Ethical Dilemmas Experienced by Nurses Working in Critical Care Units in Kenyatta National Hospital

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Abstract
This exploratory survey was conducted on 123 nurses working in three critical care areas of the Kenyatta National Hospital. The research aimed to identify the ethical dilemmas experienced by nurses working in Critical Care Units of the Kenyatta National Hospital in their everyday practice. It also aimed to explore what actions the nurses take to deal with the issues and what factors influence the decisions. Personnel records showed the nurses had varying socio- demographic characteristics which were found to influence the experience of dilemmas. Data were collected using questionnaires which were distributed to 123 nurses working in the critical care areas. The participants were selected using stratified random sampling method. The qualitative content analysis identified the following as the emerging ethical issues: end-of-life decisions (prolonging the dying process, withholding treatment, DNR orders and patients’ religious values), Patient care issues (unsafe nurse- patient ratios, allocation of scarce medical resources, breaches of patients’ privacy, ignoring patients’ autonomy, dealing with incompetent colleagues, discriminatory treatment of patients, patient/ relatives uninformed about the patient’s prognosis) and human rights issues (advance directives, informed consent, rights of pediatric patients and nursing of critically ill patients posing a risk to nurses). In resolving the dilemmas most of the participants indicated that they would report the issues to the physician. The socio- demographic factors that significantly affected the experience of ethical dilemmas included: age, professional qualification and level of knowledge of ethical issues.

Introduction
Ethical issues have emerged in the recent years as a major component of health care for the critically ill patients, who are vulnerable and totally depend on nurse working in the critical care unit. As the provision of care to the critically ill becomes more complex due to technological advancement, and the profession of nursing more autonomous, professional accountability becomes important.

The complex nature of the health problems faced by patients admitted in ICU coupled with extensive use of very sophisticated technology requires at times rapid decision making. Ethical dilemmas have therefore become one of the priority concerns in the nursing profession that require urgent attention in Kenya.

Ethical dilemmas confront even the most experienced. Nurses at KNH ICU are not any different particularly considering that KNH is a public hospital having the biggest ICU in the country. The ICU admits patients from various walks of life and the nurses have diverse socio- demographic factors. However their perception and magnitude of ethical dilemmas they face while working in these areas and how they resolve them have not been studied.

Study Objective
To explore ethical dilemmas experienced by nurses working in the critical care areas at Kenyatta National Hospital and factors influencing nurses’ ethical decision making.

Study questions
What ethical dilemmas face nurses working in the critical care areas at KNH?
How do the nurses resolve the dilemmas?
What factors influence the nurses’ ethical decision making process?

Materials and methods
An exploratory survey of 123 nurses working at KNH- critical care areas was conducted over a period of five weeks. Participation in the study was by written consent. Participants were nurse employees of KNH working in the critical care areas during the time of data collection and these were selected through simple random sampling. Data were collected using a questionnaire containing 40 items adapted from Fry and Duffy Ethical issues scale. Modification of the questionnaire was done to omit questions on personally disturbing ethical dilemmas. Distribution of questionnaires was done by 2 research assistants. Authority to conduct the study was obtained from the KNH management while clearance was sought from University of Nairobi and KNH Ethics and Research Committee.
Data management
Data was cleaned and analyzed using SPSS. Chi square test was used to assess the relationship between variables. The magnitude of dilemmas was measured using a Likert (four point) scale. Propositions and conclusions were made based on apparent patterns or relationships within the data.

Findings and discussion
80.8% of the respondents reported to have encountered ethical dilemmas in the course of their practice. Various dilemmas were identified and grouped into three broad categories: end-of-life issues, patient care issues and human rights issues.

Table 1 shows distribution of dilemmas experienced

<table>
<thead>
<tr>
<th>Ethical problems reported</th>
<th>Number of nurses</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Prolonging the dying process</td>
<td>87</td>
<td>88</td>
</tr>
<tr>
<td>Allocation of scarce medical resource</td>
<td>80</td>
<td>80.5</td>
</tr>
<tr>
<td>Nursing critically ill patients may pose a risk to nurses</td>
<td>67</td>
<td>59.2</td>
</tr>
<tr>
<td>Violation of rights of pediatric patients</td>
<td>62</td>
<td>51.7</td>
</tr>
<tr>
<td>Withholding/withdrawing treatment</td>
<td>58</td>
<td>53</td>
</tr>
</tbody>
</table>

The five dilemmas of major concern to nurses included: prolonging the dying process, allocation of scarce medical resources, nursing of critically ill patients who may pose a risk to the nurses, violation of rights of pediatric patients and withdrawing/withholding treatment. Others included: resuscitation (DNR) orders, unsafe nurse-patient ratios and allocation of.

Ethical decision making
In dealing with the dilemmas majority of the respondents indicated that they would consult with physicians. Others would prefer reporting issues to the nursing team leaders while some would make decisions without consulting anyone. Ethical decision making process was not followed.

Factors affecting the nurses’ ethical decision making process
Some socio-demographic factors were shown to influence the experience of ethical dilemmas by respondents. These included age, level of knowledge on ethical issues, professional qualification and availability of work place resources. It was noted that respondents aged below 35 years experienced more dilemmas compared to others. Respondents with knowledge on ethical issues experienced less dilemmas compared to those who with no knowledgeable. Respondents with adequate work place resources experienced fewer dilemmas.

Table 2 shows relationship between socio-demographic factors and experience of dilemmas.

<table>
<thead>
<tr>
<th>Socio-demographic factor</th>
<th>p-value</th>
<th>Level of significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age</td>
<td>0.001</td>
<td>Highly significant</td>
</tr>
<tr>
<td>gender</td>
<td>0.530</td>
<td>Not significant</td>
</tr>
<tr>
<td>Professional qualification</td>
<td>0.011</td>
<td>Significant</td>
</tr>
<tr>
<td>Work experience</td>
<td>0.454</td>
<td>Not significant</td>
</tr>
<tr>
<td>Level of Ethics knowledge</td>
<td>0.001</td>
<td>Highly significant</td>
</tr>
<tr>
<td>Ethics content taught</td>
<td>0.069</td>
<td>Not significant</td>
</tr>
<tr>
<td>Availability of workplace resources</td>
<td>0.38</td>
<td>Not significant</td>
</tr>
</tbody>
</table>

Conclusion and recommendations
This study shows that ethical dilemmas are an issue of concern among the nurses working in the critical care units of the KNH. The experience of ethical dilemmas is influenced by various socio-demographic factors. In resolving the dilemmas most nurses would consult the Doctors or make decisions without consulting.

Significance of the study
Results of the study will be used to make recommendations for shaping of the curriculum for training of critical care nurses to include ethical decision-making process as this need for education on ethical issues has been identified as shown in the results. The findings can be utilized as literature for further research on ethical issues.

References


Laura M. (2005), Helping the terminally ill to a good death, American nursing journal of hospice and palliative nursing, 7(2), 113-116. (abstract).


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