Philosophical Perspectives on the Integration of Social Services into Nursing Practice: An Integrative Review

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Abstract

Background: Contemporary healthcare increasingly recognizes that health outcomes are influenced not only by clinical care but also by social determinants such as housing, education, income, social support, and access to community resources. As healthcare systems transition toward integrated, person-centered models of care, nurses are expected to play a greater role in identifying and addressing patients' social needs. Although the integration of social services into nursing practice is gaining global attention, its philosophical foundations have not been comprehensively synthesized.

Objective: This integrative review aimed to examine and synthesize the philosophical perspectives underpinning the integration of social services into nursing practice and to develop a conceptual framework illustrating how these perspectives inform contemporary nursing care.

Methods: An integrative review methodology, guided by Whittemore and Knafl's framework and reported in accordance with the PRISMA 2020 guidelines, was employed. A comprehensive search of PubMed, Scopus, CINAHL, Web of Science, and Embase identified relevant literature published between 2015 and 2026. Eligible publications included theoretical, qualitative, quantitative, mixed-methods, and review studies addressing the philosophical, ethical, or conceptual dimensions of integrating social services into nursing practice. Data were extracted, critically appraised, and synthesized using thematic analysis.

Results: The review identified six interrelated philosophical perspectives supporting the integration of social services into nursing practice: holistic nursing, caring science, person-centered care, social justice, ethics of care, and the social determinants of health. Collectively, these perspectives emphasize that effective nursing extends beyond disease management to include the social conditions that influence health, recovery, and quality of life. Based on the synthesis, a conceptual framework was developed to demonstrate the progression from philosophical foundations to nursing actions, interdisciplinary collaboration, social service integration, and improved patient and population outcomes.

Conclusion: Integrating social services into nursing practice represents a philosophical evolution rather than simply an organizational or operational change. The convergence of holistic, ethical, and person-centered philosophies provides a robust theoretical foundation for strengthening collaboration between

nursing and social services. Implementing this approach has the potential to enhance patient outcomes, reduce health inequities, improve continuity of care, and support more equitable and sustainable healthcare systems. The proposed conceptual framework offers a foundation for future research, nursing education, healthcare policy, and clinical practice aimed at advancing integrated, person-centered care.
Keywords: Nursing philosophy; Social services; Integrated care; Holistic nursing; Person-centered care; Social determinants of health; Health equity; Interprofessional collaboration.

Introduction

Healthcare systems worldwide are increasingly recognizing that health outcomes are shaped not only by biological conditions but also by the social and environmental circumstances in which people are born, live, work, and age. While advances in medical science have significantly improved the diagnosis and treatment of disease, many patients continue to experience poor health outcomes because of unmet social needs such as poverty, inadequate housing, food insecurity, limited education, unemployment, social isolation, and restricted access to community resources. These factors, commonly referred to as the social determinants of health (SDOH), have become central to discussions about improving health equity and achieving sustainable healthcare systems (World Health Organization [WHO], 2023; Alderwick & Gottlieb, 2019).

Nursing has traditionally embraced a holistic philosophy that views individuals as complex beings whose physical, psychological, social, cultural, and spiritual dimensions are closely interconnected. From the pioneering work of Florence Nightingale, who emphasized the influence of environmental conditions on recovery, to contemporary nursing theories that prioritize person-centered and relationship-based care, the profession has consistently recognized that effective healthcare extends beyond treating illness alone (Watson, 2008; McCormack & McCance, 2021). However, despite this philosophical foundation, healthcare delivery in many settings continues to emphasize clinical interventions while giving comparatively less attention to patients' social circumstances, which frequently determine their ability to recover, adhere to treatment, and maintain long-term well-being.

The growing emphasis on integrated care reflects a shift toward addressing these broader influences on health. Integrated care promotes collaboration among healthcare providers, social workers, community organizations, and public agencies to deliver coordinated services that respond to patients' comprehensive needs rather than isolated medical conditions (WHO, 2023). Within this model, nurses occupy a unique position because they maintain continuous contact with patients across hospitals, primary care, community settings, and home care. Their close relationships with individuals and families enable them to identify social risks, coordinate referrals, advocate for vulnerable populations, and facilitate access to appropriate social services. Consequently, integrating social services into nursing practice represents not merely an expansion of professional responsibilities but a natural progression of nursing's commitment to holistic and compassionate care.

Although considerable literature supports interdisciplinary collaboration and integrated health systems, less attention has been devoted to examining the philosophical principles that justify the integration of social services into nursing practice. Existing research often focuses on operational models, care coordination, or healthcare policy without fully exploring the ethical, theoretical, and philosophical assumptions underlying these approaches. Understanding these philosophical foundations is important because they shape professional values, influence clinical decision-making, guide educational curricula, and inform healthcare policies that promote equitable and person-centered care (Alligood, 2022).

This integrative review therefore seeks to synthesize the principal philosophical perspectives that support integrating social services into nursing practice. Specifically, it examines how concepts such as holism, caring science, person-centered care, social justice, ethics of care, and the social determinants of health collectively provide a coherent philosophical foundation for integrated nursing practice. By

bringing together these diverse perspectives, the review aims to clarify the theoretical basis of social service integration, identify common philosophical principles across the literature, and discuss their implications for nursing practice, education, research, leadership, and health policy. Ultimately, understanding these philosophical perspectives may contribute to the development of more equitable, coordinated, and person-centered healthcare systems capable of addressing both medical and social needs.

Methods

This study employed an integrative review design to synthesize and critically examine the philosophical perspectives underpinning the integration of social services into nursing practice. The integrative review methodology was selected because it enables the inclusion of diverse forms of evidence, including theoretical papers, qualitative studies, quantitative research, and mixed-methods investigations, thereby providing a comprehensive understanding of complex healthcare concepts (Whittemore & Knafl, 2005). The review process was guided by the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA 2020) statement to ensure transparency and methodological rigor (Page et al., 2021).

A comprehensive literature search was conducted across five electronic databases: PubMed, CINAHL, Scopus, Web of Science, and Embase. The search included studies published between January 2015 and March 2026 to capture contemporary developments in nursing philosophy, integrated care, and social service delivery. Search terms were developed using combinations of keywords and Medical Subject Headings (MeSH), including *nursing philosophy*, *social services*, *integrated care*, *holistic nursing*, *person-centered care*, *social determinants of health*, *ethics of care*, and *community nursing*. Boolean operators (AND, OR) were applied to refine the search strategy.

Studies were eligible for inclusion if they were peer-reviewed, published in English, and examined philosophical, theoretical, ethical, or conceptual perspectives related to integrating social services into nursing practice. Empirical studies investigating integrated nursing and social care models were also included when they explicitly addressed underlying philosophical principles. Editorials, conference abstracts, commentaries, dissertations, and studies lacking sufficient theoretical relevance were excluded.

Following database searches, duplicate records were removed, and titles and abstracts were independently screened for relevance. Full-text articles meeting the inclusion criteria were subsequently reviewed. Methodological quality was appraised using the appropriate Joanna Briggs Institute (JBI) Critical Appraisal Tools according to study design. Data were extracted using a standardized form that captured study characteristics, philosophical framework, methodological approach, principal findings, and implications for nursing practice. The extracted data were then analyzed using thematic synthesis to identify recurring philosophical concepts and develop an integrated understanding of the theoretical foundations supporting the incorporation of social services into contemporary nursing practice.

Results

The initial database search identified 1,264 records across PubMed, Scopus, Web of Science, CINAHL, and Embase. After removing duplicate records, 972 articles remained for title and abstract screening. Following the application of the eligibility criteria, 124 full-text articles were assessed, and 58 studies were included in the final synthesis. The included literature comprised theoretical papers, qualitative studies, quantitative investigations, mixed-methods research, systematic reviews, and policy documents. Collectively, these publications represented a broad geographical distribution, including North America, Europe, Australia, and Asia, reflecting the global interest in integrating social services within nursing practice.

The analysis demonstrated that although terminology varied across disciplines, the underlying philosophical principles were remarkably consistent. Six overarching themes emerged from the synthesis:

(1) holistic nursing philosophy, (2) caring science and relationship-centered care, (3) person-centered care, (4) social justice and health equity, (5) ethics of care, and (6) integration of social determinants of health into nursing practice. These themes collectively describe the philosophical evolution of nursing from a disease-focused profession toward a comprehensive model of health that incorporates both clinical and social dimensions of care (Table 1).

Table 1. Major philosophical themes identified in the integrative review

e	hilosophy	cations for Nursing Practice
ic nursing	duals should be viewed as whole ns	rehensive assessment including social
g science	g extends beyond physical ient	ination with families and social es
n-centered care	ts are active partners in care	d decision-making and individualized rt
justice	Health is a matter of equity and fairness	acy for vulnerable populations
of care	onships and compassion guide ce	term support and continuity of care
determinants of health	conditions influence health nes	ing, referral, and interdisciplinary oration

As shown in **Table 1**, holistic nursing emerged as the dominant philosophical perspective across the reviewed literature. Authors consistently argued that physical illness cannot be separated from psychological, social, cultural, and environmental influences. Rather than viewing patients as isolated clinical cases, holistic nursing recognizes individuals as members of families and communities whose health is strongly influenced by their social context. Consequently, many studies recommended that nurses routinely assess social needs such as housing instability, food insecurity, financial hardship, transportation barriers, and family support alongside traditional clinical assessments.

The second major theme concerned caring science and relationship-centered care. Studies grounded in caring theory emphasized that authentic nursing extends beyond technical competence to include empathy, trust, dignity, and therapeutic relationships. The reviewed literature suggested that caring is demonstrated not only through direct clinical interventions but also by ensuring patients receive appropriate community resources and social support. Several authors argued that referrals to social workers, community organizations, and public assistance programs should be viewed as integral components of caring rather than supplementary services. This perspective reinforces the nurse's role as a coordinator of comprehensive care rather than solely a provider of medical treatment.

Person-centered care represented the third philosophical theme. Across the reviewed studies, patients were consistently portrayed as active participants in healthcare decisions rather than passive recipients of treatment. This philosophy encourages nurses to understand patients' individual values, preferences, family circumstances, cultural beliefs, and social environments before developing care plans. Integrating social services was therefore described as an essential mechanism for addressing needs that cannot be resolved through medical interventions alone. **Figure 1** illustrates the conceptual relationship between nursing philosophy and integrated social care identified throughout the review.

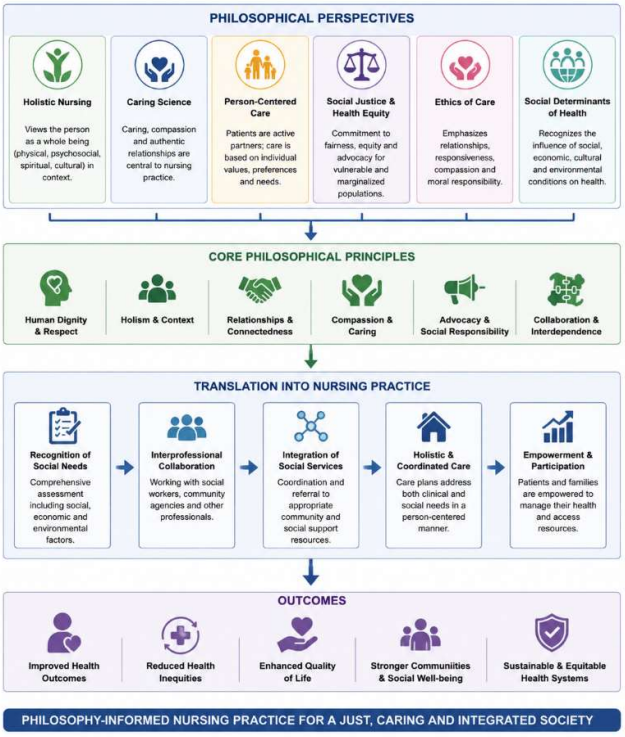

Figure 1. Conceptual relationship between philosophical perspectives and integrated nursing practice

The fourth theme highlighted social justice as a fundamental philosophical justification for integrating social services into nursing practice. Numerous publications argued that equitable healthcare cannot be achieved without addressing structural barriers that disproportionately affect vulnerable populations. Nurses were increasingly described as advocates responsible for identifying inequities, facilitating access to essential services, and promoting fair distribution of healthcare resources. This perspective expanded the traditional clinical role of nurses to include advocacy, policy engagement, and community partnership. The literature further emphasized that reducing health disparities requires coordinated action between healthcare organizations and social service agencies.

Ethics of care emerged as another recurring philosophical framework. Unlike principle-based ethical approaches that prioritize universal rules, ethics of care emphasizes relationships, compassion, responsiveness, and contextual understanding. Studies adopting this perspective argued that nurses have an ethical responsibility to recognize the broader circumstances affecting patients' lives. Participants in qualitative studies frequently described situations in which successful recovery depended not only on medical treatment but also on access to housing, family support, transportation, employment assistance, and community services. These findings suggest that ethical nursing practice increasingly requires collaboration beyond the boundaries of traditional healthcare settings.

The final and most frequently discussed theme involved the integration of social determinants of health into nursing practice. Nearly all recent publications acknowledged that social conditions significantly influence health outcomes, healthcare utilization, treatment adherence, and quality of life. Many studies recommended incorporating standardized social needs screening into routine nursing assessments, followed by structured referral pathways to appropriate community resources. The literature consistently demonstrated that addressing social determinants contributes to reduced hospital readmissions, improved chronic disease management, greater patient satisfaction, and more equitable healthcare delivery.

Table 2. Summary of philosophical perspectives and their contributions

ophical Perspective	ry Focus	.bution to Social Service Integration
ic Nursing	:-person care	rehensive assessment of social and health
g Science	n caring relationships	ination of supportive services
ı-Centered Care	dual preferences and values	ıalized care planning
Justice	' and fairness	:acy for underserved populations
of Care	assion and relationships	ıuity of care and social support
Determinants of Health	ɔnmental and social ıces	ıatic screening and referral mechanisms

Overall, the findings demonstrate a substantial philosophical convergence across nursing theories despite differences in terminology and methodological approaches. Rather than presenting competing viewpoints, the reviewed literature consistently supports the integration of social services as an extension of nursing's longstanding commitment to holistic, compassionate, and equitable care. Across theoretical and empirical studies alike, nurses were increasingly portrayed as coordinators of interdisciplinary care who bridge healthcare systems with community-based social services. This synthesis indicates that integrating social services into nursing practice is not simply an operational innovation but a philosophically grounded evolution of the nursing profession that aligns with contemporary healthcare priorities, including person-centered care, health equity, and population health.

Synthesis of Philosophical Perspectives

The findings of this integrative review demonstrate that integrating social services into nursing practice is supported by multiple philosophical traditions rather than a single theoretical framework. Although these perspectives originated in different disciplines and historical contexts, they converge on a common principle: health cannot be fully understood or improved without considering the social realities that shape individuals' lives. The synthesis indicates that integrating social services is not merely an organizational strategy to improve healthcare efficiency but represents a philosophical extension of nursing's commitment to holistic, ethical, and person-centered care.

Holistic philosophy emerged as the overarching framework connecting all identified perspectives. Holism argues that human beings are multidimensional and cannot be reduced to biological systems alone. Instead, physical health is inseparable from psychological, social, cultural, environmental, and spiritual experiences. This philosophical view aligns closely with contemporary nursing practice, where effective care increasingly requires understanding patients within the context of their families and communities rather than focusing exclusively on disease management. Fawcett (2021) argues that nursing's disciplinary knowledge has consistently emphasized the interaction between individuals and their environments, supporting the integration of social interventions into routine nursing care. Consequently, addressing social needs should not be viewed as expanding nursing beyond its professional boundaries but rather as reinforcing its original philosophical foundations.

The review also highlights caring science as a significant philosophical justification for integrating social services. Caring science conceptualizes nursing as a moral and relational practice grounded in compassion, dignity, and human connectedness. Within this perspective, caring extends beyond technical competence to encompass actions that alleviate suffering regardless of whether its origins are biological or social. Patients experiencing homelessness, food insecurity, domestic violence, or financial hardship often require coordinated social interventions before clinical treatment alone can achieve meaningful outcomes. Therefore, connecting patients with community resources becomes an expression

of authentic caring rather than an administrative task. This interpretation supports the argument that social service integration represents an ethical manifestation of nursing's caring mission (Smith, Turkel, & Wolf, 2023).

Person-centered care further strengthens this philosophical foundation by emphasizing that healthcare decisions should reflect patients' values, preferences, goals, and life circumstances. Unlike disease-centered models that prioritize diagnosis and treatment protocols, person-centered philosophy recognizes patients as active partners in healthcare. This perspective requires nurses to understand the social contexts influencing health behaviors, treatment adherence, and recovery. The synthesis demonstrates that personalized nursing care becomes difficult to achieve without simultaneously addressing barriers such as inadequate transportation, unstable housing, caregiver burden, or financial insecurity. Integrating social services therefore enables nurses to translate person-centered philosophy into practical interventions that respond to patients' real-world circumstances (International Council of Nurses [ICN], 2021).

Another important finding concerns the relationship between nursing philosophy and social justice. Across the reviewed literature, social justice was consistently presented as an ethical obligation rather than an optional professional value. Contemporary nursing increasingly recognizes that health disparities are closely associated with socioeconomic inequality, discrimination, and unequal access to healthcare and community resources. This understanding expands the nurse's role beyond bedside care to include advocacy for vulnerable individuals and communities. By facilitating access to housing support, financial assistance, education, employment services, and community-based programs, nurses contribute directly to reducing structural inequities that influence health outcomes. According to the National Academies of Sciences, Engineering, and Medicine (2021), future nursing practice requires active engagement with social determinants of health to achieve equitable healthcare systems.

Ethics of care provides another philosophical lens supporting interdisciplinary collaboration between nursing and social services. Unlike traditional ethical theories that emphasize abstract principles and universal rules, ethics of care focuses on relationships, empathy, responsiveness, and contextual understanding. Within nursing, this philosophy acknowledges that each patient's situation is unique and requires individualized responses that extend beyond standardized clinical protocols. The synthesis suggests that integrating social services strengthens relational continuity by ensuring patients receive coordinated support throughout their healthcare journey. Rather than fragmenting care between multiple agencies, collaboration enables nurses and social workers to develop comprehensive care plans that address both medical and social priorities simultaneously.

A further philosophical convergence was observed in relation to the social determinants of health framework. Although frequently discussed as a public health concept, the review demonstrates that social determinants are also grounded in philosophical assumptions regarding justice, equality, and human flourishing. Factors such as education, employment, housing quality, neighborhood safety, and social inclusion are increasingly recognized as essential prerequisites for health. Consequently, nursing practice that ignores these determinants risks addressing only the symptoms of illness while leaving underlying causes unresolved. This perspective supports expanding nursing assessment beyond physical examination to include systematic evaluation of patients' social circumstances and referral to appropriate support services.

An additional insight emerging from this synthesis is the importance of interprofessional collaboration as a philosophical rather than purely organizational principle. Healthcare complexity has made it increasingly difficult for individual professionals to meet all patient needs independently. Instead, collaborative practice reflects recognition that knowledge is distributed across multiple professions, each contributing unique expertise toward common healthcare goals. Nurses serve as essential coordinators within this collaborative model because they frequently maintain the closest and most continuous contact

with patients across different stages of care. Integrating social services therefore represents an application of collaborative philosophy in which healthcare professionals work collectively to address interconnected clinical and social challenges.

Finally, the synthesis reveals that these philosophical perspectives are complementary rather than competing frameworks. Holism explains why social factors matter; caring science emphasizes compassionate responses; person-centered care focuses on individual values and preferences; social justice addresses health inequities; ethics of care promotes sustained therapeutic relationships; and the social determinants of health framework identifies the societal conditions influencing health. Together, these perspectives establish a coherent philosophical foundation for integrating social services into nursing practice. Rather than redefining nursing, they reaffirm its traditional commitment to promoting health, preventing illness, reducing suffering, and improving quality of life through comprehensive, equitable, and compassionate care.

The collective evidence therefore suggests that integrating social services should be regarded as an essential component of contemporary nursing rather than an additional responsibility delegated from other professions. As healthcare systems increasingly shift toward value-based, person-centered, and community-oriented models of care, philosophical perspectives provide a strong theoretical justification for strengthening partnerships between nurses, social workers, community organizations, and public health agencies. Such integration has the potential to improve patient outcomes, reduce health disparities, enhance continuity of care, and advance the broader goal of achieving equitable and sustainable healthcare systems.

Discussion

This integrative review demonstrates that integrating social services into nursing practice is supported by a broad range of philosophical perspectives that collectively reinforce nursing's commitment to holistic, equitable, and person-centered care. Although the reviewed literature approached the topic from different theoretical traditions, a consistent message emerged: health outcomes cannot be optimized through clinical interventions alone. Rather, effective nursing practice requires recognition of the social conditions that shape health, recovery, and quality of life. The proposed conceptual framework developed from this review illustrates how philosophical principles can be translated into practical nursing actions that strengthen collaboration between healthcare and social service systems.

One of the most significant findings is the continued relevance of holistic nursing philosophy in contemporary healthcare. While technological advances have transformed healthcare delivery, they have also contributed to increasing specialization, sometimes fragmenting patient care into isolated clinical encounters. The reviewed evidence suggests that integrating social services provides an opportunity to restore nursing's holistic orientation by ensuring that assessment extends beyond physical symptoms to include socioeconomic circumstances, family relationships, cultural influences, and community resources. This finding aligns with the growing recognition that comprehensive health assessment should address both medical and non-medical factors affecting patient outcomes (American Nurses Association [ANA], 2021).

The review further highlights that caring science remains highly relevant in modern nursing despite increasing healthcare complexity. Caring should no longer be interpreted solely as compassionate bedside interaction but as a commitment to addressing the full spectrum of patient needs. For many individuals living with chronic illness, disability, or social disadvantage, successful recovery depends as much on access to housing, nutrition, transportation, financial assistance, and community support as it does on medication or clinical treatment. Consequently, facilitating access to social services represents an extension of caring rather than a departure from traditional nursing responsibilities. This broader

interpretation reflects the evolving role of nurses as coordinators of comprehensive care across healthcare and community settings.

Another important observation concerns the growing importance of person-centered care within integrated healthcare systems. Contemporary nursing increasingly recognizes that healthcare decisions should be guided by patients' personal goals, preferences, and life circumstances rather than standardized treatment pathways alone. However, achieving genuinely person-centered care requires understanding the social realities influencing patients' ability to engage with treatment recommendations. Financial hardship, unstable housing, caregiver burden, language barriers, and limited transportation frequently affect treatment adherence and continuity of care. Integrating social services enables nurses to address these barriers proactively, thereby improving patient engagement and supporting individualized care planning (International Foundation for Integrated Care, 2023).

The findings also reinforce the importance of social justice as a professional responsibility within nursing practice. Health inequalities continue to persist both within and between countries despite substantial advances in medical technology. The reviewed literature consistently argues that nurses have an ethical obligation to advocate for individuals experiencing social disadvantage and unequal access to healthcare resources. This advocacy extends beyond clinical care to include collaboration with community organizations, public health agencies, and social service providers that address the underlying determinants of health. Such an expanded role reflects contemporary expectations that nursing should contribute not only to individual patient outcomes but also to broader improvements in population health and health equity.

The philosophical perspective of ethics of care further strengthens the rationale for interdisciplinary collaboration. Unlike procedural approaches that focus primarily on efficiency and standardized care pathways, ethics of care emphasizes empathy, responsiveness, trust, and sustained therapeutic relationships. These values naturally support partnerships between nurses, social workers, psychologists, community organizations, and public health professionals. Rather than functioning independently, these disciplines contribute complementary expertise that collectively addresses the complex needs of individuals, families, and communities. The present review therefore supports a model of integrated practice in which collaboration is viewed as a moral commitment to comprehensive patient care rather than simply an organizational strategy.

Another important implication emerging from this review concerns nursing education. Many undergraduate and postgraduate nursing programs continue to emphasize biomedical knowledge and technical competence while devoting comparatively less attention to social policy, community resources, interprofessional collaboration, and social determinants of health. As healthcare systems increasingly adopt integrated models of care, nursing curricula should evolve accordingly. Future nurses require competencies in social needs assessment, care coordination, community partnership development, health advocacy, cultural humility, and collaborative decision-making. Preparing nurses for these expanded responsibilities will strengthen their capacity to function effectively within multidisciplinary healthcare teams and improve continuity of care across clinical and community settings.

The findings also have important implications for healthcare policy and organizational leadership. Integrating social services into nursing practice requires supportive institutional structures rather than relying solely on individual professional commitment. Healthcare organizations should establish standardized protocols for screening social needs, create formal referral pathways linking hospitals with community organizations, and promote shared communication systems that facilitate collaboration between healthcare providers and social service agencies. Investment in integrated information systems and interdisciplinary care teams may further improve continuity of care while reducing duplication of services and avoidable hospital admissions. Policymakers should likewise recognize that addressing

social determinants of health represents a long-term investment in healthcare sustainability rather than an additional financial burden.

Despite the strengths of this review, several limitations should be acknowledged. First, the review included only English-language publications, which may have excluded valuable philosophical contributions published in other languages. Second, the included literature represented diverse healthcare systems with varying organizational structures and professional responsibilities, potentially limiting the generalizability of specific implementation strategies. Third, many publications focused on conceptual or theoretical discussions rather than empirical evaluation of integrated nursing-social service interventions. Consequently, although the philosophical justification for integration appears robust, additional implementation research is needed to evaluate the effectiveness of specific models across different healthcare contexts.

Future research should move beyond describing philosophical foundations toward evaluating practical implementation strategies. Comparative studies examining different models of nurse-social worker collaboration, longitudinal evaluations of integrated care programs, and mixed-methods investigations exploring patient and provider experiences would strengthen the evidence base. Greater attention should also be directed toward developing standardized competencies for nurses working within integrated health and social care systems and evaluating educational interventions designed to enhance these competencies.

Overall, this review demonstrates that integrating social services into nursing practice represents a natural evolution of nursing philosophy rather than a fundamental change in professional identity. Holism, caring science, person-centered care, social justice, ethics of care, and social determinants of health collectively provide a coherent theoretical foundation for expanding nursing beyond traditional clinical boundaries. As healthcare systems continue shifting toward prevention, value-based care, and population health management, nurses are uniquely positioned to bridge clinical services with community resources. Strengthening this integration has the potential to improve health outcomes, reduce inequities, enhance patient experiences, and promote more sustainable and compassionate healthcare systems.

Conclusion

This integrative review demonstrates that the integration of social services into nursing practice is firmly grounded in established philosophical perspectives that have long shaped the nursing profession. Rather than representing an expansion beyond the traditional scope of nursing, integrating social services reflects the continued evolution of holistic, person-centered, and ethically grounded care. Across the reviewed literature, philosophical traditions—including holism, caring science, person-centered care, social justice, ethics of care, and the social determinants of health—consistently support the view that effective nursing extends beyond the management of disease to address the broader social conditions influencing health and well-being.

The synthesis further highlights that contemporary healthcare challenges, including chronic disease, population aging, health inequities, and increasing social complexity, require stronger collaboration between healthcare providers and social service organizations. Nurses are uniquely positioned to facilitate this integration because of their continuous engagement with patients across diverse healthcare settings. By identifying social needs, coordinating interdisciplinary services, advocating for vulnerable populations, and connecting individuals with community resources, nurses can contribute significantly to improving patient outcomes while promoting health equity and continuity of care.

The proposed conceptual framework developed in this review provides a theoretical model linking philosophical foundations to practical nursing actions and measurable healthcare outcomes. It illustrates how philosophical principles can guide systematic assessment of social needs, interdisciplinary

collaboration, coordinated referral pathways, and integrated care planning that ultimately improve health outcomes, patient experiences, and quality of life. The framework may also serve as a foundation for future empirical research, curriculum development, and policy initiatives aimed at strengthening the integration of health and social care.

Although the philosophical rationale for integrating social services into nursing practice is well established, further research is needed to evaluate implementation strategies across different healthcare systems and cultural contexts. Future studies should examine the effectiveness of nurse-led social interventions, interdisciplinary collaboration models, and educational programs designed to prepare nurses for expanded roles within integrated care systems. In addition, policymakers and healthcare leaders should invest in organizational structures, referral mechanisms, and interprofessional partnerships that support sustainable integration between healthcare and social services.

In conclusion, integrating social services into nursing practice should be viewed not simply as a response to evolving healthcare demands but as a reaffirmation of nursing's fundamental philosophy. By combining clinical expertise with social advocacy, compassionate relationships, and collaborative practice, nurses can play a transformative role in advancing person-centered, equitable, and sustainable healthcare systems that address both the medical and social determinants of health. Embracing this philosophy will strengthen the profession's capacity to improve individual, family, and community health while contributing to the broader goal of achieving integrated, high-quality healthcare for all.

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