**Brief Report**

**Ethics in Nursing, the COVID-19 Pandemic and Nursing Education**

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**Introduction**

The field of health care has long been dominated by the principles, codes and rational modes of decision making. Ethical decision making has become increasingly complicated due to the growth and advances in science and technology and is now an extremely important component of nursing practice. Nevertheless, even though nursing ethics has attained considerable improvement over the years it is apparent that many nursing curriculums still provide an insufficient amount of time addressing the issues of ethics and morality. Equally disturbing are the apparently small numbers of nurses (and perhaps nurse educators) who have studied or researched nursing ethics at advanced or postgraduate levels that would enable them to guide more successfully the future of generations of nurses [1].

Lee, et al. [2] found: Nursing students struggled to develop critical thinking skills because the ethics education they had previously focused on lectures and did not provide enough opportunity to think for themselves and exchange their opinions with other students. In addition, nursing students had difficulties in applying theory learned in the classroom to clinical setting.

Nursing ethics has become more of a critical concern due to COVID-19 which was declared a pandemic by the World Health Organization (WHO) on March 11, 2020 [3]. Nurses and healthcare professionals are being challenged with ethical questions related to the treatment and management of patients diagnosed with COVID-19. Ethical questions such as isolation and social distancing, duty of care to patients and how limited resourses such as ventilators, personal protective equipment and hospital beds are distributed need to be considered [4]. There is also increased demands for people seeking health care during health care emergencies such as the pandemic [5].

Woods [1] discusses the number of strikingly familiar findings in the field of nursing ethics which reveals three major disturbing and ever pervasive phenomena:

* Many nurses report that they suffer from moral distress and are concerned about the clinical dilemmas they face, but take no action, or are uncertain about what action in the face of such dilemma to take, or feel that they are overruled by physicians, or cannot always overcome “The Barriors” to implementation of their ethical decisions.
* If they do take ethical action or advocate on behalf of their patients, nurses find themselves ostracized by other personnel and then seek covert or subversive ways to promote their own moral survival.
* Newly graduated nurses do not assert themselves in the face of moral or ethical conflict, choosing instead to find ways to cope with their own resultant distress, often by passive acceptance or compromise, sometimes at the expense of doing what they have been taught or determined professionally is the right thing to do.

The day to day dilemmas nurses face include issues such as confidentiality, decisions about prolonging life, implementing a Do Not Resuscitate order, obtaining informed consent and providing medically futile treatment. These dilemmas have increased considerably during the COVID-19 pandemic. Public health and nurses have increased ethical challenges due to the increased demands for people seeking health care during health care emergencies such as the pandemic [5].

Additional ethical considerations that are not openly discussed is V.I.P. care for persons who are considered to be very important persons [6]. This population may have received healthcare and medical equipment that should have been allocated to a patient who has a higher medical need.

Patient confidentiality has become a serious concern for all medical personnel since the enactment of the Health Insurance Portability and Accountability Act of 1996 and in light of the COVID-19 pandemic. Nurses have a moral and ethical responsibility to keep patient information confidential. This has become with the increased number of health care providers, computerized charting and insurance company demands. However, nurses sometimes must make complicated decisions about whether to maintain confidentiality of information a patient has divulged when the information has the potential for seriously harming the patient or poses a serious threat to others [7]. Nurses also must ensure that patients completely understand the risks and side effects of procedures or treatments for which they have signed consent. Lashley and colleagues affirm the “Informed consent is one of the most important doctrines governing professional conduct, grounded as it is in a basic human right-freedom from institutional coercion” [8]. It is anticipated that there will be many questions whether people will be mandated to receive a COVID-19 vaccination. Ethical analysis is needed to justify the need to implement a mandatory policy for the COVID-19 vaccination [3]. Questions may arise as to Health Insurance Portability and Accountability Act regulations related to privacy and release of patient information.

Robley [9] has identified the following 5 goals of ethics education in nursing. She believes that to accomplish these goals one must use dialogue as well as understanding the therapy:

* Develop sensitivity to issues that involve conflict between values.
* Develop the ability to engage in moral reasoning.
* Develop the capacity to employ decision making that is interpersonally defensible.
* Develop habits of behavior that reflect responsible adherence to the profession’s commitment to the health and welfare of patient’s, families and the community.
* Develop the capacity for self-assessment, self-understand and reflection.

Nurses bring a perspective of care which deeply enriches any conversation of the ethical issues arising in health care. In addition, as a result of their consistent and intimate involvement with their patients, nurses are uniquely able to provide other health care professionals with information essential to reaching the best solution to an ethical dilemma regarding their patients’ care. This improves the quality of care that nurses provide to their patients and contributes to the professionalism of the nursing field. Kim, et al. [10] found that effective nursing ethics education starts with nursing students’ actual experience, addresses conflict with colleagues, offers a variety of theories of ethics and decision-making models, and promotes ethical behaviors and relationships.

Nurse educators and by derivation, the nurses they train are presently ill equipped to access and resolve ethical conflict in a professional setting. They must be part of the medical ethics paradigm in terms of establishing professional ethical standard for those in the medical field and creating a system for evaluating and improving decisions and standards on an ongoing basis. Nursing curriculum has a responsibility to ensure that students develop the necessary knowledge base and have the relevant experience to make them more self-confident in their ethical decision making. Nursing simulation can be an educational tool to promote competence and knowledge of practicing ethics in nursing**.** “Students believed that a simulation of ethical dilemmas promoted holistic care for patients and that this type of learning was enjoyable, illuminating, practical and applicable to real life.” [11]. Students can gain knowledge of ethical knowledge through actual simulations, reflection and debriefing with the guidance of their clinical instructor [12]. Nursing schools are increasingly using simulation for ethical dilemmas, communication and technical skills.

With the challenges in facilitating educating nursing students in the multi-dimensional aspect of ethics in health care the need for simulation has further increased due to the lack of available clinical experiences in the hospital due to the COVID pandemic [2].

**Conclusion**

The COVID-19 pandemic has further complicated the need to properly educate student nurses in the important concepts of nursing ethics. The Nursing Code of Ethics promotes nurses to provide the best approved care for their patients and communities. In the COVID-19 pandemic nurses, nurses educators and nursing students may have a reluctance to provide care in such high risk situations that exist in the COVID-19 pandemic [13]. “Many aspects of this pandemic have caused and are causing moral distress, and unexpected challenges to the ethical values of nurses and health care professionals including complex human rights issues in many settings” [14].Nurse educators are faced with these new ethical challenges themselves along with the entire healthcare community. Possible solutions include increasing nursing ethical scenarios in simulation with complex reflection and debriefing exercises. During clinical rotations ethical dilemmas should be emphasized and extensively discussed with students by their clinical instructor.

**References**

1. [Woods M (2005) Nursing Ethics Education: Are We Really Delivering the Good(s)? Nursing Ethics 12: 5-16.](https://pubmed.ncbi.nlm.nih.gov/15685964/)
2. [Lee W, Choi S, Min A (2020) A Case-Centered Approach to Nursing Ethics Education: A Qualitative Study. International Journal of Environmental Research and Public Health 17: 7748.](https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7660290/)
3. [World Health Organization (2021) COVID-19 and Mandatory Vaccination: Ethical Considerations and Caveats. Policy Brief 13 April 2021.](https://www.who.int/publications/i/item/WHO-2019-nCoV-Policy-brief-Mandatory-vaccination-2021.1)
4. [Jeffrey DI (2020) Relational Ethical Approaches to the COVID-19 Pandemic. Med Ethics 46: 495-498.](https://pubmed.ncbi.nlm.nih.gov/32522813/#:~:text=Key%20ethical%20challenges%20for%20healthcare,and%20fair%20access%20to%20treatment.&text=Keywords%3A%20allocation%20of%20health%20care,clinical%20ethics%3B%20decision%2Dmaking.)
5. [Berlinger N, Wynia M, Powell T, et al. (2020) Ethical Framework for Health Care Institutions Responding to Novel Coronavirus SARS-CoV-2 COVID-19. Guidelines for institutional Ethics Practice. The Hastings Center 1-12.](https://www.thehastingscenter.org/ethicalframeworkcovid19/)
6. [Perrone JT (2020) V.I.P. care: Ethical Dilemmas and Recommendations for Nurses. Nursing Ethics 27: 809-820.](https://pubmed.ncbi.nlm.nih.gov/31757188/)
7. [Grace P (2005) Patient Safety and the Limits of Confidentiality. American Journal of Nursing 104: 34-35.](https://pubmed.ncbi.nlm.nih.gov/15616445/)
8. [Grace P, McLaughlin M (2005) When Consent Isn’t Informed Enough: What’s the nurse’s role when a patient has given consent but doesn’t fully understand the risks? American Journal of Nursing 105: 79-84.](https://journals.lww.com/ajnonline/fulltext/2005/04000/when_consent_isn_t_informed_enough__what_s_the.32.aspx)
9. [Robley LR (2005) The Benefits of Serving on a Hospital Ethics Committee. Nurse Educator 30: 123-126.](https://www.nursingcenter.com/journalarticle?Article_ID=585204&Journal_ID=54026&Issue_ID=585168)
10. [Kim Y, Park J, Son Y, et al. (2004) A Longitudinal Study on the Development Of Moral Judgement in Korean Nursing Students. Nursing Ethics 11: 254-265.](https://journals.sagepub.com/doi/10.1191/0969733004ne693oa)
11. [Diaz Agea JL, Robles M, Rodriquez Jimenez D, et al. (2018) Discovering Mental Models and Frames of Nursing Ethics Through Simulations. Nurse Educ Pract 32: 108-114.](https://pubmed.ncbi.nlm.nih.gov/29776744/)
12. [Cant RB, Cooper SJ (2017) The Value of Simulation-Based Learning in Prelicensure Education: A State-of-the-Art Review and Meta-Analysis. Nurse Educ Pract 27: 45-62.](https://pubmed.ncbi.nlm.nih.gov/28843948/)
13. [American Nurses Association (2015) Nurses, Ethics and the Response to the COVID-19 Pandemic.](https://www.nursingworld.org/~495c6c/globalassets/practiceandpolicy/work-environment/health--safety/coronavirus/nurses-ethics-and-the-response-to-the-covid-19-pandemic.pdf)
14. [Turale S, Meechamnan C, Kuriaviktikul W (2020) Challenging Times: Ethics, Nursing and the COVID-19 Pandemic. Nursing and Health Policy Perspectives International Council of Nurses 67: 164-167.](https://pubmed.ncbi.nlm.nih.gov/32578249/)