

CHAPTER 1

INTRODUCTION

1. Background and Significance of the Research Problem

Nurses are confronted with ethical dilemmas in many areas of nursing practice on a daily basis. Dilemmas may arise when nurses deliver nursing care to patients, when they work together with physicians (health care members) or when they work with other nurses. Nurses who work in a hospital encounter ethical dilemmas when they are faced with multiple, conflicting obligations to which they must simultaneously respond (Davis & Aroskar, 1991).

Intensive care unit nurses also face ethical dilemmas. They often face issues requiring ethical considerations in their daily practice. Technological advances and consumer demands for high quality nursing service may put nurses in conditions that induce dilemmas. Conflicts can arise in an intensive care unit for many reasons. For example, in caring for terminally ill patients, nurses frequently face the situation of whether to prolong life with ventilator assistance or to prolong the dying process, meaning to prolong suffering for the patients. In an intensive care unit (ICU), ethical dilemmas faced by nurses could arise from withholding of information and truth telling, withholding and withdrawing of treatment, advanced technology application, allocation of scarce resources, and violation of patient confidentiality (Wlody, 1998; Thelan et al, 1994). Wlody (1998) concluded that dilemmas in patient care in ICU most frequently

center around three ethical conflicts: autonomy versus paternalism, justice versus utilitarianism, and veracity versus fidelity. She also stated that withholding and withdrawing of treatment, use of technology vs. cost, nutritional dilemmas, and issues related to rationing of resources are the other ethical conflicts faced by critical care nurses.

Even though some ethical dilemmas are dramatic and some are subtle, they all produce moral distress (Corley, 1995). Confronting an ethical dilemma will create feelings of discomfort or uneasiness. Moral conflict in critical care is often managed inadequately and can lead to feelings of powerlessness, anger, and frustration (Tucker & Friedson, 1997). A study by Wilkinson (1998) on moral distress in nursing practice, experience and effects among 24 nurses (12 nurses had worked in ICU), showed that moral distress reduced nurses' feelings of wholeness, and had a negative impact on patient care. She found that all subjects reported that moral distress produced a variety of strong, negative feelings (predominant ones were anger, frustration and guilt). Impact on nurses' wholeness included loss of self-worth, effect on personal relationships, various psychological effects, behavioral manifestations, and physical symptoms.

Ethical dilemmas can be resolved adequately by various strategies. Chaowalit, Suttharangsee, and Takviriyannun (1999) found that resolutions of ethical problems experienced by nursing students included expressing feelings, discussing with others, taking moral actions, unconditional acceptance, and positive thinking. Hudak and Gallo (1994) proposed that ethical dilemmas can be resolved by taking action based on ethical decision-making. Ethical decision-making models provide critical care nurses with a

process for systematically and thoughtfully examining a conflict, ensuring that participants consider all important aspects of situation before taking action.

From CINAHL and Medline database 1982 to 2000, there has been a number of studies conducted on ethical dilemmas in nursing practice, but very few studies were conducted in the critical care area. Redman and Hill (1997) identified 23 studies of ethical conflicts/dilemmas perceived by nurses in various practice settings. They only found two studies on ethical dilemmas in intensive care settings/units. Both studies took place in NICU.

In Medan, based on the researcher's observations and interviews with two nurses who work in the ICU, many nurses do not realize that they are facing ethical dilemmas, even though they encounter them in their daily practice. Yet, there are no previous studies addressing ethical dilemmas experienced by nurses practicing in intensive care units in Indonesia. Because of the lack of literature and sources of research studies concerning specific ethical dilemmas in intensive care units and how nurses deal with such ethical dilemmas in their practice, this area requires investigation using a hermeneutic phenomenological approach. Hermeneutic phenomenology has been used as a means for arriving at a deeper understanding of ethical dilemmas experienced by intensive care nurses (Allen & Jensen, 1990). This approach goes to the essence of nurses' experiences about ethical dilemmas, including meanings, feelings, and resolutions. Therefore, this study provides valuable information about ethical dilemmas experienced by nurses in Indonesia as well as looking at resolutions they came to in dealing with ethical dilemmas.

2. Objectives of the Study

The objectives of this study were to:

- (1) describe and explain ethical dilemmas experienced by nurses in intensive care units in Medan.
- (2) describe and explain the resolutions arrived at by ICU nurses to deal with ethical dilemmas.

3. Research Questions

This study aimed at answering the following questions:

- (1) What are the ethical dilemmas experienced by nurses in intensive care units in Medan?
- (2) What are the resolutions arrived at by nurses in intensive care units in Medan to deal with ethical dilemmas?

4. Definitions

The following terms are defined for the purpose of the study:

An Ethical Dilemma is a situation experienced by nurses when providing care for patients in ICU perceived as an ethical dilemma, including meanings, feelings and situations that create the ethical dilemma.

The Resolution of Ethical Dilemmas involved actions taken by ICU nurses to deal with ethical dilemmas that they faced.

5. Significance of the Study

The proposed study can contribute to nursing practice, nursing education and the development of further research.

(1) For nursing practice, the research findings will provide nurses with detailed, rich descriptions of ethical dilemmas experienced by nurses in intensive care units. These descriptions can provide nurses with information to deal with ethical dilemmas in critical care settings.

(2) For nursing education, these research findings can be used as baseline data for nurse educators to use in teaching ethics to nursing students.

(3) For nursing research, these research findings can provide data, and help to develop a tool to assess ethical dilemmas for future research.

6. Limitations of the Study

This study was conducted in only two hospitals in Medan, Indonesia. Therefore the generalizability of the findings will be limited because of the small number of participants, and the participants are not randomly sampled. This study also cannot be generalized to private hospitals because of the different cultures, values, and environment compared to government hospitals. Because of time constraints, back translations by an English expert for all transcriptions and themes checked with participants were not conducted.