



Bentham's Utilitarianism Ethical Theory and Its Application in the Triage System: A Scholarly Philosophical Paper

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ABSTRACT

Background: Jeremy Bentham introduced Utilitarianism, which is one of the normative ethical theories that impose procedures that maximize happiness and well-being for all intended individuals. Utilitarianism has been applied to the crisis of global poverty, the ethics of raising animals for food, and social welfare economics. **Purpose:** This study aims to apply Bentham's utilitarianism ethical theory in the triage system. **Methods:** In the current paper, we study the application of the concept of utilitarianism in the triage system in disasters as an example of a nursing healthcare system. **Results:** Utilitarianism is a practical framework for the triage system during crises and pandemics. It represents an important style of thought in modern life. **Conclusion:** Utilitarianism could be applied in some situations, such as pandemics and crises. However, it has some limitations related to being unable to apply some principles of human rights and social justice. **Implications for Nursing:** This paper underscores nurses' crucial role in navigating ethical dilemmas in the triage system, advocating for a practical framework grounded in the utilitarianism ethical theory. Nursing institutions should establish clear guidelines and provide ongoing training to equip nurses with the skills needed for effective ethical decision-making in resource-scarce environments.

Keywords: Jeremy Bentham, Utilitarianism, Triage system, Nursing, Philosophy.

What does this paper add?

1. Comprehensive Exploration of Utilitarianism in Triage: This study thoroughly examines how utilitarianism, advocated by Bentham, can guide triage decisions during disasters and pandemics. It analyzes ethical considerations and practical implications, aiming to maximize healthcare benefits amid resource constraints.
2. Critical Analysis of Ethical Dilemmas: Scrutinizing utilitarianism's application in pandemics illuminates ethical challenges for healthcare providers, particularly triage nurses. It highlights the tension between optimizing overall well-being and

upholding individual rights and social justice principles, enriching the understanding of ethical decision-making in triage contexts.

Introduction

Jeremy Bentham (1748-1832) was the pioneering figure behind utilitarianism, a moral theory that posits that actions should be evaluated based on their capacity to enhance or diminish human well-being, often referred to as 'utility' (Taylor, 1977). Utilitarianism remains a pivotal framework in modern ethical debates due to its focus on maximizing overall well-being. In today's complex moral landscape, understanding utilitarian

principles provides a foundational lens through which we can assess and navigate various ethical dilemmas (Hare, 2014). Notably, utilitarianism underscores the importance of prioritizing actions that contribute to the greatest good for the greatest number, emphasizing the equal valuation of all individuals' well-being (Taylor, 1977). Recognizing the enduring relevance of utilitarian thought in modern ethical discourse, this paper explores its application within the context of the triage system, shedding light on its implications for healthcare decision-making and societal welfare.

Utilitarianism Ethical Theory

The founder of utilitarianism, Jeremy Bentham, described utility as it leans to investigate benefit, advantage, pleasure, good, or happiness or to inhibit the happening of mischief, pain, evil, or unhappiness to the part whose interest is considered (Hare, 2014). Utilitarianism is one of the normative ethical theories that impose procedures that maximize happiness and well-being for all intended individuals. The foundational premise across various ideas of utilitarianism is the maximization of utility, typically construed concerning well-being or happiness (Hare, 2014). Utilitarian ethical frameworks have found application in addressing issues, such as the global poverty crisis, ethical considerations surrounding the production and consumption of animal products, and the domain of social welfare economics (Graafland & Bosma, 2013).

Bentham said that human nature is placed under the rule of two sovereign forces; pain, and pleasure, and they decide what to do. The principle of utility is the one that agrees or disagrees with any action at all that would increase or decrease the happiness of the other party (Bentham, 1996). He urged legislators to examine whether punishment leads to even worse offenses. Bentham claims that instead of avoiding bad behavior, some ineffective laws and penalties may encourage vices that are worse and more dangerous than the ones being deterred. He suggests that legislators should weigh the pleasure and pain of any proposed legislation and create laws that will do the best for the greatest number of people. He argues that the idea of an individual seeking his or her happiness cannot necessarily be deemed "right", because these pursuits frequently result in greater pain and less pleasure for the society as a whole. To ensure that the greatest number

of individuals feel the greatest amount of pleasure and the least amount of pain, society's laws are essential (Fleurbaey et al., 2008).

Utilitarianism prioritizes maximizing overall happiness or utility, while Kantian morality, based on Immanuel Kant's philosophy, emphasizes the importance of moral principles and individual rights (Kant, 2017). In the context of triage systems during disasters, utilitarianism would advocate for decisions that minimize suffering and maximize the number of lives saved, potentially prioritizing those with the highest chance of survival or future societal contribution. This consequentialist approach may overlook the intrinsic value and rights of individuals, leading to ethically challenging decisions. In contrast, Kantian morality would prioritize treating individuals as an end in themselves, respecting their inherent dignity and rights, which may conflict with utilitarian considerations (Kant, 2017). Therefore, while utilitarianism offers a pragmatic framework for decision-making in triage, it is essential to integrate Kantian principles to ensure decisions that prioritize both overall utility and respect for individual rights and dignity.

Hedonic Calculus

Bentham introduced a method for calculating the value of pleasures and pains in Chapter IV of his book, which became known as *calculus*. Bentham said that the measurement of pleasure or pain is made according to its intensity, duration, certainty/uncertainty, and proximity/distance (Crimmins, 2015), see Table 1. In disasters, the hedonic calculus might be applied to prioritize treatments that offer the greatest relief from suffering or the highest likelihood of survival, taking into account factors like the intensity and duration of pain relief or the certainty of positive outcomes. According to Bentham, the only proof of the principle of utility is that anything is desirable because people desire it, just as the only proof that something is visible is that people see it and the proof of sound is that people hear it. As far as a person's desire for happiness is the desire for general happiness, a person should be concerned with his/her happiness and general happiness as well (Bentham, 1996).

Table 1. Hedonic calculus for pleasure and pain

CRITERIA	HOW TO MEASURE?
DURATION	How long does it last?
INTENSITY	How intense is it?
PROPINQUITY	How near/remote is it?
EXTENT	How widely does it cover?
CERTAINTY	How probable is it?
PURITY	How free from pain is it?
FECUNDITY	Does it lead to further pleasure?

John Stuart Mill, who rejected the quantitative measurement of utility, said, “It is quite compatible with the principle of utility to recognize the fact that some kinds of pleasure are more desirable and more valuable than others. It would be absurd that while, in estimating all other things, quality is considered as well as quantity, the estimation of pleasures should be supposed to depend on quantity alone” (Mill, 1998). As an example, according to Mill, saving the life of a healthcare worker who can then go on to save more lives might be considered more valuable than saving an individual with less potential for future contributions.

Therefore, while Bentham's hedonic calculus provides a framework for assessing utility, it is essential to recognize the qualitative differences in pleasures and pains, as emphasized by Mill, to ensure a more nuanced and morally sound approach to ethical decision-making in triage systems during disasters.

Triage System and Utilitarianism

A triage system is crucial in the medical field, especially in the emergency department, where the first

contact between healthcare providers and clients occurs. The triage nurse assesses the clients for their medical complaints and other physiological assessments. Triage nurses take into consideration ethical and moral principles while allocating clients. Understanding the ethical and moral responsibility that the triage nurse faces while triaging during non-crisis periods is necessary to comprehend the high level of moral suffering that the triage nurse faces during a disaster (AL Obieat, 2024). Assigning clients according to acuity level is mostly done according to the Emergency Severity Index (ESI) in non-disaster times (Mena-Tudela et al., 2021). ESI has been approved to be the most effective way to allocate clients in non-disaster time (Phattharapornjaroen et al., 2022). Created in 1999, the Emergency Severity Index is a five-level emergency department triage methodology. The Emergency Nurses Association (ENA) now oversees it, taking over from the Agency for Healthcare Research and Quality (AHRQ), which had previously held responsibility for it (Gilboy et al., 2012). The ESI triage system is based on the severity of the patients’ medical issues and the estimated amount of resources needed to treat them. This is different from the standardized triage algorithms used in many other nations, such as the Australasian Triage Scale, which seeks to categorize patients depending on how long they can wait safely. The ESI levels range from one to five, with level one denoting the most urgent situation. However, levels 3, 4 and 5 are defined by the number of resources anticipated to be utilized, as estimated by a skilled nurse, not by urgency (Gilboy et al., 2012; Gilboy et al., 2011), as presented in Table 2.

Table 2. Emergency severity index

Level	Description	Examples
1	Without delay, immediate, life-saving care is necessary.	Cardiac shock Severe bleeding
2	Signs of a time-critical condition or a high risk of deteriorating.	Cardiac chest pain Asthmatic attack
3	Stable, requiring various resources (such as lab testing and X-ray imaging) to investigate or treat.	Abdominal pain High fever with cough
4	Stable, with the expectation of only one type of resource (e.g. only an X-ray or only sutures).	Simple laceration Pain on urination
5	Stable, with no anticipated resources other than prescription of drugs or oral or topical treatments.	Rash prescription refill

Beyond a physical examination, the term "resource" in ESI refers to several complicated procedures or diagnostic technologies. X-rays, blood tests, sutures, and intravenous or intramuscular drugs are a few examples of supplies. The ESI algorithm expressly excludes prescription drugs and oral pharmaceuticals from its definition of resources (Gilboy et al., 2011). However, in disasters where resources have been depleted, the goal of the triage system is shifted to maximize the benefits of health care with limited resources (Emanuel et al., 2020). Achieving the greatest good for the greatest number of people is consistent with the definition of utilitarianism (Savulescu et al., 2020).

During a disaster, such as the COVID-19 pandemic, the decision for the nurse to provide care to the sickest client is violated by the utilitarianism principle, because you should do the maximum good for the maximum number of people. By applying the ethical principle of utilitarianism, you may sacrifice some patients to achieve the benefit for the majority of patients. The triage system changed from ESI to the simple and rapid method (Yancey & O'Rourke, 2021). The nurse quickly sorts the clients, assesses them, and then intervenes with life-saving treatment (SALT). A working committee sponsored by the CDC to propose a uniform triage strategy came up with SALT triage. The SALT (sort, assess, life-saving measures, treatment, and/or transfer) triage guideline was created based on the most current scientific knowledge and expert consensus (Purwadi et al., 2021b). By using the SALT method, the nurse has tagged the clients according to their level of acuity. Black color is for dead or almost dead clients, red color is for an immediate case with special criteria; for example, RR above 30, no radial pulse, and a minimum response. Yellow color is for waiting cases. Finally, green color is for patients who can walk and get up alone (Purwadi et al., 2021a). Regarding the SALT method, if the client is critically ill and needs cardiopulmonary resuscitation (CPR), you may not start with him/her although in the traditional system, he/she has the highest priority. In crises, the previously mentioned patient is tagged with a black color, because he/she needs more

resources to intervene with him/her, while patients with a red color have the highest priority to consume the resources. Hence, utilitarianism in crises is considered an ethical challenge (Wagner & Dahnke, 2015).

Additionally, Bentham criticized the concept of natural rights; he said that rights are "nonsense upon stilts". For that reason, the relationship between rights and utilitarianism is complex (Smart & Williams, 1973). According to Bentham, the nurse in a disaster could sacrifice her/his happiness and comfort to provide good for a larger number of people. To exemplify, nurses may work for long hours in crises without ensuring the safety of their families. Furthermore, the nurse has caused immediate and long-term harm to herself/himself. To illustrate, rather than victimizing herself/himself to achieve benefits for others, she/her may suffer from psychological and emotional distress from these decisions and actions.

By applying hedonic calculus, Bentham presented a quantity-based method to decrease the uncertainty regarding measuring benefit *versus* harm, as presented in Table 1 (Dale, 2020). Despite that, John Stuart Mill disagreed with this method and went beyond that to the qualitative measurement of good and happiness (Turner, 2019). Many methods were found to help triage health care providers in detecting who should receive scarce resources first in crises. Nevertheless, until now, there has been no unique definition or tool to detect the degree of good or happiness, as well as that of harm or sadness (Church, 2022). As an example, the COVID-19 pandemic could cause respiratory failure. in the case of a limited number of ventilator machines. Who should have received the dearth machine to keep him/her alive? Should the decision be based on the value of the person in his/her community? or who arrived first should receive the treatment first? (März et al., 2021). Should the decision depend on the age of the patient? That means that children have more priority than the elderly. Finally, should the decision Be based on the percentage of organ failure? This could be assessed by the laboratory (Iserson, 2020), as shown in Figure 1.

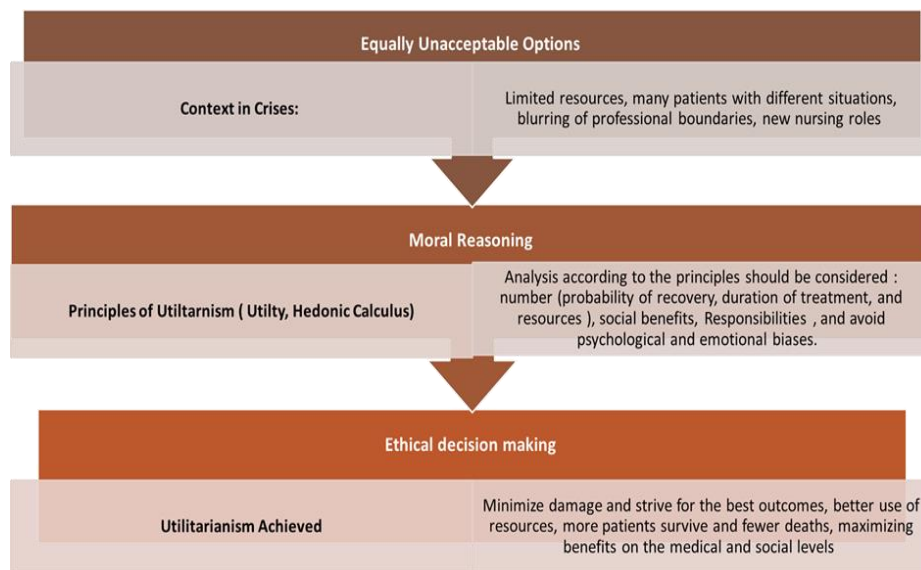


Figure 1. The application of utilitarianism principles in decision-making in disasters

Implications for Nursing

While nurses play a significant role in ethical decision-making in the triage system, they must navigate complex ethical dilemmas by balancing needs to maximize the overall benefits of clients. Therefore, this paper offers a practical framework for ethical decision-making by presenting the collaboration between nursing, philosophy, and healthcare ethics. Nurses need to adapt their triage system practices based on context; in a resource-scarce situation, nurses may utilize this framework of action efficiently. For implications among nursing institutions, they should establish clear guidelines for ethical decision-making during pandemics based on research and philosophical grounds, such as the Utilitarianism Ethical Theory. Also, they may consider continual training and education for nurses in ethical decision-making to equip nurses with the knowledge and skills needed to face ethical challenges in the triage system effectively.

Conclusion

In conclusion, while utilitarianism provides a practical framework for decision-making in the triage system, its limitations regarding the ignorance of human rights and social justice principles must be acknowledged. Future research could explore ways to integrate utilitarian considerations with respect for individual rights and principles of justice, perhaps through the development of

hybrid ethical frameworks or decision-making algorithms that balance both utilitarian and deontological perspectives. Additionally, further investigation into the application of utilitarianism in various contexts, such as pandemics and crises, could yield insights into its effectiveness and ethical implications. By addressing these limitations and exploring new avenues for research, we can strive towards more comprehensive and morally sound approaches.

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Conflict of Interests

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