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NURSING ETHICAL DILEMMA WITH USING INFORMATICS TECHNOLOGY

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Abstract:

An ethical dilemma or ethical paradox is a decision-making problem between two possible moral imperatives, neither of which is unambiguously acceptable or preferable. The complexity arises out of the situational conflict in which obeying one would result in transgressing another. Sometimes called ethical paradoxes in moral philosophy, ethical dilemmas may be invoked to refute an ethical system or moral code, or to improve it so as to resolve the paradox. Nurses face ethical dilemmas on a daily basis, no matter where they practice. Nursing information technology and healthcare are going hand in hand these days. Technology in nursing practice is not new. The universal impact of technology in health care has created a new role for nurses. There are many ethical issues nurses can face in the workplace. These include quality versus quantity of life, pro-choice vs. pro-life, freedom versus control, truth versus cheating, resource allocation, and empirical knowledge versus personal beliefs. Information is a source of authority and, increasingly, the key to prosperity among those who have access to it. Thus, developments in information systems also involve social and political relations and therefore ethical considerations in how information is used are more important.

Keywords: Ethical dilemma, Information technology, nursing.

INTRODUCTION:-

The American Nurses Association (ANA) has developed a Code of Ethics for Nurses, which serves as a guide to the implementation of nursing responsibilities in a manner consistent with quality in nursing care and ethical responsibilities of the profession. However, ethical thoughts are influenced by many factors such as culture, religion, education, individual values and opinions. These factors form our ethical views and influence the ethical decisions that affect nurses and their patients

[1]. the basic values of protecting life and alleviating suffering are shared by members of the medical and nursing occupations. The codes of confidentiality, honesty and fellowship are also expected to ship within these groups. However, the soul of servitude and agreement questioned by Nightingale, but continued by many nurses since then, has created differences in the way they face dilemmas and context in which nurses and doctors consider professional ethics

[2]. the most common moral health is moral conflict in deciding how to balance the needs of "many" and "individual" rights. The classic examples of this dilemma are those who must be saved if not everyone can be saved and how individual privacy and freedom can be respected while still protecting and promoting the health of others

[3]. New computer technologies for collecting, storing, manipulating and transmitting data transform the use and distribution of information. Along the way, they also create moral dilemmas. The speed and efficiency of electronic information systems, including local and global networks, databases and information processing programs, compel people to face entirely new rights and responsibilities in their use of information and to review the standards of conduct formed prior to the advent of computers

[4]. Counselors often face circumstances that require an appropriate level of moral decision-making. Defining a suitable path to take when facing a difficult ethical dilemma can be a challenge. To assist members of the American Counseling Association (ACA) in meeting this challenge, the writers have developed a guide for practitioners to make ethical decision-making as a framework for sound ethical decisions

[5]. A group of specialized nurses has been educated and prepared to take advantage of advanced technology in an enhanced care environment. In some countries, information nurses are subject to formal educational qualifications such as those set by the American Nurses Association (ANA, 1994). However, in other countries, including developed economies such as the United Kingdom (UK), there is a lack of nursing informatics expertise

1.1 Nurses and Ethics

Ethics is about the behaviors in which we do, should, treat each other, and includes individuals as well as groups. Defining what needs to be done can sometimes be hard. This is where ethics can be, an orderly way of determining correct and incorrect, is useful [7]. Ethical decisions are ethical when consistent with the six pillars of personality ethical decisions generate and maintain trust, show respect, responsibility, equity and care, and accord with good nationality. If we lie to get something we want and we get it, the decision can be called effective, but it is also follower.

Effective decisions are effective if they achieve something that we want to update, if they advance our goals [8]. The high burden of disease, coupled with a scarcity of health care funds complex ethical issues for nurses working in developing countries. Therefore, nurses should be adequately prepared to deal with ethical challenges among high workloads and limited resource conditions. While nurse ethics are critical to the quality of nursing care, little has been documented about nurses' knowledge of ethics, formal training and ethics in service in developing countries including Uganda [9]. Nurses and social workers (SW) are vital members of the workforce in our health care. Faced with difficult ethical issues in practice, Nurses and SW are making difficult moral decisions rationally. Much has been written about

the moral distress that nurses and SW experience in practice. The moral distress is attributed, at least in part, to the divided loyalties that nurses and SW feel in their work. They are often caught between what they believe may be better for their patients and institutional constraints or override the decisions of other healthcare professionals. Little is known about how SW and nurses feel confident in their ability to deal with ethical issues and take appropriate ethical action



Fig 1: Ethics and Technology [11].

1.2 Informatics ethics

Although one might argue that the history of information ethics begins with the ancient Greeks, in the latter half of the twentieth century, machine-based information and ethics were first seen together. At about the same time that the Nuremberg Code was being developed. From the 1970s onwards, people like Kostrewski, Oppenheim and Robert Hauptman worked with ethical questions in informatics research. In 1997, Severson presented four principles of information ethics: (1) respect for information, (2) respect for privacy; (3) equitable representation; and (4) Non-maleficence [11,12 &13].



Fig 2: Medicine, ethics, and informatics

The fast growth of informatics in the fields of medicine and public health is changing these practices. The acceptance of information technologies, as well as enhancements in disease surveillance systems, large health database analysis tools and techniques, and increased access to health information through the implementation of electronic medical record systems, are all a powerful incentive for future advances in public health [13]. Information technology is a prominent tool in healthcare management. However, health care systems are often unable to report concerns about privacy, confidentiality and integrity of information. Despite the existence of existing literature on ethical issues in medicine, as well as ethics in computing, information technology in medicine lead to new ethical issues not covered by medical ethics or computing.

1.3 Social media and ethics

Social networks such as LinkedIn, Twitter and Facebook have become crucial tools for legal professionals and those who communicate with them. In particular, in conjunction with the increased use of mobile technologies in the legal profession. These guidelines are guidelines rather than "best practices". The world of social media is an emerging region that is rapidly changing and "best practices" will continue to evolve to keep up with these developments. Moreover, there cannot be a single set of "best practices" where multiple ethical laws exist throughout the United States [15].



Fig 3: Social media



Fig 4: Social media

Cultural differences can make it difficult to determine what is unethical, especially when it comes to using computers. Studies on ethics and computer use reveal that people of different nationalities have different views, difficulties arise when the ethical conduct of nationality violates the ethics of another national group. For example, to Western cultures, many ways in which Asian cultures use computer technology is software. This moral conflict arises from the Asian traditions of collective ownership that conflict with the protection of intellectual property. Nearly 90 percent of all programs are created in the United States. Some countries are more relaxed with restrictions on copying IP than others [17].

1.4 Evidence based practice in nursing informatics

The author considers that information infrastructure is essential for evidence-based practice. It is proposed to establish five basic infrastructure blocks for evidence-based practice: 1) common terminology and structures, 2) sources of digital evidence, 3) standards that facilitate the exchange of health care data among heterogeneous systems, 4) information processes that support the acquisition application of evidence on a specific clinical situation, and 5) information competencies. Selected examples illustrate how each of these blocks supports the application of evidence to practice and builds evidence from practice [18].

1.5 Bioethics

For almost two decades, discussions have taken place in bioethics on how to address the challenge of best practices in multidisciplinary methodology. Experimental research in bioethics, mainly using social science methods, has increased significantly during this period [19].

Over the last 40 years, developing bioethics has been a vital subject, as well as common, in both academic and public areas. However, teaching bioethics are still far from the syllabus in university biological sciences. As a result, undergraduate students are not aware with many of the past and current ethical dilemmas arising from scientific growth. Columbia University's grounding provides an excellent environment for introducing young scientists and future health care professionals to ethical problems that will undoubtedly face high schools and their professional careers [20].

1.6 Fundamental Ethical principles

1.6.1 Beneficence and Nonmaleficence; to seek benefit from those who work with them and are careful not to harm. In their professional work, psychologists seek to preserve the well-being and rights of those who interact professionally with them and other affected persons, and the wellbeing of animal research topics [21&22].

1.6.2. Fidelity and Responsibility; to develop trusting relationships with those who work with them. They are aware of their professional and scientific responsibilities towards the community and the specific communities in which they work [21&22].

1.6.3. Integrity; to seek to promote accuracy, honesty and honesty in science, teaching and practicing well [21&22].

1.6.4. Justice; recognition of justice and justice qualify all people to access and benefit from the contributions and equal quality in the processes, procedures and services [21&22].

1.6.5. Respect for People's Rights and Dignity; to respect the dignity and worth of all people, the rights of individuals to privacy, confidentiality and self-determination [21].

1.6.6 Autonomy; Agree to respect the right of the other to self-determination; and to support independent decision-making [21&22].

1.6.7. Paternalism; Health care professionals make decisions about treating, and diagnosing the patient. Based on the belief of the health care professional about what is in the patient's best interest, he chooses to reveal or obscure the patient information in these three important areas. This principle is heavily loaded as an application of authority to the patient [22].

1.7 Ethical decision making

Attention to our feelings can be important evidence that we are facing an ethical dilemma. Ethical emotions are part of our makeup as humans. These feelings are triggered even when we do not have a personal interest in the event [23]. Attempts of moral education to prepare individuals to recognize and respond effectively to ethical dilemmas. The study of different philosophical styles of ethics, evaluation of decisions and outcomes of past and ethical problems, and discussion of effective case studies are some ways in which individuals can acquire the skills necessary to make ethical decisions [24].

1.8 Research ethics

The review of research ethics was developed by the post-World War II community to ensure that people are protected from immoral research, but today ethical review is legally expensive before more human research is conducted. General need to review ethics, existing reviews are often assessed; common complaints include the amount of paper required for inconsistencies in decisions between review boards and suggestions that ethics review systems may not be equipped to review specific types of research correctly [24& 25]. In response to these criticisms, efforts have been made to establish standards for ethics review, and several authorities have implemented accreditation processes to ensure that the contract meets requirements, such as those imposed by the US Federal Policy for the Protection of Human Beings, yet these procedural standards may not necessarily reflect the objectives To date, there is no consensus on evaluation criteria to assess the review of research ethics [25]. The Menlo report outlines a set of basic principles for guiding and resolving ethical issues in Information Communication Technology (ICT) research or involvement. It highlights the need to interpret and expand traditional ethical principles to enable ICT researchers and regulatory units to conduct an appropriate and systematic assessment of ethical defensible research. The framework it proposes can support existing and potential institutional mechanisms that serve well to implement and apply such principles, such as the Research Ethics Board (REB) [26].

1.9 The Code of Ethics for Health Information Professionals:

The ethics code of the health informatics profession should therefore be clear, unmistakable and easily applied in practice. Moreover, since the field of informatics is in a state of constant change, it should be flexible in order to accommodate changes that are taking place without sacrificing the application of its fundamental principles [27].

The Nuremberg Code consisted of ten basic ethical principles that the accused violated as follows.

Research participants must voluntarily consent to research participation. The research aims should contribute to the good of society. Research must be based on sound theory and prior animal testing. Research must avoid unnecessary physical and mental suffering. No research projects can go forward where serious injury and/or death are potential outcomes. The degree of risk taken by research participants cannot exceed anticipated benefits of results. Proper environment and protection for participants is necessary. Experiments can be conducted only by scientifically qualified persons. Human subjects must be allowed to discontinue their participation at any time. Scientists must be prepared to terminate the experiment if there is cause to believe that continuation will be harmful or result in injury or death [28].

1.10 Video on Demand (VOD)

Nurses may not have time to teach patients how to use food or to access the portal to print material useful to patients and their families. Clearly, patient safety must be the primary concern of the nurse. However, only a lot can be done in one fit. Therefore, the options are to educate the patient when the nurse is able making time while caring for 4-6 patients. It can teach and provide materials that are useful by management to all patients with special diagnoses, procedures, and medications. This can be more efficient time for the nurse, but not necessarily what is better for the patient and the family. The nurse can teach the patient how to access the food, along with providing printed material from the patient's and patient's family portal for review when they want to learn. This allows the patient and family time during the hospital to ask questions and discuss self-care after discharge [29].

Conclusion

Nursing ethical dilemma is whether virtue is something that can be taught or whether it is something within our human nature that cannot be changed and an individual is pre-disposed to it. So this review concludes; nursing ethical dilemma in using informatics technology, nurse's ethics, informatics ethics, social media and ethics, evidence based practice in nursing informatics, bioethics, fundamental ethical principles, ethical decision making, research ethics, the code of ethics, and how to use the video on demand.

References

- [1]
- [2] RN.com. Ethics and the Healthcare Professional (2012). Jenifer Wilson-Barnett Kings College London Ethical dilemmas
- Jenifer Wilson-Barnett. Kings College, London. Ethical dilemmas in nursing. Downloaded from http://jme.bmj.com / on December 14, 2017 Published by group.bmj.com. Journal of medical ethics, 1986, 12, 123-126, 135
- Greg Stapleton, Peter Schroder-Back, Ulrich Laaser, Agnes Meer shoek and Daniela Popa. Global health ethics: [4] an introduction to prominent theories and relevant topics. Global Health Action. (2014).
- Margaret Lynch, Department of Geography, University of Texas at Austin, Copyright © 2000-2015. All commercial rights are reserved. 1994.
- Forester-Miller, H., & Davis, T. E. Practitioner's guide to ethical decision making (Rev. Ed.). Retrieved from http://www.counseling.org /docs/default-source/ethics/practioner's-guidetoethical-decision-making.pdf Ethical implication in nursing informatics (2016).
- Roy L. Simpson. Evidence-Based Practice in Nursing Informatics: Concepts and Applications. Cerner [7] Corporation, USA. (2011). DOI: 10.4018/978-1-60960-034-1.ch010.
- EVIDENCE INFORMED PRACTICE TOOL. Ethical Decision-Making Framework. WRHA Ethics Services. [8] (2015).
- [9] Wes Hanson. JOSEPHSON INSTITUTE OF ETHICS. Making ethical decision, www.josephsoninstitute.org Charles Peter Osingada, Gorrette Nalwadda, Tom Ngabirano, John Wakida, Nelson Sewankambo and Damalie NakanjakoNurses' knowledge of ethics and their perceptions regarding continuing ethics education: a
- [10] cross-sectional survey among nurses at three referral hospitals in Uganda. BMC Res Notes. .(2015). 8:319 Christine Grady, Marion Danis, Karen L. Soeken, Patricia O'Donnell, Carol Taylor, Adrienne Farrar, and Connie M. Ulrich. Does Ethics Education Influence the Moral Action of Practicing Nurses and Social Workers?. Am J Bioeth. 2008 April; (2008).8(4): 4–11
- [11] https://images.search.yahoo.com/search/images
- [12] Ken Masters. Health Informatics Ethics. Sultan Qaboos University. (2014). https://www.researchgate.net/publication/227859379
- [13] LEGAL AND ETHICAL ISSUES IN PUBLIC HEALTH INFORMATICS (HPA 485). Board of Trustees, University of Illinois at Chicago.
- [14] Hamman W. Samuel, Osmar R. Zaïane, Dick Sobsey. Towards a Definition of Health Informatics Ethics. Arlington, Virginia, USA. (2010). Copyright 2010 ACM 978-1-4503-00308/10/11
- [15] James M. Wicks, Mark A. Berman, and Ignatius A. Grande. SOCIAL MEDIA ETHICS GUIDELINES. NYSBA. (2015).
- [16] Dr. Leanne Townsend and Prof. Claire Wallace. Social Media Research: A Guide to Ethics. The University of Aberdeen.

- [17] Legal, Ethical, and Professional Issues in Information Security. Cengage Learning
- [18] SUZANNE BAKKENAn Informatics Infrastructure Is Essential for Evidence-based Practice. Journal of the American Medical Informatics Association Volume 8 Number 3. (2001).
- [19] Marcel Mertz, Julia Inthorn, Günter Renz, Lillian Geza Rothenberger, Sabine Salloch, Jan Schildmann, Sabine Wöhlke, and Silke Schicktanz. Research across the disciplines: a road map for quality criteria in empirical ethics research. BMC Medical Ethics. (2014).
- [20] John D. Loike, Brittany S. Rush, Adam Schweber, and Ruth L. Fischbach. Lessons Learned from Undergraduate Students in Designing a Science-Based Course in Bioethics. CBE—Life Sciences Education (2013). Vol. 12, 701– 710
- [21] American psychological association; Ethical Principles of Psychologists and Code of Conduct, Effective June 1, 2003, as amended 2010, Copyright © 2010 by the American Psychological Association. 0003-066X
- [22] American nurses association, Short Definitions of Ethical Principles and Theories Familiar words, what do they mean?
- [23] Rushworth Kidder. Ethical Decision Making and Behavior
- [24] Sarah Hope Lincoln & Elizabeth K. Holmes. Ethical Decision Making: A Process Influenced by Moral Intensity. Journal of Healthcare, Science and the Humanities. (2011). Volume I, No. 1
- [25] Stuart G. Nicholls1, Tavis P. Hayes, Jamie C. Brehaut, Michael McDonald, Charles Weijer, Raphael Saginur, and Dean Fergusson. A Scoping Review of Empirical Research Relating to Quality and Effectiveness of Research Ethics Review. PLoS ONE 10 (7)(2015).
- [26] Michael Bailey et al. Applying Ethical Principles to Information and Communication Technology Research: A Companion to the Department of Homeland Security Menlo Report. (2012).
- [27] International medical informatics association (IMIA). The IMIA Code of Ethics for Health Information Professionals
- [28] A GUIDE TO RESEARCH ETHICS. UNIVERSITY OF MINNESOTA CENTER FOR BIOETHICS. (2003).
- [29] Heiskell, H. (2010), Ethical Decision-Making for the Utilization of Technology- Based Patient/Family Education. Online Journal of Nursing Informatics (OJNI), 14 (1).