

CHAPTER 1

INTRODUCTION

Background

Major changes in economics, society, politics, and science and technology have resulted in increased complexities of ethical issues in health care service (Chaowalit, Hatthakit, Nasae, Suttharangsee, & Parker 2002; Haugen, 2002; Ketefian, Phancharoenworakul, & Yunibhand, 2001). Economic constraints have led to difficulty in health care resource allocation and in providing health care services for indigent patients. Advances in science and technology have resulted in complicated treatments and prolonging patients' lives through such means as chemotherapy and organ transplants.

Ethical issues faced by healthcare professionals have also become increasingly complex and difficult. Common ethical issues facing healthcare providers include trying to meet patient needs with scarce resources, providing the most appropriate care even when providers may profit from the patient's use of specific resources, applying rules and regulations which may conflict with one's professional judgment, acting in the best interest of the patient when reporting requirements may conflict with patient confidentiality, making appropriate care decision even when a patient's behavior may contribute significantly to his or her problems, and using new or unproven technologies appropriately (Dolan, 1995).

In the nursing profession, nurses are constantly experiencing new ethical dilemmas as a result of global impact and changes in health care (Noureddine, 2001). Redman and Fry (2000) systematically analyzed five studies and found ethical

conflict themes underlying four specialty areas (diabetes, education, pediatric nurse practitioners, rehabilitation and nephrology). Conflicting themes identified in all four disciplines were differences in the definition of adequacy of care among professionals, the institution and society; differences in the philosophical orientation of nurses, physicians and other health professionals involved in patient care; a lack of respect for the knowledge and expertise of nurses in specialty practices; and difficulty in carrying out the nurse's advocacy role for patients. In Thailand, nurses also have experienced numerous ethical dilemmas: Wipamat (2001) found that all 110 registered nurses included in her study had encountered ethical dilemmas when providing care for HIV/AIDS patients. In addition, a study by Chaowalit, et al.(2002) found that nurses in Southern Thailand encountered ethical dilemmas regarding balancing professional obligations vs. protecting themselves from harm, prolonging life vs. prolonging dying, maintaining patient confidentiality vs. warning others of harm, advocating for patients vs. maintaining relationship with others, intradisciplinary and interdisciplinary conflicts, truth-telling vs. benevolent lying and withholding information, end of life issues, and discrimination vs. obligation to provide care equality.

In nursing administration, nurse administrators especially head nurses are also confronted with ethical dilemmas when making daily administrative decisions that require choices of a moral and ethical nature. Zeccolo's (1996) study of the ethics for nursing administration asserted that there is a distinctive nature to the ethics of nursing administrators and that the ethics of the traditional staff nurses are inappropriate for nursing administrators. The number of research studies of ethical dilemmas and ethical decision making confronting nurse administrators are very limited. Although studies of ethical dilemmas and ethical decision making in nursing

administration in other countries can be found in nursing literature for more than the past 15 years, number of research studies is still limited. Studies regarding ethical dilemmas and ethical decision making in nursing administration included a study of Bantz (1999); Camunas (1991); Camunas (1994a); Camunas (1994b); Colvin (1998); Cooper, Frank, Gouty, & Hanson (2003); Cooper, Frank, Gouty, & Hanson (2004); Cooper, Frank, Hanson, & Gouty (2004); Harvey (1997); Lemieux-Charles, Meslin, Aird, Bager, & Leatt (1993); and Sietsema & Spradley (1987). The results of these studies revealed that nurse administrators experienced ethical dilemmas regarding allocation of resources, quality of care issues/patients care standards, issues relating to staffing and mix, a concern for fairness, using power for good ends, treatment vs. non treatment, conflict between organizational and professional philosophy and standards, and lack of knowledge or skills to competently perform one's duties, concern with preventing harm, consumer/patient choice, balancing needs of different groups of patients, conflict between financial incentives and patient needs, and professional autonomy.

In Thailand, however, explicit knowledge of ethical dilemmas and ethical decision making of Thai nurse administrators in nursing administration is also limited because of the lack of research studies in this area. Findings from previous studies in several countries may or may not fit with nurse administrators in the Thai context. Ethical dilemmas and ethical decision making of Thai nurse administrators may be different from nurse administrators in other countries because of the different values and ethical concerns of nurses from other cultural and national backgrounds. According to Wros, Doutrich, and Izumi (2004), nurses from Japan and the USA may hold certain similar and common values and ethical concerns, but the interpretation and actions are different. Their study found that both Japanese and American nurses

valued relationship and connectedness, but the way they developed the relationship and connected with patients was different. Japanese nurses tended to be much more indirect in their style. In addition, nurses in each country held values that were not found in the nursing practice of the other country. Japanese nurses valued continuity, homogeneity, harmony, self-sacrifice and hard work whereas American nurses valued control, diversity, patient treatment choice and self-protection.

On order to fill the gap of knowledge related to ethical issues in nursing administration in Thailand, this study proposes to explore ethical dilemmas and ethical decision making in nursing administration through critical incident analysis. The setting of the study focused on all 5 regional hospitals in southern Thailand as regional hospitals are tertiary health care organizations responsible for providing care for patients with complex health problems. Regional hospitals provide complicated health care services by using equipment of advanced technology, complex treatments, and intensive nursing care. These factors induce complicated ethical problems and issues in the provision of health care services.

This study focused on head nurses because most, as first line nurse administrators, participate in varying degrees of policy formation and decision making with other members of nursing administration (Roland & Roland, 1992). These first line administrators are also responsible to patients, families, and staff for interpreting and achieving the organization's mission and goals. The head nurses' work behavior has a direct effect on patients' health, on working relationships with families, on the work performance of nurses and other care givers such as doctors and social workers, and on community relationships with individuals and institutions in the department's environment (Drach-Zahavy, A. & Dagan, E., 2002). In addition, head nurses are expected not only to manage the care of patients, but also to lead their

departments professionally and administratively (Manfredi, 1996 cited in Drach-Zahavy, A.& Dagan, E., 2002). Head nurses' decisions may have profound effects on all aspects of the organization. In sum, effective head nurses help to promote an effective health care organization.

Therefore, knowledge involving ethical dilemmas and ethical decision making of Thai nurse administrators need clarification in order to promote effective ethical decision making in nursing administration of Thai nurse administrators. It is vital to clarify common ethical dilemmas in nursing administration and to explore how head nurses handle ethical dilemmas in order to develop adequate resources to assist them in making effective ethical decisions in nursing administration. In this study, critical incident analysis presented by Flanagan (1954), a set of procedures for collecting direct observations of human behavior, is used in exploring ethical dilemmas and ethical decision making of head nurses. It is a systematic, inductive, open-ended procedure for eliciting verbal or written information from participants (Norman, Redfern, Tomalin & Oliver, 1992). Thus, the critical incident analysis technique helps head nurses to describe specific incidents and all relevant details of ethical issues from memory. Knowledge gained from this study can promote effective ethical decision making in nursing administration in Thailand.

Objective of the Study

The main objective of this study is to explore ethical dilemmas, ethical decision making, and outcomes of ethical decision making from critical incidents in nursing administration among head nurses in regional hospitals of Southern Thailand.

Research Questions

The research questions for this study are:

1. What are the ethical dilemmas head nurses in regional hospitals of Southern Thailand encountered in nursing administration?
2. What are ethical decision making of head nurses in regional hospitals of Southern Thailand when confronted with ethical dilemmas in nursing administration?
3. What are the outcomes of ethical decision making in nursing administration of head nurses in regional hospitals of Southern Thailand?

Conceptual Framework

The conceptual framework in this study consists of three main aspects: ethical dilemmas in nursing administration, ethical decision making, and outcomes of ethical decision making.

1. Ethical dilemmas in nursing administration

Ethical dilemmas in nursing administration from various studies in the United States and Canada found similar ethical dilemmas including allocation of resources, quality of care, staffing, a concern for fairness, conflict between organizational and professional philosophy and standards, and lack of knowledge or skills to competently perform one's duties, concern with preventing harm, consumer/patient choice, balancing needs of different groups of patients, conflict between financial incentives and patient needs, and professional autonomy (Borawski, 1995; Camunas, 1991; Camunas, 1994a; Camunas, 1994b; Colvin, 1998; Cooper, Frank, Gouty, & Hanson, 2002; Cooper, Frank, Gouty, & Hanson, 2002; Cooper,

Frank, Hanson, & Gouty, 2004; Harvey, 1997; Sietsema & Spradley, 1987).

2. Ethical decision making

Elements of the ethical decision making of head nurses comprise ethical decision making models and theoretical foundation used in ethical decision making.

2.1 Ethical decision making models

Model of ethical decision making are 1) patient-centered model, 2) physician-centered model, and 3) bureaucratic-centered model (Pinch, 1985; Swider, Mcelmurry, & Yaling, 1985).

The patient-centered model refers to decisions reflecting nursing responsibilities with primary commitment to the patient and family and their welfare, their rights, and best interests.

The physician-centered model refers to decisions that reflect nursing responsibilities with overarching commitment to a physician's attitudes or authority, or those of the medical community.

The bureaucratic-centered model refers to decisions reflecting primary responsibility and accountability to the hospital structure and institutional authority.

2.2 Theoretical foundations used in ethical decision making

In this study, theoretical foundations used in ethical decision making are considered to be 1) ethical theories, 2) ethical principles, 3) ethical concepts, 4) Nurses' Code of Ethics, and 5) The Patient's Rights.

1) Ethical theories

Ethical theories in this study comprise two theories: the utilitarian theory and the deontological theory.

The utilitarian theory claims that an action is judged as good or bad in relation to the consequences or outcome (Burkhardt & Nathaniel, 2002).

The deontological theory is based upon the rationalist view that the rightness or wrongness of an act depends upon the nature of the act, rather than its consequences (Burkhardt & Nathaniel, 2002).

2) Ethical principles

Ethical principles in this research includes four basic principles presented for nurse administrators (Beauchamp & Childress, 2001; Silva, 1990): respect for autonomy, beneficence, non maleficence, and justice.

Respect for autonomy focuses on respecting the decision making capacities of autonomous persons.

Beneficence focuses on providing benefits and balancing benefits against risks and costs.

Nonmaleficence focuses on doing no harm to others.

Justice focuses on distributing benefits, risks, and costs fairly.

3) Ethical concepts

Ethical concepts in this study comprise advocacy, accountability /responsibility, cooperation, and caring (Fry & Johnstone, 2002).

Advocacy refers to the active support of an important cause.

Accountability refers to being answerable for one's responsibility.

Cooperation refers to active participation, collaboration, and reciprocity with others to obtain quality care for patients.

Caring refers to a moral obligation or duty among health professionals

4) Nurses' Code of Ethics

Nurses' Code of Ethics refers to a written list of the nursing profession's values and standards of conduct. Nurses' Code of Ethics in this study

refers to The Code of Ethics for Nurses in Thailand (2003) and The International Council of Nursing (ICN) Code for Nurses (2005).

5) The Patient's Rights

The patient's right was developed in 1998 for patients in Thailand.

3. Outcomes of ethical decision making

Outcomes of ethical decision making in nursing administration was studied in terms of positive and negative outcomes.

Definitions of Terms

1. Ethical dilemma in nursing administration

An ethical dilemma in nursing administration is a moral conflict in which a head nurse is faced with what should to be done in the face of competing moral choices in nursing administration. In this study, ethical dilemmas in nursing administration refer to a moral conflict described by head nurses in their administrative role and responsibility.

2. Ethical decision making

Ethical decision making is defined as the models and the way of thinking and acting of head nurses in dealing with ethical dilemmas in nursing administration.

3. Outcomes of ethical decision making

Outcomes of ethical decision making refer to desirable/positive and undesirable/negative outcomes of ethical decision making perceived by head nurses.

4. Critical incident analysis

Critical incident analysis captures the participant's own reality by fostering such reflection. In this study, critical incident analysis was used to explore ethical

dilemmas, ethical decision making, and outcomes of ethical decision making in nursing administration of head nurses. Head nurses were requested to provide descriptions of specific incident that they perceive as being significance.

Significance of the study

Findings of this study benefit nursing administration and nursing profession. It adds to the body of knowledge of nursing. Knowledge of critical incidents of ethical dilemmas, ethical decision making, and outcomes of ethical decision making of head nurses provide a database for ethical decision making in nursing administration and can be applied in promoting effective administrative ethical decision making for head nurses.