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The Necessity of Ethical Education for Clinical Nurses in Japan

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In complex and diversified clinical settings, social needs for patients' rights are increasingly demanded. Although clinical nurses have not received systematic ethics education, they will face ethical problems on a daily basis. To solve these problems, we are required to offer ethics education to clinical nurses. We have conducted a seminar on ethics for clinical nurses at Tottori University Hospital. The purpose of this study is to clarify the current status of nursing ethics. Sixty-six clinical nurses attended this seminar from Tottori University Hospital. A questionnaire was used to collect data from 61 nurses. The following data were found: i) 56% had experience with ethical problems, ii) 49% have criteria for ethical judgment, iii) 83% answered that their understanding of ethics has deepened through this seminar and iv) almost all nurses who attended this seminar realized that nurses play an important role in advocating patients' self determination. Based on the results, we concluded that a seminar on nursing ethics provides opportunities for nurses to review his or her practice, to look back on their own nursing and to think about what ethical problems are. These findings also indicated the importance of continuing education on this problem for clinical nurses.

Key words: continuing education; ethical education; medical ethics; nursing ethics

The health care environment is becoming more technically complex and all health professions are facing complicated medical ethical issues especially in morale decision-making; however, many nurses in current practice have had little education in this field. In Japan, basic education in nursing ethics began as an independent subject in 1951 (Sakuraba, 1990). However, because of the criticism against its use of nursing morale-based ethics, it was deleted from the nursing curriculum in 1968 (Kojima, 1991). Since then, nursing ethics has not been treated as an independent subject.

In 1997, in response to social needs which emphasize education in nursing ethics, the subject was reincorporated into the nursing curriculum (Yamada et al., 1999). As a result, nursing ethics has become an independent course, usually called bioethics and nursing ethics in the basic nursing curriculum. However, the revised basic nursing courses still provide only traditional didactic lectures, and

the systematic educational program on ethical issue is not yet established in Japan.

The purpose of this study is to clarify the current status of nursing ethics and nursing education on ethical issues, including our practical experiences.

Materials and Methods

Current status of Japanese nurses on ethical issues

General concepts of nursing ethics are not always obvious to nurses themselves nor for the general public. With respect to each subject in nursing education on ethics, a national-wide survey was conducted in 1997 from 293 Japanese institutions for nursing education, and the results were published in 1999 (Yamada et al., 1999), as shown in Table 1. Death with dignity, mercy killing, informed consent and brain death

Table 1. Subjects for nursing ethics

Subject	Incidence (%)*
1 Death with dignity, mercy killing	94.1
2 Informed consent	91.6
3 Brain death, organ transplantation	88.8
4 Truth telling of the disease	86.4
5 Artificial abortion	76.9
6 Moral ethics for nurses†	71.3
7 Medical intervention for life prolongation	71.3
8 Gene therapy	42.0
9 Opposition in nursing care and treatment between nurses and physicians	33.9
10 Patients discrimination (race, nationality, religion, gender, social position, economic status)	26.9

*Incidence in which each subject is treated as an educational one for nursing ethics among 293 Japanese institutions.

†Set forth by the Committee on Nursing Ethics in Japan Nursing Science Association (1993). Cited with our modification from the report by Yamada et al. (1999) with written permission.

or organ transplantation were items which were most frequently treated as educational subjects in Japan.

What types of situations do Japanese clinical nurses, who directly deal with patients and their family members, consider as ethical problems? What do the nurses do in those situations?

The Committee on Nursing Ethics in Japan Nursing Science Association studied the responses of nurses to ethical issues (Committee on Nursing Ethics in Japan Nursing Science Association, 1993). In the report, when the nurses face ethical problems, they: i) follow the orders of physicians, ii) facilitate communication between patients and their physicians and iii) have a team conference among nurses.

When the latter 2 scenarios occurred, it was usually due to emotional responses of the nurses to cope with the way the physicians were handling the patients. The emotional responses were caused by a perceptual recognition and rejection of the hierarchy system between physicians and nurses (nurses must obey physicians' orders), by a disorganized work system, by an unclear understanding of a nurse's assigned task due to a team approach for a given problem or by too much dependency on his or her team. Similar problems indicating conflict between nurses and physicians have been also reported in the United States (Baggs, 1994; Greenfield, 1999). In these situations, it is im-

possible to expect that nursing ethics on the proper care of patients will spontaneously develop in the clinical field without an educational foundation.

Considering these situations and to solve these problems, nurses are required to increase their knowledge and insight of underlying ethical concepts and decision-making. To respond to their needs, we conducted a seminar on ethics for clinical nurses at Tottori University Hospital.

Seminar on ethical problems

A seminar on ethics for clinical nurses at Tottori University Hospital was conducted on April 28, 1998.

Attendees of the seminar were 66 female nurses who work at Tottori University Hospital. Their mean age was 36.8 years. There was no information taken on the length of time of each working experience; however, the attendees were 11 head nurses, 12 assistant head nurses and 38 staff nurses.

Seminar contents

The contents of the seminar included: i) understanding of nursing ethics in the medical field, ii) the principle of ethics and iii) themes related to patients' rights.

At the end of the seminar, a survey was conducted on the contents of the seminar and nursing ethics. The main contents of the survey

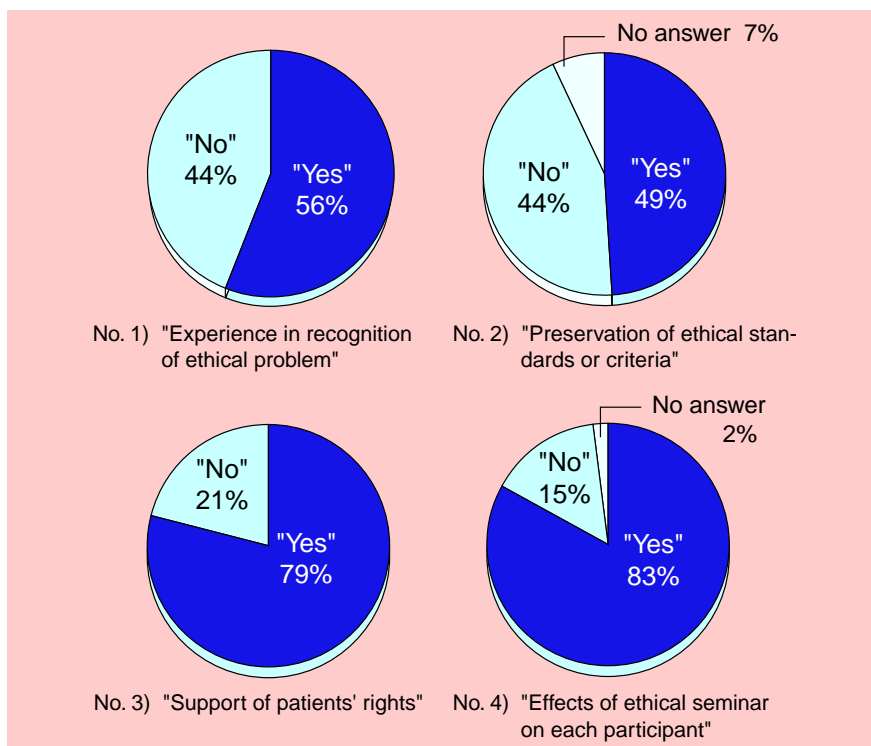


Fig. 1. Questionnaire and responses. Questions No. 1 to 4:

- 1) Have you ever thought about any ethical problems? If "yes", in what situations did you think that they are ethical problems?
- 2) When you think of nursing ethics, do you have any standards or criteria?
- 3) Do you agree that nurses try to advocate a patients' rights or that patients' rights are advocated?
- 4) Was your understanding of nursing ethics deepened after this seminar?

were as follows: No. 1) Have you ever thought about any ethical problems? If "yes", in what situations did you think there are ethical problems? No. 2) When you think of nursing ethics, do you have any standards or criteria? No. 3) Do you agree that nurses try to advocate patients' rights or that patients' rights are advocated? No. 4) Was your understanding of nursing ethics deepened after this seminar?

Results and Discussion

In our questionnaire, 61 out of 66 responded to this survey (92%). Results are shown in Fig. 1. Fifty-six percent answered "yes" to question No. 1, and gave situations such as undefended patients' rights, the patient-doctor relationship and the lack of physicians' explanation to pa-

tients about their health status. In these situations, the nurses worried about how they can face their patients. The nurses felt an ethical dilemma in prioritization between the care of the patients and obeying the physicians' orders. On the other hand, 44% answered for question No. 1 that they had not thought about ethical problems, indicating a lack of interest.

When the nurses thought about the ethical issues, 49% answered that they have at least some criteria for ethical judgment (No. 2), and 44% of them had no criteria. Among nurses who answered "yes", their criteria were based on the Japanese Nurses Associations' ethical standards (Hatano, 1999) in 27% and the remaining 73% had their own standards. Seventy-nine percent answered "yes" to question No. 3. On the other hand, 21% did not agree with this question, indicating the insufficient protection

of patients' privacy and the unwilling enforcement of interhospital rules.

Eighty-three percent answered that their understanding of ethics has deepened (question No. 4). However, 15% of the nurses answered that a single seminar alone could not possibly improve their understanding, indicating a need for continued education on nursing ethics.

Social needs in medical practice has been changing, and the sense of values has become more complex. Accordingly, ethics issues are diversified, as shown in Table 1. We expect that these items will change as time passes; for example, gene therapy may become a bigger issue since treatment will be more frequent, and racial discrimination may be more of a problem since more foreigners will enter Japan. Currently many clinical nurses are facing complex bioethical dilemmas without any formal educational background. In these situations, it is not likely that nursing ethics in the proper care of patients will spontaneously develop in clinical settings. In our series of studies, when nurses had ethical problems, their responses were (in the order of frequency): i) discussing the problems with the physicians and other nurses and ii) no action. These answers suggest that there were difficulties in handling ethical problems because of the unclear position of nurses between patients and physicians. No action reflected that the nurses were passive in solving the ethical problems by themselves. The results of the present study strongly suggest that a seminar on nursing ethics provides an opportunity for nurses to review his or her nursing practice, to consider what ethical problems are and to think about what is expected of nurses in resolving ethical problems.

Brock et al. (1995) suggested that there is no single correct way to educate nurses in ethics; however, one solution is continuing education, including service programs, case studies, workshops and teaching sessions. Smith et al. (1996) also emphasized the necessity of continuing education for the development of nursing ethi-

cal judgment. As indicated by these studies, it is strongly suggested that continuing education on nursing ethics seems imperative in nursing practice. A variety of effective learning methods needs to be considered for future planning.

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