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Editorial

Patients Dignity in Nursing

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In previous issues of nursing and midwifery studies, several articles have published on nursing ethics and ethical issues in caring. Ghorbani et al. studied nurses' perception of the ethical environment. They suggested that hospital managers need to discover better ways to promote ethical environment of the healthcare organizations (1). Berkiten Ergin et al. have also concluded that cultural differences effect on ethical values of caregivers (2). Zehtab and Adib Hajbaghery also focused on positive role of spiritual caring on patient well-being as an important aspect of ethical nursing care. Observing the dignity of patients is an important aspect of ethics and ethical caring (3). Dignity is fundamental to the well-being of every individual in all societies. It is a basic human right for all, and health care organizations should pay special attention to this universal need. Meaning of dignity remains complex and unclear because it is a multidimensional concept. The word originates from two Latin words 'dignus' which means merit and 'dignus' meaning worth. The concept of dignity has four defining attributes including respect, autonomy, empowerment, and communication (4). As Griffin and Vanessa reported, each of the four attributes in turn consists of several dimensions. Respect includes self-respect, respect for others, respect for peoples' privacy, confidentiality and self-belief and belief in others. Autonomy includes having choice, giving choice, making decisions, being able to make decisions, competence, rights, needs, and independence. Empowerment includes a feeling of being important and valuable, self-esteem, self-worth, modesty and pride. Communication might be verbal or nonverbal and also includes explaining and understanding information, feeling comfort and giving time to the audience (4).

According the international code of ethics for nurses (ICN), respect to life and observing the individuals' dignity is not only an inseparable part of the nursing profession but also is not limited by the individuals' age, color, creed, culture, gender, sex, nationality, race, social status or their health status (5). In Iran, a ten-point statement

was adopted by the Ministry of Health and Medical Education in 2002. This statement is mentioned in its first article that patients have the right to receive appropriate and effective healthcare with full respect regardless of their race, culture and religion (6). Also Islam emphasizes not only on observing the patients' dignity but also on the mutual rights of patient and physician, and patient and community. Observing dignity and privacy is essential for establishing an effective relationship between the healthcare professionals and patients. It also is critical for maintaining patient's serenity. In contrast, many harmful consequences would ensue if the patients' dignity is not observed. As Dehghan Nayeri and Aghajani reported, Failure to comply the patients' privacy (as a measure of dignity) may not only make the patients to conceal some aspects of their medical history, or refuse medical examination, but also would increase their level of anxiety and stress; which consequently would result in some aggressive and unacceptable behaviors (7). Some studies on patients' rights show that patients are dissatisfied of the healthcare professionals' behaviors in observing their rights related to privacy, confidentiality, choice and control. Patients believed that they usually are not involved in caring decisions. They also were dissatisfied of the healthcare professionals in terms of observing patients' respect and decency, forms of addressing during physical examination and in activities related to personal hygiene (7, 8). This problem is a universal issue. It is essential to pay special attention to cultural issues when dealing with patient rights issues. This would lead us to make more realistic decisions about patient care. It is essential for nurses to observe the patients dignity. In the first step they should be familiar with the concept of dignity and its different aspects, if they should observe such aspects in their day to day caring activities. In addition, patients' perspectives and their concerns on observing their dignity in the context of healthcare organizations should be identified. Moreover, nurse educators should not only pay more attention to the concept of dignity in

their educational contents, but also they should be good role models for their students.

References

1. Ghorbani AA, Hesamzadeh A, Khademloo M, Khalili S, Hesamzadeh S, Berger V. Public and private hospital nurses' perceptions of the ethical climate in their work settings, sari city, 2011. *Nurs Midwifery Stud.* 2014;**3**(1) e12867.
2. Berkiten Ergin A, Ozcan M, Ersoy N, Acar Z. Definition of the ethical values and ethics codes for Turkish midwifery: a focused group study in kocaali. *Nurs Midwifery Stud.* 2013;**2**(3):21-7.
3. Zehtab S, Adib-Hajbaghery M. The Importance of spiritual care in nursing. *Nurs Midwifery Stud.* 2014;**3**(3) e22261.
4. Griffin-Heslin VL. An analysis of the concept dignity. *Accid Emerg Nurs.* 2005;**13**(4):251-7.
5. International Council of Nurses.. *The ICN code of ethics for nurses.* 2012. Available from: http://www.icn.ch/images/stories/documents/about/icncode_english.pdf.
6. Ministry of Health and Medical Education. *Patient's rights.* 2002. Available from: <http://siasat.behdasht.gov.ir/index.aspx?siteid=291&pageid=34985>.
7. Nayeri ND, Aghajani M. Patients' privacy and satisfaction in the emergency department: a descriptive analytical study. *Nurs Ethics.* 2010;**17**(2):167-77.
8. Baillie L. Patient dignity in an acute hospital setting: a case study. *Int J Nurs Stud.* 2009;**46**(1):23-36.