**Ethical Issues in Nursing**

**VALUES**

ideals, beliefs, customs, modes of conduct, qualities, or goals that are highly prized or preferred by individuals, groups, or society usually not written down

**MORAL VALUES**

preferences or dispositions reflective of right & wrong, should or should not, in human behavior

**ETHICS**

declarations of what is right or wrong & what ought to be a formal process for making logical & consistent decisions based upon moral beliefs generally no system for enforcement ETHICAL PRINCIPLES basic & obvious moral truths that guide deliberation & action

**TYPES OF ETHICS**

1- BIOETHICS: which governs life sciences like responsible research conduct, environmental ethics & sustainable healthcare.

2- CLINICAL ETHICS: is a branch of bioethics concerned with ethical problems at the bedside.

3- NURSING ETHICS: is a subset of bioethics which is concerned with the study of ethical issues that arise in nursing practice.

**\*\*\*MAJOR ETHICAL PRINCIPLES**
Autonomy, Beneficence, Nonmaleficence ,Veracity, Confidentiality Justice, Fidelity

**AUTONOMY**:- self-governing; having the freedom to make independent choices self-determination r/t health care deals with professionals willingness to respect client’s rights to make a free choice given that they have been provided with all necessary information & knowledge not an absolute right except in some cases

**BENEFICENCE**:-Views the primary goal of health care as “doing good” for clients Includes more than just technical competency Client approached in holistic manner Very old requirement for health care providers Good care = clients beliefs, feelings & wishes as well as those of the clients family & SO’s Difficulty implementing the principle lies in determining what exactly is good for another & who can BEST MAKE THE DECISION about this good

**NONMALEFICENCE**:- Requirement that health care providers “do no harm” to their client’s – intentionally or unintentionally Opposite side of the coin from beneficence Difficult to discuss without mentioning beneficence In current health care practice, the principle of nonmaleficence is often violated in the short run in order to PRODUCE A GREATER GOOD in the LONG TERM TX of the client May undergo painful & debilitating surgery to remove a cancerous growth in order to prolong life in the future

**VERACITY:-**Requires the health care provider to tell the truth & not intentionally deceive or mislead clients Limitations = in situations where telling clts the truth would seriously harm (principle of nonmaleficence) their ability to recover or would produce greater illness FEELING UNCOMFORTABLE is NOT a good enough reason to avoid telling clts the truth about their dx, tx or prognosis The client has a RIGHT to know this information

**JUSTICE**:- an ethical principle that relates to fair, equitable & appropriate treatment in light of what is due or owed to persons, recognizing that giving to some will deny receipt to others who might otherwise have received these things obligation to be fair to all people 1st statement in ANA Code of Ethics for Nurses

**FIDELITY**:- The individual’s obligation to be faithful to commitments made to self & others In health care, includes the professional’s faithfulness or loyalty to agreements .

**ETHICAL THEORIES**

1- Teleology 2- Deontology 3- Institutionism 4- Ethic of caring

**1-Teleology**: looks to the consequences of an action in judging whether that action is right or wrong

**2-** **Deontology**: proposes that the mortality of a decision is not determined by its consequences. It emphasizes duty, rationality, and obedience to rules The difference between Teleology and Deontology can be seen when each approach is applied to the issue of abortion
Example: Teleology approach/abortion: saving the mother’s life (the end, or consequence) justifies the abortion (the mean, or act) Deontology approach/abortion: consider any termination of life as a violation of the rule “do not kill” and therefore, would not abort the fetus, regardless of the consequences to the mother
**3-Institutionism:** summarized as the notion that people inherently know what is right or wrong; determining what is right is not a matter or rational thought or learning (e.g. the nurse inherently knows it is wrong to strike a client, the nurse does not need to be taught this or to reason it out) The preceding three theories are based on the concept of fairness (justice)
**4-Ethic of caring:** it is based on relationships. Caring is a force for protecting and enhancing client dignity Caring is of central importance in the client-nurse relationship (e.g. nurses use trust-telling to affirm clients as a persons rather than objects and to assist them to make choices and find meaning in their illness experiences)

 **EXAMPLES OF ETHICAL PROBLEMS**
NURSES & PATIENTS Paternalism (acting for patients without their consent to secure good or prevent harm) Deception Confidentiality Allocation of scarce nursing resources, etc. NURSES & PHYSICIANS Disagreements about the proposed medical regimen Conflicts regarding the scope of Nurse’s role Unprofessional, incompetent or illegal nurse practice **.**

**SPECIFIC ETHICAL ISSUES RELATED TO THE PROFESSION OF NURSING**
1-Commitment to the patient

2- Commitment to your employer Responsible work ethics Responsible use of supplies

3- Commitment to your colleagues

 4- Commitment to personal excellence

 5- commitment to nursing profession Formal evaluation Informal evaluation Addressing substandard care