



RESEARCH ARTICLE (ORIGINAL) 

Ethical problems in hospital clinical experiences of nursing students and professionals

Problemas éticos na experiência clínica hospitalar de estudantes e profissionais de enfermagem

Problemas éticos en la experiencia clínica hospitalaria de estudiantes y profesionales de enfermería

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Abstract

Background: Ethical problems often emerge in nursing practice. Knowing how to identify them and seeking prudent solutions is essential to promoting ethical and safe care.

Objective: To know the experiences and understanding of nursing students and professionals regarding ethical issues and decision-making in hospital nursing practice.

Methodology: Qualitative, exploratory-descriptive research was carried out with thirty undergraduate nursing students and twenty nursing professionals from a University Hospital in Southern Brazil. Data were collected through two questionnaires containing open questions and submitted to Discursive Textual Analysis.

Results: Students perceive the ethical problem based on concrete experiences of disrespect and insult to principles and rules. Professionals conceptualize it as a challenge to judgment in the complex boundaries between right and wrong. The experiences and decision-making share similarities and have their specificities.

Conclusion: Students and professionals display moral sensitivity to understand the ethical problems of practice; critical awareness and reflection are crucial to identifying and responding to workplace ethical conflicts.

Keywords: ethics in nursing; nursing students; nursing professionals

Resumo

Enquadramento: Os problemas éticos são frequentes na prática da enfermagem. Saber identificá-los, buscando soluções prudentes, é fundamental para promover um cuidado ético e seguro.

Objetivo: Conhecer experiências e compreensão de estudantes e profissionais de enfermagem sobre problemas éticos e tomada de decisão nos contextos da prática da enfermagem hospitalar.

Metodologia: Pesquisa qualitativa, exploratório-descritiva realizada com 30 estudantes de graduação em enfermagem e 20 profissionais de enfermagem de um hospital universitário do sul do Brasil. Os dados foram recolhidos através de dois questionários contendo questões abertas e submetidos a análise textual discursiva.

Resultados: Os estudantes compreendem o problema ético a partir de vivências concretas de desrespeito e afronta a princípios e regras, enquanto os profissionais o conceptualizam como um desafio ao julgamento nas complexas fronteiras entre certo e errado. Há similaridades e especificidades das vivências e tomada de decisão.

Conclusão: Estudantes e profissionais demonstram sensibilidade moral para compreender os problemas éticos da prática; senso crítico e reflexivo é decisivo na identificação e nas condutas face aos conflitos éticos no ambiente laboral.

Palavras-chave: ética em enfermagem; estudantes de enfermagem; profissionais de enfermagem

Resumen

Marco contextual: Los problemas éticos son frecuentes en la práctica de la enfermería. Saber identificarlos, buscando soluciones prudentes, es esencial para promover una atención ética y segura.

Objetivo: Conocer las experiencias y la comprensión de los estudiantes y profesionales de enfermería sobre los problemas éticos y la toma de decisiones en los contextos de la práctica enfermera hospitalaria.

Metodología: Investigación cualitativa, exploratoria-descriptiva, realizada con 30 estudiantes del grado de Enfermería y 20 profesionales de enfermería de un hospital universitario del sur de Brasil. Los datos se recogieron mediante dos cuestionarios con preguntas abiertas y se sometieron a un análisis textual discursivo.

Resultados: Los estudiantes entienden el problema ético a partir de experiencias concretas de falta de respeto y afronta a los principios y normas, mientras que los profesionales lo conceptualizan como un desafío al juicio en los complejos límites entre lo correcto y lo incorrecto. Hay similitudes y especificidades en las experiencias y la toma de decisiones.

Conclusión: Los estudiantes y profesionales demuestran sensibilidad moral para comprender los problemas éticos de la práctica; el sentido crítico y reflexivo es decisivo en la identificación y las conductas ante los conflictos éticos en el entorno laboral.

Palabras clave: ética en enfermería; estudiantes de enfermería; profesionales de enfermería

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Introduction

Nursing professionals are present in all health services at different moments of the life cycle and the health-disease process, representing a link between patients, families, and health teams. However, this frequent and intense relationship may expose them to ethical problems in the micro spaces of power.

In clinical bioethics, an ethical problem refers to when equally binding values and duties compete, and professionals often do not know how to act (Zoboli, 2013). These problems are always connected to conflicts of value, and these values are supported by facts (Gracia, 2016). Therefore, academic education is called into question regarding ethics and clinical bioethics to prepare professionals who can recognize and solve such ethical problems/conflicts. The nurse must be equipped to make decisions when facing this reality. Ethical reflection is based on knowledge and judgment of moral values, principles, and rules of conduct, which requires concern and commitment to others, openness to dialogue, and maturity, which are not limited to accumulated technical experience (Avila et al. 2018).

Given the above, this article aims to know the experiences and perceptions of nursing students and professionals about ethical problems and decision-making in hospital nursing practice. The students' experiences occur in theoretical and practical activities in health institutions' various areas of care practice.

Background

Ethical problems often occur in the clinical practice of hospital nurses. Moral sensitivity to identify them and seek prudent solutions is an indispensable asset to promoting ethical and safe care. However, this contrasts with the classic technicist vision of training, still present in many educational institutions, which does not stimulate the moral sensitivity necessary to identify and face the ethical issues that involve nursing practice.

Moral sensitivity, characterized by the ability to identify the expression of morality in certain situations, is a crucial component for recognizing ethical problems and making decisions when faced with the conflicting circumstances that accompany nursing practice (Zhang et al., 2019). Developing moral sensitivity is the first step in ethical decision-making (Ramos et al., 2016). Consequently, continued efforts are needed to integrate pedagogical structures and methodologies in ethics education into nursing programs. Debate strategies in ethics education are more effective in promoting moral judgment and the ability to adopt ethical attitudes and decisions than more traditional methods such as lectures (Kima & Park, 2019). In this sense, the concepts of moral sensitivity, moral suffering, and moral courage are interrelated, with moral sensitivity being one of the first steps toward identifying/recognizing a moral problem. Moral suffering results from the obstruction or barrier to ethical decision-making, and moral courage is the essential requirement for nurses

to face the situation and make a decision (Ramos et al., 2016). Combining moral sensitivity and moral courage is necessary for decision-making, avoiding moral distress, favoring teamwork, and preventing the emotional distress of the professionals involved.

The concept of moral courage is multidimensional and is still elusive in nursing. Still, it is perceived as the courage to act according to one's convictions and do what is considered right, despite moral criticism. The personal and professional empowerment of nurses contributes to the development of moral courage (Numminen et al., 2017). Ethical problems present conflicts of values and uncertainty regarding the knowledge required for decision-making, which can cause insecurity, discomfort, and moral distress in the professional who experiences them in their practice (Ramos et al., 2016). They also constitute challenges since they are sources of conflicts of values and duties. Their solutions require several courses of action and choosing the best option through deliberation and judgment and should be continuously re-evaluated. The resolution of ethical problems does not have ready-made recipes but needs permanent creativity to open the range of solutions in the search for ethical excellence (Zoboli, 2013).

Developing ethical-moral competence is essential to discuss and search for solutions to the ethical problems identified in professional practice. Ethical competence can be defined as character strength, ethical awareness, moral judgment skills, and willingness to do good (Kulju et al., 2016). Ethical competence in health professionals can benefit the patient with the best possible solution, reducing moral suffering at work and leading to an evolved and democratized society (Schaefer & Vieira, 2015). The health professional should develop their critical sense from the beginning of their training to recognize their values and make choices in an enlightened and conscious way. Thus, they need to acquire scientific knowledge and internalize moral values for a more humanized practice, possible through ethics and moral education (Avila et al., 2018). Knowledge combined with clinical reasoning and dialogue stimulates the rescue of moral values for developing moral competence (Enderle et al., 2018).

Technological development and improvement of skills based on technical and scientific knowledge are essential to ensure the excellence of care. Relational skills, associated with the morality that permeates health education, should also be developed, emphasizing the psycho-affective, socioeconomic, and cultural dimensions of creative thinking and bonding (Marques, 2018), taking into account the complexity of the human being in need of care.

Thus, the importance of including ethical and bioethical knowledge in the training of these professionals is unquestionable, allowing them greater autonomy and moral judgment in their daily work (Avila et al., 2018).

Research question

How do nursing students and professionals experience and understand ethical problems and decision-making in the context of hospital nursing practice?



Methodology

A qualitative study was carried out using an exploratory-descriptive approach. It is an integral part of the macro project "Simulated teaching applied to the moral deliberation process in ethical problems experienced by nursing students and professionals." This study was conducted in the capital city of a southern state of Brazil and selected an intentional sample of undergraduate nursing students from a federal university and nursing professionals (nurses, technicians, and assistants) from a university hospital between 2016 and 2017. Inclusion criteria were undergraduate nursing students from the 4th phase (2nd year); nursing professionals (nurses, technicians, and nursing assistants) working in an intensive care unit, medical clinic unit, maternity, surgical clinic, or emergency of the mentioned university hospital.

Data were collected through two questionnaires developed by the researchers, with open-ended questions, one directed at professionals and the other at nursing students. Both questionnaires were previously tested with nursing professionals and nursing students who were not part of the sample. With the necessary adaptations, the questions used to generate the reflections of the study participants were: understanding of an ethical problem; description of a problem experienced/faced; problems perceived as most frequent; conduct/action in the face of the problem/s.

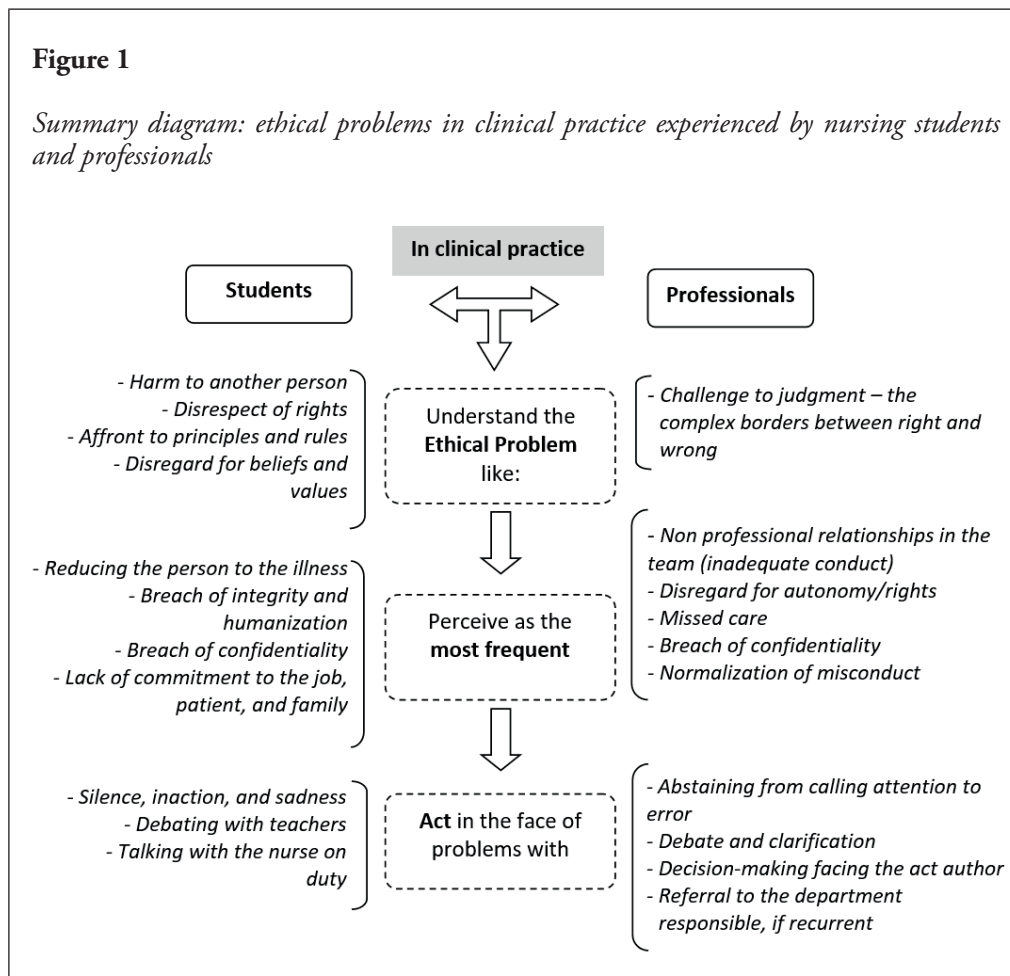
Nursing students were invited to participate during class by the principal investigator. Data were collected by two students trained to deliver the questionnaires and the informed consent form in the classroom (after class ended) or at the Academic Center for Nursing (CA). Subsequently, the participants deposited the answered questionnaires in a standard box at CA, protecting their identity. For the nursing professionals, the principal investigator contacted the heads of some inpatient and intensive care units, requesting the dissemination of the study. The professionals who agreed to participate in the study signed the consent form and returned the completed

questionnaire to the unit head in an unidentified envelope. A sample of 20 nurses and 30 nursing students was obtained. The triangulation sampling method (students and professionals) allows comparing the phenomenon studied at the time of academic training and professional practice. Data collection was suspended after qualitative data saturation was achieved through pre-analysis using the Atlas-ti 8 software. The discursive textual analysis (Morales & Galiazzi, 2016) was used, focusing on the deconstruction of the texts or unitarization process, the establishment of relationships between the units for categorization, capturing the emerging new understanding that is communicated, and, finally, the self-organizing process, consisting of an experiential learning process. Once this process was completed, the following categories emerged: understanding the ethical problem, the most frequent ethical problems, and action in the face of ethical problems.

The project was submitted to Plataforma Brasil and approved by the Ethics Committee on Research Involving Humans by Opinion number 990.530 and CAAE 41840915.1.0000.5361. It followed the recommendations of Resolution 466/12 of the National Health Council. The participants' identity was protected with coded transcriptions using the letters PE and numbers from 1 to 20 by order of analysis (e.g., PE1, PE2, and so on). The reports of nursing students were identified by the letters EST, numbered from 1 to 30, by order of analysis.

Results

Considering the scope of the study, the results about relevant ethical problems in nursing practice are presented according to the type of participant, professionals or students, in three categories (understanding of the ethical problem; the most frequent ethical problems; action in the face of ethical problems), as summarized in Figure 1.



Students demonstrate moral sensitivity by identifying ethical problems experienced in various fields of practice (hospital and primary care institutions). They realize when patients are reduced to their illness and neglected as whole human beings, as an autonomous, moral, social, and cultural person. Thus, they problematize the professional-patient relationship and seek a space to discuss the ethical problems in nursing practice, aiming at humanized, individualized, and ethical care.

“Issues relating to respect for life, individuality, beliefs, and values” (EST 27). “Discussing matters in front of the patient, inappropriate language and tone in a hospital, disrespecting the patients’ wills” (EST 10). “The professional disrespecting the patient, lack of interest in the patient, lack of humanized care” (EST 15). “I did not react. I left the internship feeling sick and sad; I couldn’t accept what happened in practice” (EST 1).

Some nurses’ reports shared similarities with those of the students, like moral sensitivity toward situations of disregard for the patient’s wholeness. However, some specific perceptions and experiences should be noted. First, conceiving the ethical problem in a generic existence condition is a situation that challenges the professional’s judgment. As such, the “problem” can be narrated in facts (concrete) and something capable of pushing the professional into reflection. Other differences include greater importance of problems and conflicts in relationships between professionals, and, regarding patients’ rights,

respect for autonomy is a significant concern among professionals and students.

Furthermore, the diverse experience allows professionals to note how coworkers act, react, and change over time to identify when normalization of misconduct occurs. The ways of acting in the face of problems reflect the commitment to preserve ethics and protect fundamental principles of respect for the person and care quality. However, situations of discomfort discourage professionals from speaking their minds or reproaching coworkers who “should” recognize their error.

“A situation where you notice something that challenges your judgment between right and wrong. When your beliefs conflict with an unusual situation” (PE 4). “When the professional starts violating the code of ethics and acts as if it’s no big deal, as if it’s right” (PE 1). “Collaborating/stimulating debates, analyzing the situation, helping with any alternative solutions for the problem, and searching the literature for some clarifications; getting close to the patient (explaining) and/or the family. Assess the occurrence and make a decision” (PE 1). “If it’s recurrent and there is no agreement between the parties, I refer to the Hospital’s ethics committee” (PE 4). Both the students’ and professionals’ statements show the emotional and moral wear that such situations generate. Over time, it can lead to moral suffering and the fragmentation of teamwork when team members avoid acting together and start working more individually, compromising the quality and completeness of care.

Discussion

Nursing students understand ethical problems in professional practice as situations that compromise ethical conduct, that is, that cause harm, disregard ethical principles and values, and disrespect the rights of others. Their perceptions reflect moral sensitivity, encouraging them to create strategies to solve or minimize problems. Future nurses need to be aware that there are consequences to their actions or omissions that should be weighted according to the circumstances experienced (Paiva et al., 2021). Nursing professionals consider that ethical problems challenge their judgment when the border between right and wrong is exposed. Thus, professionals conceptualize the problematization process, in which the moral subject is mobilized to moral reflection/action, and merely provide examples of concrete situations that represent such problems. This suggests a capacity for abstraction/conceptualization, being developed with experience and training, and the importance of students being stimulated by such exercise. Recognizing the problematic situation is fundamental, but it should promote reflection on oneself (one's limits, beliefs, and values) in perspective with others and the context.

The most frequent problems perceived by the students include reducing the person to the disease, undermining the humanization of care and disregarding the confidentiality of information. The nursing professionals highlighted the disrespect for the patient's autonomy and rights, the disregard for professional secrecy, and missed care, culminating in the emotional exhaustion of students and professionals involved and the consequent risk of moral suffering.

Many health professionals struggle to respect the patient's freedom of choice regarding treatment. The respect for the person's autonomy clashes against the professional's intransigence. In this sense, patients' rights should be part of the curricula of health professionals' training and be disseminated in hospitals (Behrens, 2019).

Patient advocacy has been pointed out worldwide as a relevant part of nurses' performance, although it is still little studied in Brazil. In a study conducted with intensivist nurses, there was recognition of patient advocacy actions and their benefits for themselves, such as professional satisfaction, trust, and credibility, in a scenario where no barriers or conflicts were identified for patient advocacy. Thus, it is necessary to study the actions and factors that can positively or negatively influence such performance (Vargas et al., 2019). Moreover, advocacy, political and ethical inexpressiveness were related to each other and the phenomenon of moral distress (Ramos et al., 2016), indicating that the ability to advocate for the patient (here included the right to autonomy) is a professional ethical skill.

Confidentiality and privacy converge to respect the patient's rights. Still, sometimes nursing professionals superimpose technicist conduct over the relationship of being with the other (Oguisso et al., 2019), violating ethical aspects of care. These behaviors may be related to poor ethical and moral training, combined with an

inadequate understanding of the moral values of nursing, contributing to situations that harm ethics and a person's dignity, such as those identified in this study. In addition to the above, management problems can also contribute to these situations, such as the absence of a consolidated and deliberate permanent health education policy or the imposition of disarticulated care practices.

On the other hand, movements to implement patient-centered care are growing in various realities, considering the complementarity between evidence-based care and patients' right to self-determination (Delaney, 2018). Barriers to this include the very definition of patient-centered care and the need for education and training in professional practice settings (Merav & Hochman, 2017). Nursing students can recognize the ethical conflicts experienced in their practice with maturity and the importance of the protagonism of the patient and his/her family and professional confidentiality. They consider that nursing care should encompass the wholeness of the human being and, consequently, consider the needs of each person and seek their satisfaction. In their statements, they manage to apply theory to practice with a critical analysis of the problem. Despite knowing how to identify these problems, the students showed difficulty in taking action or discussing them with the teacher or the unit nurse, which means ethical conflicts need to be discussed in professional settings, aiming to develop ethical and moral competence.

In another Brazilian study on ethical conflicts experienced by students in clinical training, they perceived themselves as actors and spectators of situations involving ethical problems. They demonstrated the ability to argue on ethical and legal bases of the profession and the health system. They exhibited a process of moral deliberation in moments of problem identification, reflection, and intervention, the latter highlighting dialogue as the most incredible power (Ramos et al., 2015).

In this sense, nursing education needs to integrate dialogue, idea problematization, and development of student morality, favoring learning for decision-making, empathy, and humanized care (Avila et al., 2018). Thus, it is vital to instrumentalize teachers to build up morality as an exercise of citizenship and commit to a part of the construction and internalization of moral values of nursing students and dedication to quality care (Avila et al. 2018).

When describing actions in the face of ethical problems, the nursing professionals participating in the study not only identified them but also intervened directly (dialogue) or indirectly (referral to the Nursing Ethics Committee). This demonstrates how critical sense and reflection are decisive in individual behaviors, conflict resolution, and the work environment.

Strategies to deal with ethical problems in professional practice include the method of moral deliberation. Moral deliberation is a reflective and systematized process in which a group aims to solve an ethical problem by choosing the best course of action, considering the context of the ethical conflict. This method allows understanding the perspectives of those involved in the situation and analyzing the likely consequences of each course of action,

weighing the conflicts of values and the consequences of the decision taken (Gracia, 2016; Zoboli, 2013).

Moral deliberation methods help reflect on ethical problems in professional practice, aiming to find the most prudent solution to improve the quality of care and expand moral skills (Gracia, 2016).

Despite demonstrating an adequate understanding of ethical problems, nursing students and nurses could also benefit from integrating the teaching/practice of the moral deliberation process into academic education, contributing to recognizing ethical problems and deciding on prudent solutions. It was found that students seek to develop a professional, ethical practice. Thus, addressing ethics and bioethics in undergraduate education, simulating real work scenarios, stimulating dialogue, reflection, and collective decision-making, promotes the construction of relationships with health service users, their families, and the community, preparing the student to face the challenges of the real world (Schneider & Ramos, 2019).

In the training of future nurses, it is necessary to transform the theories on ethics education into pedagogical practices (Marques, 2018), aiming at professional conduct that considers the ethical dimension. To this end, managers and teachers need to be involved in citizen education, acquiring knowledge of philosophy, anthropology, sociology, and pedagogy, among other areas (Marques, 2018). This study encourages reflecting on the importance of developing more effective teaching/learning strategies on ethics and bioethics in the educational and clinical contexts, aiming to develop ethical skills.

A limitation of this study is that data were collected in only one educational and health care institution, which may restrict the identification of ethical problems in nursing practice.

Conclusion

Although little experienced in hospital practice, nursing students have moral sensitivity to recognize the ethical problems of nursing practice and can identify the problems in a similar way to the professionals. Decision-making is centered on reflection and consideration of the identified problems.

Professionals understand the ethical problem as the challenge in judging the complex boundaries between right and wrong. Their decisions seek an immediate solution with the person involved in the situation or indirectly by referring the case to the Nursing Ethics Committee. However, there are situations of abstention and non-involvement.

Ethical problems in hospital nursing practice are difficult to face, which demonstrates insufficient training, insufficient sensitivity to identify and address conflicts, and insufficient availability of moments to discuss meeting needs and improve the performance within teams and institutions.

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