerment and professional competence. Satisfaction with the quality of care in the work unit was positively correlated to empowerment.	-
Malak & Safieh (2022) [26]	"Association between work-related psychological empowerment and quality of nursing care among critical care nurses"/	"To examine the association between work-related psychological empowerment and quality of nursing care in Jordanian critical care nurses."	A cross-sectional study of 480 nurses. Data were collected via a socio-demographic data form, the Psychological Empowerment Instrument and the Karen-personnel instrument.	Psychological empowerment is necessary to improve the quality of nursing care.	Strategies to deal with confounding factors were not mentioned.

	Journal of Nursing Management/ Jordan				
Meng et al. (2014) [27]	"Relationships among structural empowerment, psychological empowerment, intent to stay and burnout in nursing field in mainland China—based on a cross-sectional questionnaire research"/International Journal of Nursing Practice/China	"To explore the relationship among perceived structural empowerment, psychological empowerment, burnout and intent to stay by nurses in mainland China."	A cross-sectional study of 219 nurses. Data were collected via a background data form and four different scales.	Participants who perceived high levels of structural empowerment would have a sense of high levels of psychological empowerment, which would reduce burnout and increase intent to stay. Thus, increasing the quality of care.	-
Van Bogaert et al. (2015) [28]	"Nurse managers' perceptions and experiences regarding staff nurse empowerment: a qualitative study"/Frontiers in Psychology/ Belgium	"To study nurse managers' perceptions and experiences of staff nurse structural empowerment and its impact on the nurse manager leadership role and style."	A qualitative study of eight nurses. Data were collected via individual semi-structured interviews.	Themes: vision of empowerment; structural empowerment policy; nurse managers' roles; and suggestions to improve the empowerment policy.	Lack of information about the researchers and their relationship with participants.

Van Bogaert et al. (2016) [29]	"Staff Nurses' Perceptions and Experiences about Structural Empowerment: A Qualitative Phenomenological Study /Plos One /Belgium	"To investigate staff nurses' perceptions and experiences about structural empowerment and perceptions regarding the extent to which structural empowerment supports safe quality patient care."	A qualitative study of 11 nurses. Data were collected via individual semi-structured interviews.	Themes related to meaning, experiences opportunities and challenges of empowerment, level of involvement, quality of care, level of education and training were identified.	Lack of information about the researchers and their relationship with participants.

QUALITY ASSESSMENT

Articles were evaluated using the Joanna Briggs Institute (JBI) Critical Appraisal Tools [17]. Using these tools, it is possible to assess the quality of articles of different methodological designs. Although no articles were excluded based on the quality assessment, some methodological weaknesses were identified. In quantitative studies, the most commonly detected weakness was related to the lack of information on approaches used in addressing confounding factors. As for qualitative studies, the lack of information about the researchers and their relationship with participants was the most common weakness identified. The results of the quality assessment are shown in Table 2. In total, 12 articles were finally included in this review.

TABLE 2. JOANNA BRIGGS INSTITUTE (JBI) CRITICAL APPRAISAL TOOLS* QUALITY ASSESSMENT

Reference	1.Qualitative studies										2.Cross-sectional studies								Decision
Criteria**	1	2	3	4	5	6	7	8	9	10	1	2	3	4	5	6	7	8	
Abbasi et al. (2018) [18]											U	N	Y	Y	Y	U	Y	Y	I
Ahmad et al. (2022) [19]											U	Y	Y	Y	Y	N	Y	Y	I
Arshadi Bostanabad et al. (2022) [20]											Y	Y	Y	Y	Y	Y	Y	Y	I
Asif et al. (2019) [21]											Y	Y	Y	Y	Y	Y	Y	Y	I
Aslani et al. (2016) [22]	U	U	Y	Y	Y	N	N	Y	Y	Y									I
Hosseinzadeh & Barzegar (2016) [23]											Y	Y	Y	Y	Y	N	Y	Y	I
Hu et al. (2022) [24]											Y	Y	Y	Y	Y	N	Y	Y	I
Kuokkanen et al. (2016) [25]											Y	Y	Y	Y	Y	Y	Y	Y	I
Malak & Safieh (2022) [26]											Y	Y	Y	Y	Y	N	Y	Y	I
Meng et al. (2014) [27]											Y	Y	Y	Y	Y	Y	Y	Y	I
Van Bogaert et al. (2015) [28]	Y	Y	Y	Y	Y	N	N	Y	Y	Y									I
Van Bogaert et al. (2016) [29]	Y	Y	Y	Y	Y	N	N	Y	Y	Y									I

*JBI Critical Appraisal Tools were developed by the Joanna Briggs Institute (University of Adelaide, South Australia) to assess the quality of studies of various methodological designs included in systematic reviews [17].

**Criteria: Screening questions:

1. Qualitative studies: (1.1) Is there congruity between the stated philosophical perspective and the research methodology? (1.2) Is there congruity between the research methodology and the research question or objectives? (1.3) Is there congruity between the research methodology and the methods used to collect data? (1.4) Is there congruity between the research methodology and the representation and analysis of data? (1.5) Is there congruity between the research methodology and the interpretation of results? (1.6) Is there a statement locating the researcher culturally or theoretically? (1.7) Is the influence of the researcher on the research, and vice-versa, addressed? (1.8) Are participants, and their voices, adequately represented? (1.9) Is the research ethical according to current criteria or, for recent studies, and is there evidence of ethical approval by an appropriate body? (1.10) Do the conclusions drawn in the research report flow from the analysis, or interpretation, of the data?

2. Cross-sectional studies: (2.1) Were the criteria for inclusion in the sample clearly defined? (2.2) Were the study subjects and the setting described in detail? (2.3) Was the exposure measured in a valid and reliable way? (2.4) Were objective, standard criteria used for measurement of the condition? (2.5) Were confounding factors identified? (2.6) Were strategies to deal with confounding factors stated? (2.7) Were the outcomes measured in a valid and reliable way? (2.8) Was appropriate statistical analysis used? E: excluded; I: included N: no; U: unclear; Y: yes.

RESULTS

For this study, 12 research publications were selected, encompassing articles from 10 different journals. Four (30.33%) studies are from 2016, and four (30.33%) are from 2022. Studies were conducted in Iran (n=4), Belgium (n=2), China (n=2), Pakistan (n=2), Finland (n=1), and Jordan (n=1). The number of nurse participants varied from eight to 600. In nine studies, the majority of participants were female; in two studies, all participants were female [21,24]; and in one study, gender was not mentioned [28]. Concerning methodology; nine (75%) studies were quantitative and three (25%) were qualitative.

Empowerment in nursing was discussed in a variety of ways in the 12 articles. While two articles addressed empowerment in general [23, 25], one study addressed empowerment related to the care provided to a specific group of patients [22]. Structural empowerment was addressed in six articles [19,21,24,27-29]. Psychological empowerment was discussed in four studies [20,24,26,27]. One article addressed moral empowerment [18]. All studies reported the relationship between nurses' empowerment and the quality of care.

RELATIONSHIP BETWEEN NURSES' EMPOWERMENT AND QUALITY OF CARE

The included studies identified a relationship between nurse empowerment and quality of care. There is a correlation between nurse empowerment and professional competence, job satisfaction [25], ability to make decisions [29], and therefore, quality of care [25,29]. It was found that empowering nurses through programs that develop skills and knowledge increases their self-confidence, intensifies relationships with patients, and improves the quality of care [22]. Nurses believe that empowerment is involvement at all institutional levels, accumulating knowledge, and making efforts to improve nursing care [28]. In turn, the organizational commitment of nurses is positively influenced by institutional support, which increases job satisfaction and, consequently, the quality of care [18].

The scientific literature also identified that transformational leadership has a strong relationship with quality of care, while structural empowerment and job satisfaction seem to be potential mediators of such relationships [21]. Leadership styles influence nurse empowerment since nurse leaders present important roles in empowering nurses [28]. It is important to notice that nurse managers know that structural empowerment has a positive impact on nurses,

quality of care, and patient safety [28]. In addition, the structural empowerment of nurses leads to psychological empowerment [27], and psychological empowerment of nurses positively affects the quality of care [26] since it increases nurses' clinical competence [20] and decreases the prevalence of burnout and the intention to leave [27]. Therefore, moral empowerment programs are important in reducing moral distress in nurses and improving nursing care [18].

OPPORTUNITIES AND CHALLENGES OF IMPLEMENTING EMPOWERMENT IN NURSING

The importance of empowering nurse managers and staff nurses was emphasized [28]. However, the scientific literature pointed out that empowering experienced nurses can be a challenge since empowerment programs are better accepted by young nurses [27,28], who usually evaluated their empowerment levels as high [25]. The role of nursing leaders was identified as important to support the team and implement a leadership style that leads to nurse empowerment. The importance of teamwork [28], as well as the relationship between staff nurses and their managers, were pointed out as pivotal to experiencing empowerment [29] since moral and ethical management increases the quality of nursing care and the feeling of empowerment [23]. In other words, nurses' moral courage, which is the courage needed to act during ethical conflicts, is affected by structural and psychological empowerment, and ethical attitudes are necessary for nurses to provide quality care [24].

Despite the several advantages of empowerment, some nurse managers believe that empowerment increases the workload and pressure on nurses [28,29]. Lack of time and seeing empowerment as an obligation were also pointed out as barriers to nurse empowerment [29]. Thus, it was emphasized the importance of sufficient staff and time for the implementation of empowerment programs in nursing [28]. Another challenge for the implementation of empowerment strategies is the lack of information due to inefficient communication [29]. Also, the difference between learning about nursing empowerment in theory and putting its knowledge into practice was addressed by nurse managers [28].

RECOMMENDATIONS FOR THE EMPOWERMENT OF NURSES

Studies provided recommendations for the implementation of empowerment programs for nurses. It was pointed out that health organizations should plan and implement

empowerment programs to improve nurses' skills [22,28], which will prevent adverse events and increase job satisfaction [21]. It was identified that nurse preceptors [28] and nurse leaders must develop actions to empower nurses [23,27]. The empowerment of nurses should be implemented through workshops [18,22], and improvements in working conditions [19]. It is necessary to emphasize the importance of empowering newly graduated nurses since they need support and career opportunities [25]. Organizational, workgroup and individual levels should be analyzed during the empowerment process so that nurses can reach job satisfaction and motivation which in turn improve the quality of care [19].

Empowerment is essential to enhance the image of nurses, and continuously improve the health system. Consequently, strategies to boost communication should be planned and be part of the empowerment policy of health institutions [28]. Policymakers and nurse managers should, therefore, implement strategies to promote structural [28] and psychological empowerment as they favor the provision of high-quality care [26].

DISCUSSION

This integrative review was carried out to identify in the scientific literature the influence of nurses' empowerment on the quality of care. Studies identified that empowering nurses increases professional competence, job satisfaction, and decision-making abilities, and decreases burnout and intention to leave, thus increasing the quality of care. Nurses' poor working conditions, so discussed in several studies, also appear in this integrative review as barriers to the implementation of programs to empower nurses since high workload, shortage of human and material resources, insufficient time, miscommunication, lack of in-service training, and ineffective leadership were pointed out as big challenges for the empowering of nurses. In addition, it may be more difficult to empower experienced nurses. On the other hand, effective teamwork has a positive impact on the nurses' empowerment process. Nurse leaders, nurse preceptors, and health facilities administrators should empower nurses through workshops, training, and improvement of working conditions. Moreover, the empowerment of nurses should be more addressed since improving the quality of care, also improves the image of the profession in society.

The effects of nurses' job satisfaction on the quality of care are widely discussed in the scientific literature [30,31]. Studies show that satisfied nurses are less likely to intend to leave their jobs [32,33]. A study carried out in Ethiopia identified a relationship between job satisfaction and intention to stay [33]. The intention to leave the job, in turn, negatively affects the quality of care [34]. Another obstacle to providing effective and efficient care is burnout syndrome, a common illness among nurses and discussed in several studies, which show how harmful the syndrome can be for healthcare workers and for the patients cared for by them [35,36]. A study carried out in Iran identified a relationship between high levels of burnout in nurses and reduced quality of care [36]. In addition, leadership skills are associated with patient safety since nurses' ability to lead and make decisions affect the nursing care [37, 38]. A bibliometric analysis carried out to identify trends and hot topics in nurse empowerment emphasized that keywords such as "job satisfaction", "leadership", "retention", and "burnout" are among the most used by authors who addressed the theme [13]. Thus, measures to increase nurses' job satisfaction, intention to stay, leadership skills, and decrease burnout must be taken to ensure patient and worker safety. One of these measures is the empowerment of nurses [39-41].

The poor working conditions of nurses are also barriers to providing qualified care [32], in addition to putting the physical, mental and social health of nurses at risk [42]. Nursing shortages, high workloads, and lack of medical material are some of the problems faced by nurses around the world [32,43]. Adverse working conditions can be an impediment to nurses' empowerment since problems in the work environment can make nurses feel devalued and unmotivated [44,45]. Thus, nurse managers play a pivotal role in developing a work environment that enables the empowerment of nurses [46].

There is no quality nursing care without effective communication and teamwork [47]. On the other hand, teamwork, adequate communication, and the will to improve are important factors in the nurse's empowerment process. It is important to notice that, generally, nurses are resistant to changes [48], however, newly graduated nurses seem to better accept changes in their routines, and thus the empowerment process may be easier for them. An international survey emphasized that newly graduated nurses must be trained to make decisions, communicate efficiently, and develop teamwork, in other words, they must be prepared to be nurse leaders in the future [49]. On

the other hand, a study carried out in Poland identified that experienced nurses had lower levels of empowerment [50], which demonstrates that special attention should also be given to this group of nurses. Therefore, innovative empowerment programs involving experienced and newly graduated staff nurses and supervisors must be developed to ensure patient safety [51].

Many studies address devaluation by society as one of the major problems faced by nurses [52,53]. The role of nursing leaders, nursing educators, and administrators of health institutions is fundamental for the support and training of nurses [45,54,55]. In addition, through reforms in public policies, nurses can be empowered, and the image of nursing can be more valued in society [44].

LIMITATIONS

This integrative review of the literature has some limitations. The search was performed only by title/abstract/keywords of studies published in English. In addition, other important databases were not searched, thus, some articles may not have been found due to the search criteria. However, the included studies, published over a recent eight-year period, enabled a relevant analysis of the importance of nurse empowerment for the quality of care.

CONCLUSIONS

The empowerment of nurses brings many benefits to the professionals themselves and to patients. Empowered nurses are more satisfied and competent, which favors patient safety. Therefore, the empowerment of nurses is important for the success of health institutions and should be encouraged from college and maintained in health institutions through continuing education and improvement of working conditions that allow nurses to provide efficient and effective care. Further research, conducted using broader search criteria, should be undertaken to find and analyze additional sources that link nurse empowerment with quality of care.

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CONFLICT OF INTEREST STATEMENT

The author declares that there is no conflict of interest with respect to the research, authorship, and/or publication of this article.

AUTHOR'S CONTRIBUTION

Plan and design; Material, methods and data collection; Data analysis and comments; Writing and corrections: A.L.F.A.

ETHICAL APPROVAL

No ethical approval was required for this paper as it is an integrative review that used data in the public domain.

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