

1 The Role of Ethics in Physiotherapy: A Scoping Review Protocol

2 Short-run title: Ethics and Physiotherapy

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| Design of the work | GB, SPM, SB |
| Methodology Supervision | SB, MT |
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- 37 MT – 2
- 38 SB – 11
- 39

40 **Abstract**

41 **Background and aims:**

42 Ethical considerations play a crucial role in physiotherapy, influencing patient care,
43 professional conduct, and clinical decision-making. Despite its significance, there is a limited
44 comprehensive understanding of how ethical principles are applied in physiotherapy practice.
45 The evolving nature of the field, alongside advancements in treatment approaches, presents
46 new ethical challenges that require systematic investigation. This scoping review aims to map
47 the existing literature on ethical issues within physiotherapy, identify research
48 methodologies, and highlight knowledge gaps.

49 **Method:**

50 This review will follow the methodological framework proposed by the Joanna Briggs
51 Institute (JBI) for scoping reviews and will be reported following the PRISMA for Scoping
52 Reviews guidelines. A comprehensive search will be conducted on PubMed, Medline, Embase,
53 CINAHL, PsychInfo, Cochrane Central, and Pedro. The gray literature will be consulted. Studies
54 involving physiotherapists and those addressing ethical issues in physiotherapy practice will
55 be included. Data extraction will be based on a standardized form, and a narrative synthesis
56 will categorize the ethical issues and principles.

57 **Discussion:**

58 The review will provide a broad overview of ethical issues and principles in physiotherapy. It
59 will inform future research priorities, guide ethical training for practitioners, and support the
60 development of policies and guidelines to improve ethical shared decision-making in
61 physiotherapy practice.

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63 **Keywords:**

64 Ethics, Medical Ethics, Physiotherapy, Ethical Dilemmas, Bioethics, Scoping Review,
65 Professional Conduct

66

67 **1. Introduction**

68 In physiotherapy, ethical considerations are necessary to deliver high-quality care and ensure
69 shared decision-making and positive outcomes for patients¹. Physiotherapists frequently
70 encounter ethical dilemmas such as balancing patient autonomy with professional
71 recommendations², managing conflicts of interest³, addressing disparities in access to care^{2,4},
72 ensuring informed consent⁵, and navigating situations where the patient's best interest may
73 conflict with institutional policies or resources⁶. These dilemmas can significantly impact
74 their practice and the patient experience⁷⁻⁹.

75 In light of the frequent necessity to navigate these ethical dilemmas, ethics plays a crucial role
76 in physiotherapy⁷. However, the intersection of physiotherapy and ethics seems to have not
77 received sufficient exploration, and our understanding of typical ethical issues in
78 rehabilitation contexts is limited. We know little about the ethical principles adopted in
79 physiotherapy and the philosophical disciplines or theoretical frameworks utilized in the
80 literature to address these topics^{2,3,6,8-10}. Moreover, the evolving nature of physiotherapy
81 practice, with advancements in treatment methods and a focus on patient-centered care,
82 brings new ethical challenges that require careful consideration⁷. Hence, there is a need for a
83 thorough examination of how these ethical issues are addressed in the literature⁷. Moreover,
84 the evolving nature of physiotherapy practice, with advancements in treatment methods and
85 a focus on patient-centered care, brings new ethical challenges that require careful
86 consideration^{1,7,11}.

87

88 **1.1 Rationale for conducting a scoping review**

89 While the importance of ethical considerations in physiotherapy has been established, specific
90 insights into applying these principles in practice still need to be explored. There is a pressing
91 need to explore the unique ethical dilemmas physiotherapists face in various rehabilitation
92 contexts and the principles and frameworks that guide their decision-making. A
93 comprehensive understanding of how ethical challenges are addressed in different settings
94 could inform the development of practical guidelines and training programs on the
95 importance of applying ethics in clinical-decision making. By examining existing literature
96 through a scoping review, we can identify key themes, gaps, and emerging issues related to
97 ethics in physiotherapy. This exploration will enhance our understanding of ethical practices
98 and provide a foundation for improving clinical practice, ultimately benefiting patient
99 outcomes.

100 A scoping review is particularly suited for this investigation due to several reasons:

- 101 1. Broad Overview of Existing Knowledge: A scoping review will allow us to map the
102 existing literature on ethics in physiotherapy, providing a broad overview of the key
103 ethical issues, themes, and challenges that have been identified.
- 104 2. Identification of Gaps and Emerging Issues: By systematically examining the literature,
105 a scoping review can highlight areas where research is lacking or where ethical
106 challenges are not yet fully addressed. This will inform future research priorities and
107 guide the development of targeted studies that address these gaps.
- 108 3. Integration of Diverse Perspectives: Physiotherapy ethics intersect with various
109 aspects of clinical practice, including patient care, professional behavior, and
110 institutional policies. A scoping review will integrate perspectives from different
111 sources, including empirical studies, theoretical discussions, and practical guidelines,
112 providing a comprehensive view of how ethics are integrated into physiotherapy
113 practice.
- 114 4. Foundation for Policy and Practice Improvements: Understanding the current state of
115 knowledge on ethics in physiotherapy will contribute to the development of better
116 guidelines, training programs, and policies. It will support physiotherapists in
117 navigating ethical dilemmas more effectively and ensure that ethical considerations
118 are embedded in everyday practice.
- 119 5. Enhancement of Professional Development: By clarifying the ethical issues faced by
120 physiotherapists and how they are managed, this scoping review will contribute to the
121 professional development of practitioners. It will help enhance ethical awareness and
122 decision-making skills among physiotherapists, ultimately improving the quality of
123 patient care.

124 In summary, conducting a scoping review on ethics in physiotherapy is essential for
125 consolidating current knowledge, identifying gaps, and guiding future research and practice.
126 This review will provide a valuable resource for practitioners, educators, and policymakers
127 seeking to enhance ethical standards and practices within physiotherapy.

128

129 **1.2 Aim and Objective**

130 This scoping review aims to answer the research question: "What is known about the
131 intersection of ethics and physiotherapy?" The specific objectives are to (1) map the existing
132 literature on ethical considerations in physiotherapy, including typical ethical dilemmas,
133 adopted ethical principles, and the theoretical frameworks used to address these issues, (2)

134 identify the methodologies employed in studying ethical principles and challenges in
135 physiotherapy, and (3) highlight any gaps in knowledge regarding ethical considerations in
136 this field.

137 **2. Material and methods**

138 This scoping review will adhere to the methodological guidance for scoping reviews of the
139 Joanna Briggs Institute (JBI) ¹². The reporting will follow the Preferred Reporting Items for
140 Systematic Reviews and Meta-Analyses extension for Scoping Reviews (PRIMA-ScR) ¹³.

141 **2.1 Research team**

142 The research team comprises four physiotherapists and one philosopher, all with qualitative
143 and/or quantitative research backgrounds. One of the physiotherapists holds a master's
144 degree in philosophy, and another is pursuing a PhD in bioethics applied to rehabilitation.
145 Additionally, one physiotherapist has a PhD in neuroscience and medical science, serving as a
146 methodologist to oversee the methodological rigor of the process underlying this scoping
147 review. The philosopher in the group has completed a PhD in bioethics. This diverse
148 composition ensures that all relevant areas of expertise and knowledge necessary for this
149 scoping review are comprehensively covered.

150 **2.2 Eligibility criteria**

151 Studies will be considered eligible for inclusion if they meet the Population, Concept and
152 Context (PCC) framework criteria proposed by the JBI¹².

153 *2.2.1 Population*

154 We will include studies focusing on physiotherapists as professionals and physiotherapy as a
155 discipline. This includes research on:

- 156 • **Physiotherapists:** Studies involving physiotherapists as practitioners, exploring their
157 ethical challenges, decision-making processes, and professional conduct.
- 158 • **Physiotherapy Practice:** Research examining ethical issues related to the practice of
159 physiotherapy, including interactions with patients, treatment methods, and the
160 application of ethical principles in clinical settings.

161

162 In summary, the population of interest is limited to physiotherapists and the ethical aspects of
163 their professional practice. Studies focusing on other healthcare professionals involved in
164 physiotherapy will be excluded unless the ethical issues pertain specifically to
165 physiotherapists. Similarly, research from the patient's perspective will only be included if it
166 directly examines physiotherapists' ethical conduct or decision-making processes.

167 *2.2.2 Concept*

168 The principal concept of interest is ethics and bioethics within the context of physiotherapy
169 practice. Studies must address ethical issues, dilemmas, or principles as they pertain to
170 physiotherapy and rehabilitation. Studies that focus solely on technical or procedural aspects
171 of physiotherapy without addressing ethical dimensions will not be included. For instance,
172 studies that examine only technical treatment methods or outcomes without considering their
173 ethical implications will be excluded.

174 *2.2.3 Context*

175 No specific restrictions will be applied to the context, as we intend to investigate studies from
176 all geographical locations with participants regardless of specific demographic, social or
177 cultural factors.

178 *2.2.4 Types of studies*

179 All types of primary studies and publications (both qualitative and quantitative) will be
180 included in this review with no restrictions to time, geographical location, setting and
181 language. Reviews, editorials, conference abstracts, commentaries, expert opinions, letters to
182 editors, book review chapters or study protocols will be excluded. However, their references
183 will be checked for eligible studies.

184 **2.3 Search strategy and information sources**

185 The search strategy will involve the following databases: PubMed, Medline, Embase, Cochrane
186 Central, Web Of science, CINAHL, PsychInfo, and Pedro. These databases were selected for
187 their comprehensive coverage of health research and their ability to track citations across
188 various disciplines. PubMed and Medline cover biomedical literature extensively, while
189 Embase offers strong coverage of pharmacology and drug-related studies. Cochrane Central is
190 crucial for systematic reviews and clinical trials, CINAHL covers nursing and allied health
191 literature, PsychInfo includes psychological and behavioral studies, and Pedro focuses on
192 evidence-based practice in physiotherapy.

193 A search string has been prepared for PubMed and will be adapted across all these databases.
194 No limitations will be set on the search strategy or the study date (Supplementary File 1). The
195 string will be converted to be used in all the other databases. These databases were selected
196 due to their relevance to health research and their ability to track citations. No limitations will
197 be set for the search strategy or the date of the study. A grey literature search will also follow
198 the Canadian Agency for Drugs and Technologies in Health (CADTH) tool for searching health-
199 related ¹⁴. The CADTH tool makes the grey literature searching process transparent and
200 systematic ¹⁵. If required, authors will be contacted for further information or missing data. If
201 needed, the search strategy will be modified and adapted to balance the relevance of the

202 records following an interactive approach to scoping review. Any changes will be highlighted
203 in the scoping review output. The International Prospective Register of Systematic Reviews
204 database (PROSPERO) was consulted to check for ongoing reviews on this topic. No
205 systematic reviews were found on this topic.

206 **2.4 Study selection**

207 All entries will be uploaded to Covidence (www.covidence.org), where duplicates will be
208 automatically removed. The screening process will be conducted by two researchers (GB, FP)
209 in the blind. A title and abstract review will be conducted, followed by a full-text screening. A
210 pilot test, pre-formal screening for a random of 10% of records retrieved, will be conducted as
211 a calibration exercise to improve reliability across reviewers. The formal screening will start if
212 the percentage interrater agreement is >90%. Otherwise, the inclusion and exclusion criteria
213 will be further specified, and another pilot test will be performed. In case of conflict, a third
214 author will be consulted (SB). Reasons for the exclusion will be reported in the scoping review
215 report. The final included studies will be mapped through the scoping review. A graphical
216 representation of the selection of studies will be presented, adopting the Preferred Reporting
217 Items for Systematic Reviews and Meta-analyses (PRISMA) flow diagram ¹⁶. The included
218 studies will be uploaded to a OneDrive folder accessible to all team members. The studies'
219 authors will be contacted if we cannot find the full text of their papers.

220 **2.5 Data extraction**

221 Data will be charted based on the JBI Standardized Data Extraction Form ¹⁷. The following
222 information will be extracted from the included studies:

- 223 • **Authors and year of publication:** Details about the authors and the year the study
224 was published.
- 225 • **Country of origin:** The country or countries where the study was conducted.
- 226 • **Aims and purpose:** A description of the study's aims and objectives.
- 227 • **Population and sample size:** Characteristics of the studied population and the sample
228 size.
- 229 • **Study design:** The type of study conducted (e.g., qualitative, quantitative, review, etc.).
- 230 • **Ethical issues addressed:** Specific ethical dilemmas or issues discussed (e.g., patient
231 autonomy, informed consent, professional conduct, confidentiality).
- 232 • **Domains of physiotherapy:** Areas of physiotherapy practice covered in the study
233 (e.g., musculoskeletal rehabilitation, neurorehabilitation, rehabilitation techniques,
234 patient interactions).

- 235 • **Outcomes:** Results related to the ethical issues (e.g., impact on patient care,
236 professional conduct).
- 237 • **Methods of ethical assessment:** Tools or methods used to assess ethical issues (e.g.,
238 qualitative interviews, surveys, ethical frameworks).
- 239 • **Philosophical framework:** Theories or philosophical approaches used to analyze the
240 ethical issues.
- 241 • **Conclusion:** A summary of how ethical issues were addressed and their implications
242 for practice.

243 Any changes made to the data extraction form will be documented in the final scoping review.
244 This form will be reviewed by all researchers involved and tested before implementation,
245 following the same screening pilot test method. Two researchers (GB, FP) will independently
246 extract the data. Given the iterative nature of the data extraction, other data may be added to
247 the proposed draft. The modifications will be reported in the full scoping review.

248 **2.6 Data synthesis**

249 The results will be narratively synthesized to organize and classify the ethical issues and
250 principles identified in the context of physiotherapy into overarching themes. This synthesis
251 will involve grouping the findings into key thematic areas, such as ethical dilemmas in patient
252 interactions, professional conduct, and ethical decision-making in various physiotherapy
253 settings.

254 We will provide a descriptive summary of the findings, highlighting how ethical
255 considerations are addressed across different aspects of physiotherapy practice. This
256 summary will include identifying gaps in the literature where further research is needed and
257 suggesting potential areas for future investigation.

258 All included studies will be reported and mapped to illustrate the breadth of the search and
259 the data extracted. The results will be summarized in tables and graphs to visually represent
260 the distribution of ethical topics and methodologies. Given the iterative nature of the scoping
261 review process, additional categories or themes may be introduced as necessary to ensure a
262 comprehensive analysis of the ethical dimensions in physiotherapy.

263 **2.7 Methodological quality appraisal**

264 No critical appraisal of the risk of bias will be performed in line with guidance on the scoping
265 review ¹², as we intend to map the available evidence rather than provide clinical and
266 synthesised answers to a question.
267

268 **3. Discussion**

269 This scoping review aims to systematically explore and analyze the scientific literature on
270 ethical issues within the field of physiotherapy. The primary objectives of this review are to
271 (1) map the existing literature on ethical considerations in physiotherapy practice, (2)
272 identify the methodologies used to assess these ethical issues, and (3) highlight any gaps in
273 knowledge regarding the integration of ethical principles into physiotherapy.

274 We hypothesise that the review will reveal a concentration of studies focusing on specific
275 ethical dilemmas such as patient autonomy, informed consent, and confidentiality, with
276 potentially less attention given to broader ethical frameworks and their application across
277 various aspects of physiotherapy practice. By outlining this protocol, we seek to provide a
278 clear and systematic approach for conducting the review, minimizing potential reporting
279 biases and improving the transparency of our work.

280 The protocol follows the methodological framework established for conducting scoping
281 reviews ^{12,13}. Any deviations from this protocol will be documented and addressed in the final
282 scoping review report. The findings from this review will be disseminated through a peer-
283 reviewed publication and presentations at relevant conferences to contribute to the
284 understanding and development of ethical practices in physiotherapy.

285

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