Ethical Dilemmas in Nursing

Ethical Practice is founded on the moral lens through which nurses perceive the world. What is right and bad is defined by morality. Ethical quandaries test nurses' ability to provide effective patient care while simultaneously sticking to professional standards. The concepts, beliefs, and moral criteria that guide nurses' behavior and decision-making in their professional activity are referred to as nursing ethics. Nursing is an essential career that entails caring for individuals, families, and communities during vulnerable and health-related periods. To ensure that nurses offer safe, compassionate, and patient-centered care while honoring the dignity and autonomy of individuals in their care, ethical concerns are critical.

Ethical principles in nursing include:

1. Autonomy: Autonomy is the patient’s right to make their own decisions regarding their care as well as their right to refuse treatment. Patient autonomy must be respected.
2. Beneficence: Beneficence means acting in the best interest of patients or simply, doing good, to promote patient well-being.
3. Non-maleficence: The obligation to do no harm to patients, avoiding actions that may cause unnecessary harm or suffering.
4. Justice: Treating all patients fairly and providing care based on their needs, without discrimination or bias.
5. Veracity: Being honest and truthful with patients, providing accurate information to help them make informed decisions.
6. Fidelity: Being faithful and keeping promises, maintaining patient confidentiality, and protecting their privacy.
7. Respect: Recognizing and valuing the uniqueness and individuality of each patient, irrespective of their cultural background, beliefs, or preferences.
8. Accountability: Taking responsibility for one's actions, ensuring competency in practice, and adhering to professional standards and guidelines.

Ethical awareness and competency in nursing are crucial for maintaining trust between patients and healthcare providers, ensuring the highest quality of care, and upholding the integrity of the nursing profession. Continuous education and reflection on ethical issues help nurses make well-informed decisions that align with their ethical responsibilities as caregivers.

Ethical dilemmas are situations where individuals face conflicting moral principles or choices, and each decision may result in a negative consequence. These dilemmas often arise When there is a clash between different ethical principles, values, or obligations, Ethical dilemmas arise and leading to difficulties in determining the right course of action. Ethical dilemmas can be found in various aspects of life, including healthcare, business, law, and personal relationships.

**Common examples of ethical dilemmas:**

Healthcare: A nurse discovers that a patient is refusing a life-saving treatment due to religious beliefs. Should the nurse respect the patient's autonomy and decision, even if it may lead to the patient's death, or should the nurse intervene to save the patient's life?

1. Business: An employee at a company observes their colleague engaging in unethical behavior, such as falsifying financial records. Should the employee report the misconduct and risk their colleague's job, or remain silent and potentially allow further harm to the company and its stakeholders?
2. Research: The question of disclosure arises when a researcher finds evidence that a pharmaceutical drug may have debilitating side effects which are not disclosed by the researcher. Should the researcher publish the findings, potentially harming the drug's reputation and impacting patient access to it, or remain silent to protect the drug manufacturer's interests?
3. Environmental: A company faces a decision between increasing profits by continuing to use environmentally harmful practices or investing in more sustainable but less profitable methods. Should the company prioritize financial gains or act responsibly towards the environment?
4. End-of-life care: A family must decide whether to continue life-support measures for a terminally ill loved one, despite knowing that recovery is unlikely. Should they continue treatment to prolong life, or should they consider withdrawing life support to allow a more peaceful passing?
5. Confidentiality: A therapist learns that their patient has intentions of causing harm to others. Should the therapist breach confidentiality and report the potential harm to authorities, or should they maintain patient confidentiality?
6. Allocation of resources: In a public health crisis, such as a pandemic, medical professionals must decide which patients receive limited resources like ventilators when there is a shortage. How do they allocate resources fairly and ethically?

Dealing with ethical dilemmas can be emotionally challenging and requires careful consideration of the potential consequences of each option. People often seek advice from peers, mentors, or ethical committees to help them navigate such complex situations. Ethical decision-making processes involving reflection, analysis, and consultation can assist individuals in arriving at morally justifiable solutions that respect the values and principles involved.

Aydogdu in an integrative review on ethical dilemmas faced by nurses, searched 14 databases and categorized the results in to four categories

1. Issues concerning beneficence–nonmaleficence;
2. Lack of Awareness regarding patient autonomy;
3. Barriers to justice;
4. Challenges in Coping with ethical dilemmas.

Some Health care Dilemmas faced by nurses

**1: Protecting the rights of Patients**

Protecting the rights of patients is a fundamental ethical and legal responsibility for healthcare professionals, including nurses, doctors, and other members of the healthcare team. Patients have certain rights that must be respected and upheld to ensure they receive safe, compassionate, and patient-centered care. Here are some key aspects of protecting the rights of patients:

**Informed Consent:**

Informed Consent must be obtained for all medical operations, including anesthesia, blood transfusions, chemotherapy, and surgery. It demands written documentation with the patient's and family's signatures.

**Exceptions to Informed Consent**

In some cases, such as when a patient is disabled or in a life-threatening emergency with little opportunity to obtain consent, informed consent is not necessary. Furthermore, minors are often incapable to provide informed consent. In such situations, a parent or guardian must give their consent to therapies or interventions, which is known as "informed permission."

Patients have the right to be given precise details regarding their medical condition, choices for treatment, possible hazards, benefits, and alternatives. Before any medical operation or treatment, healthcare providers must get the patient's informed consent, ensuring that the patient comprehends and can make decisions based on this knowledge.

**The Nurse’s Role**

Though a nurse's exact involvement in the informed consent process differs per institution, nurses are frequently involved in the process as patient advocates to ensure client or caregiver comprehension. Patients and families may feel more at ease conversing with a nurse than with their doctor in certain instances because a nurse can explain complex medical concepts in layman's terms. The Code of Ethics for Nurses addresses the nurse's relationship with their patient, as well as the nurse's duty in safeguarding the rights and interests of patients.

Patients often sign contract forms despite the fact that they do not completely comprehend a therapy or operation, which courts have ruled does not constitute informed consent. Including nurses in the informed consent process can be beneficial

**Consent and the Law**

In addition to its inherent ethical significance, getting informed consent has implications for the law. A good informed consent process might help you avoid lawsuits. Failure to obtain appropriate informed consent may result in medical malpractice litigation. The informed consent process requires complete disclosure.

In order to comply with legal obligations, health care workers must explain what is involved with medical care, the anticipated benefits and potential risks, as well as alternatives to the proposed treatment and the potential benefits and risks associated with the alternatives, including the option not to undergo treatment.

**Consent and Improved Patient Outcomes**

Evidence also suggests that people who are educated and feel empowered regarding their health care are more likely to stay committed to a treatment plan and achieve improved outcomes. Furthermore, ensuring that patients fully comprehend every component of a proposed treatment can help avoid delayed or cancelled surgeries, which may jeopardize patient health and be costly for hospitals. Before obtaining informed consent, nurses and other health care personnel must make every effort to ensure that patients understand a treatment or operation and all of its potential repercussions.

**The Importance of Educating Patients**

As with informed consent, healthcare providers must ensure that patients comprehend the facts presented with them as well as the consequences of their selections. There are numerous methods for boosting patient comprehension, including the use of visual aids and teach-back, in which health care providers make patients repeat back information imparted to them.

Patients who agree to a treatment plan but may not fully understand it may confront ethical concerns, which may lead to disagreements with medical professionals. Nurses, as skilled communicators and patient advocates, can help to improve the shared decision-making process.

**Privacy and Confidentiality**: When it comes to their health information, patients have the right to privacy and anonymity. Healthcare staff must maintain patient data securely and not divulge sensitive information to unauthorized parties unless required by law or with the patient's permission.

**Autonomy:** Patients have the right to make healthcare decisions that are in accordance with their values, beliefs, and personal preferences. Healthcare workers should accept and support the patient's autonomy, even if they disagree with the patient's choices, as long as the decisions are informed and are not harmful to the patient.

**2. Autonomy vs. Beneficence**

Autonomy (following a patient's wishes) and beneficence (doing good) are two fundamental ethical principles. The nurse's duty is to strike an agreement between these two principles through open communication, information sharing with the client, and discussion. If not addressed correctly, there may be ethical, moral, and legal ramifications.

Patient autonomy is not restricted if the patient is a minor or lacks the mental ability to make choices. When a patient's wishes conflict with the advise of medical specialists, nurses, or other health care workers, an effort should be made to educate the patient on the implications of their decisions, and their desires should be respected..

The core commitment of nurses is to patient care; therefore, they must balance their duty to honor and uphold the interests of patients with devotion to their organization or coworkers. Patient safety and the best interests of patients must be safeguarded while conserving professional integrity.

In a study by Mulaudzi, F et al, the author emphasizes that moral dilemmas arise while on nursing care, and both the principles of beneficence and nonmaleficence are frequently jeopardized due to nursing shortages, a lack of knowledge about the disease, treatment limitations, and a lack of resources, such as Protective Personal Equipment (PPE).

Patient autonomy is a fundamental nursing principle which highlights the right of patients to make independent decisions about their care based on their personal or cultural beliefs and principles. This includes the right of the patient to refuse medications, treatments, or operations. In numerous instances, a patient's right to autonomy can clash directly with what nurses or other health care workers believe is best.

3**. Dignity and Respect**: At all times, patients should be treated with dignity and respect. Listening to their concerns, answering their inquiries, and incorporating them in their care decisions are all part of this. It also entails taking into account their cultural, religious, and personal views when delivering care.

4. **Non-Discrimination**: Patients should not be treated differentially based on their race, ethnicity, religion, gender, sexual orientation, disability, or socioeconomic status. Everyone should have equitable access to high-quality healthcare services.

5. **Safety and Quality of Care**: Patients have the right to receive care that is both safe and competent. To safeguard patients, healthcare providers must employ evidence-based procedures, adhere to standards of care, and take the necessary safeguards.

6. **Access to Information**: Patients have the right to access their medical records and other relevant health information. Healthcare providers should facilitate patient access to information, enabling them to be actively involved in their care.

7. **Complaints and Grievances**: Patients have the right to voice complaints and grievances about their care without fear of retaliation. Healthcare facilities should have a clear process for addressing and resolving patient concerns.

8. **End-of-Life Care**: Patients have the right to make end-of-life care decisions, including the option to refuse treatment or request palliative care. These decisions should be respected by health care providers, who should offer appropriate support and comfort..

**Nurses and End-of-Life Care**

People are living healthier lives as medical technology advances, and they frequently decide on health-care decisions on themselves. This fact highlights the essential function of medical personnel, particularly nurses, in delivering end-of-life care to patients. Patients can choose from an assortment of life-saving and life-extending treatments, and nurses should be able to help them make the best decision for them.

A nurse's involvement is also essential in guaranteeing a patient's advance directive desires are fulfilled, especially in emergency situations where the patient is incapacitated. Moral dilemmas might emerge when, for example, a patient requests that they not be placed on a ventilator but members of their family object. Patient autonomy is of the utmost importance in end-of-life care, as it is in other situations presenting ethical concerns in nursing, and nurses are uniquely positioned to represent for a patient's interests.

Moral challenges in nursing occasionally occur during advanced care planning, particularly in end-of-life care situations. Advanced care planning is a procedure in which patients make decisions about their future health care in the event they become disabled, often collaborating with medical professionals. This procedure is not restricted to elderly individuals. Because medical crises are unpredictable — for example, a car accident or sudden illness — advanced care planning is beneficial for people of all ages, allowing an opportunity to ensure they receive the medical treatment they desire if they are unable to speak.

**Advance Directives**

During this time, patients are frequently faced with difficult decisions about choosing to use life-saving or life-prolonging treatments, such as a ventilator or artificial nutrition and hydration (tube feeding, intravenous fluids). This plan is sometimes shared with family members in the form of an advance directive, known as a legal document that describes a patient's preferences for medical care if they become incapacitated.

A living will and a power of attorney for health care are the two fundamental elements of an advance directive, but it can also include other documents such as a do not resuscitate order (DNR), which directs practitioners to bypass procedures like as CPR. Patients may also prefer to convey their wishes in an informal way, such as a video message but this may not be considered as an advanced directive

**The Nurse’s Role**

In their paper "Being torn by Inevitable Moral Dilemmas," Asadi, N et al highlight the main drivers of ethical challenges for nurses as conflicts with personal self, feeling squeezed between self, authority, and demands of others, and being surrounded by organizational imitations.

Nurses play a vital part as patient advocates in supporting patients and their families with advanced care planning. Both the American Nurses Association and the Hospice and Palliative Nurses Association issued position statements emphasizing the importance of nurse involvement in advanced care planning and end-of-life care, particularly for empowering patients and their familie. Nurses can assist patients in dealing with the various decisions they may face concerning emergency or end-of-life treatments, as well as facilitate negotiations between patients and families about these decisions, working with patients in evaluating different treatment options and how they may affect the patient's individual disease process. Nurses must be prepared to explain the implications of these decisions, and they must be conscious of the numerous factors that may influence a patient's health care decisions, such as race or ethnicity, cultural beliefs, or religion.

**Overcoming Ethical Challenges**

1. **Shared Patient Decision-Making to overcome ethical challenges**

Health care in earlier days was characterized by paternalism: medical personnel worked in what they considered were the best interests of a patient without considering the patient's opinions. This antiquated method has given way to a considerably more ethical approach. The concept of shared patient decision-making, an extension of patient autonomy, empowers patients by enabling them to work alongside with health care providers to make vital health decisions. In shared decision-making, the patient and the clinician interact to decide on examination, treatments, procedures, and overall care plan. In certain instances, shared patient decision-making mimics informed consent, and vice versa. Nurses and anyone who engages in shared decision-making with patients, like informed consent, are held responsible for educating them about

**Importance of Shared Decision making in Ethical health care;**

1. **Individualized Care**

Shared decision-making goes beyond simply sharing evidence. Health care practitioners should learn about their patients' values, beliefs, and goals in order to establish an enduring respectful relationship. They should be conscious of a patient's history and how attributes such as age and race may influence their decision-making.

Patients who do not have this sort of relationship with their provider may be less cooperative and less inclined to talk. Patients who are actively involved in decision-making and have a respectful, compassionate interaction with their provider, on the other hand, are more satisfied with their care and are more likely to stay committed to prescribed treatment programs.

1. **Evolving Care**

Shared patient decision-making is a continuous process in which everyone involved continually reflect on previous choices. Patients who are unable or unwilling to follow through on a treatment decision — either because it proved more challenging than expected or wasn't what they expected — may seek to revisit the issue in question. The role of a nurse is to assist the patient through promoting ongoing interaction and cooperation.

Ewuoso C provided insight into tactics used by health care professionals to overcome ethical issues in his analysis of empirical studies on how health care professionals respond to ethical quandaries. The following are some of the tactics used by health care practitioners.

1. Consultation with peers, moral committees, or other professionals
2. Stalling, which means the use of delaying strategies such as distraction to relax patients, the continuation of pointless treatment, and the false pretense of possessing a strategy
3. Resolving ethical quandaries by having a prior discussion with patients or referring clients to another hospital or health professional, seeking a court order or deferring decision-making to senior colleagues
4. Disclosure/concealment of information by concealment, and lying)
5. **Models to handle ethical dilemmas in Nursing**
6. Nursing Process approach: It uses a structured problem solving approach to solve ethical challenges.

Assessment: Collect data regarding the nature of the issue, its causes, the people involved, their state of health, alternatives to therapy, stakeholder concerns, and the ethical resources that are available.

Analysis: Analyze and document the data collected along with the stakeholder values employing ethical principles, ethical theories, the Code of Ethics, or the ethical frameworks and ethics resources that have been consulted.

Diagnosis: Determine the context of care whilst taking into account areas of agreement and disagreement in terms of the patient's family, health care team, and the organizational setting

Outcome: Establish goals that promote client autonomy

Planning Use cafeterias approach to providing care options. Set the plan into action by working together with the client, family, and other stakeholders

Implementation: Choosing the best option while bearing in mind that not all options are appropriate in every scenario

Evaluation: Explore the ethical problems and document your findings

### Four-Quadrant Approach

The four-quadrant approach emphasizes and integrates ethical principles (e.g., beneficence, non-maleficence, autonomy, and justice) in four quadrants i.e. health care indications, individual and family preferences, quality of life, and contextual features.

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| ****Indications for Health Care (Beneficence and Non-maleficence)****   * What is the prognosis/diagnosis? * What are the treatment/care goals? * What are the chances of therapeutic success? * Will the proposed treatment plan benefit the client and avoid harm? | ****Individual and Family Choices (Autonomy/ Respect)****  **What are the preferences of the client?**  **• Is the customer aware of their condition?**  **• Has the client given informed consent and is aware of the risks and advantages of the proposed treatment?**  **• Is the customer capable and competent to make decisions? If not, do you have advance directives?** |
| ****Life Quality (Related principles of Beneficence, Nonmaleficence, and Autonomy)****  **• What are the chances of the client returning to regular life with or without treatment?**  **• Will the person suffer any physical, mental, or social disadvantages even if the treatment is successful?**  **• Do the health-care providers have any prejudices that might influence their assessment of the client's quality of life?**  **• Has the option of foregoing therapy been discussed?**  **• Is there a strategy in place for comfort and/or palliative care?** | **Contextual Characteristics (related to principles of Justice and Fairness)**  **• Are there any family or provider concerns that could influence treatment decisions, such as implicit bias?**  **• Are there any religious, financial, societal, racial, or legal considerations that could influence treatment decisions?**   * **Are there any concerns with resource allocation that could hinder treatment?** |

### MORAL Model

The MORAL model is a decision-making model developed by nurses that is based on empirical research on moral problems concerning client autonomy, quality of life, resource distribution, and professional standards. The moral paradigm consists of five steps: (1) massage the situation, (2) define the possibilities, (3) resolve the dilemma, (4) act by implementing the chosen option, and (5) reflect on the entire process (Guido, 2014).

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| **M: Massage the dilemma** | Analyze the problem. Collect data to establish individual and stakeholder perspectives, as well as to define the quandary and describe disputes. |
| **O: Outline options** | Outline your options. Create choices for achieving the objectives. |
| **R: Review criteria and resolve** | Examine and resolve the criterion. Determine the criteria for resolving the quandary and choose a path of action |
| **A: Affirm position and act** | Take a stand and act. Take action based on what you learned in the previous steps. |
| **L: Look back** | Examine each step and decision made. |

### PLUS Ethical Decision-Making Model

The Ethics and Compliance Initiative developed the PLUS Ethical Decision-Making model to assist firms in empowering individuals to make ethical judgments in the workplace. To guide ethical decision making, the moral employs four filters.

1. **P:** Is the ethical options consistent with the Policies, procedures, and guidelines of the organization
2. **L:** is the decision acceptable according to Laws and regulations
3. **U: Is it consistent with the organizational philosophy (Universal Values)?**
4. **S:** Does it satisfy my definition of what is right or wrong

The seven steps of the PLUS Ethical Decision-Making model are as follows

* With the help of PLUS filters the problem is defined
* Appropriate guidance is sought
* Other options available are explored
* Choices are evaluated using PLUS for effectiveness
* Decide on the action and implement
* Actions taken and effect is evaluated PLUS filters

Training is essential to help nurses deal with ethical dilemmas in practice. Referring to the code of ethics provides guidance for practice. Ethical dilemmas are a part of clinical nursing practices. Nurses must be prepared to overcome these challenges as well protect themselves from the mental stress caused by ethical dilemmas.

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