Research Article

Moral Problems and Moral Courage in Nursing Practice of Nursing Students in Nursing Colleges, Southern Thailand: Critical Incident Technique

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Abstract

The purpose of this study was to explore critical incidents of moral problem in nursing practice and the actions of moral courage which were demonstrated in dealing with those moral problems. In this study, fifty participants were selected to be interviewed. The interviews were transcribed to develop relevant themes using the critical incident analysis technique. Trustworthiness was established following Lincoln and Guba's criteria. The results included five themes of moral problems of critical incidents in nursing practice: 1) Compromised patient safety, 2) Substandard quality of care, 3) Lack of adequate information, 4) Lack of concern for the patient's needs, and 5) Privacy and confidentiality violation. The participants demonstrated their moral courage in various ways; 1) Providing information in respect for patient's rights, 2) Intervening to prevent further harm to the patients, 3) Declaring own mistake, 4) Encouraging quality of care, 5) Notifying health care team about patient's needs, 6) Responding to the patient's need in accordance with patient's rights, and 7) Taking action to maintain patient privacy and confidentiality. The results of this study will increase nurse educators awareness of the importance of teaching moral courage in nursing education.

Keywords: critical incident; moral courage; moral problems; nursing college; nursing student

Introduction

Nurses frequently encounter moral problems, such as in the treatment of dying patients and dealing with issues of abortion[1]. Some nurses often are not able to deal with the moral problems in nursing practice because they have little experience in solving these moral problems. Moreover, they are aware of the possible negative outcomes from their action such as loss of self-worth, frustration, anger, sadness, anxiety, guilt, and burnout,[2-6] which have a negative impact on the quality of nursing care.

In nursing practice in Thailand, moral problems occur frequently due to changing technology in health care and consumer demand for high quality nursing services.[7] Although, nurses try to respond to moral problems, there is not always an easy solution. In addition, their actions sometimes result in negative feelings. New nurses in particular, lack of confidence and have little experience in solving moral problems because of their limited exposure to these types of problems in nursing practice.[8,9] One study[10] reported nursing students had limited knowledge and experience in coping with moral problems because nursing education focuses on cultivating nursing students to be moral agents rather than their ability to solve moral problems. As a result they are less confident in dealing with moral problems and so they choose to keep quiet and not act instead of trying to solve those moral problems.

A review of the literature indicates that moral courage can help in solving moral problems by increasing self-confidence, adaptation and recognition, and enhancing the ability to respond to moral problems.[6,11] It encourages nurses and nursing students to solve moral problems by taking the right actions.[6,12-14] Unfortunately, there has been no study found on moral courage among nurses and nursing students in Thailand or other countries, thus, this study is essential to enable nursing education to cultivate moral courage in nursing students.

Objectives

To explore critical incidents of moral problems in nursing practice and to describe actions of moral courage demonstrated in dealing with these moral problems in nursing practice.

Research Questions

1. What are the critical incidents of moral problems in nursing practice confronted by nursing students?

2. What are nursing student's actions of moral courage, when confronted with critical incidents of moral problems in nursing practice?

Methods

This qualitative study uses the critical incident analysis technique (CIT) of Flanagan.[15] According to Flanagan,[15] this method is commonly used for meaningful incidents such as personal opinions, judgments and actions from the person's experience. Importantly, the participants must be able to recall the incidents in detail.

Participants

Fifty participants with sixty-three incidents were included in this study. According to Flanagan[15], the sample size for CIT needs to be no less than 50 incidents. Participants were recruited based on the inclusion criteria: 1) Being a nursing student in the third year in a nursing college in the South of Thailand, 2) Having experience of moral problems in nursing practice, 3) Having experience in facing critical incidents of moral problems in nursing practice, and 4) Being able to communicate in Thai Language.

Ethical Considerations

This thesis was approved by the Institutional Review Board (IRB) of the Faculty of Nursing, Prince of Songkhla University, Thailand, No. 2866 and the Institutional Review Board (IRB) of the nursing colleges involved. Permission for data collection was

obtained from five nursing colleges. The researcher informed the participants about the objectives and methods of this study. They were also informed of their freedom to withdraw at anytime without consequence. Importantly, the researcher assured the participants that their data would be kept confidential.

Data Collection

Before data collection, the screening questionnaire was used to recruit participants who had direct experience regarding moral courage in nursing practice. The esearcher administered the screening questionnaire to 580 third year nursing students of five colleges and found that 50 nursing students reflected their experience of moral courage through the written responses. Then, participants were appointed for individual interviews using the individual interview guide and informed consent was obtained before the interviews. The participants were interviewed and their interviews were transcribed to develop relevant themes by using the critical incident analysis technique. Sample questions from the interview guide included:

1) What was the moral problem you experienced in nursing practice?

2) What was your action towards the moral problem?

Data Analysis

The researcher developed the themes and sub-themes of the critical incidents of moral problems and actions of moral courage by using percentages that calculated themes and sub-themes.

Trustworthiness

This study ensured quality by following the Lincoln and Guba's criteria[16] which accepts the credibility of the experienced reality of participants and there were 2 participants through checking their data. Dependability involved two experts, the thesis adviser and co-adviser, to review the analyzed data and confirmability was achieved by a senior lecturer of Graduate School of Nursing, Midwifery and Health Victoria University of Wellington, New Zealand, who is an expert in qualitative research, by checking coding and themes.

Findings

1. Characteristics of the participants

Most of the participants were female (45 out of 50, 90%). Forty participants were Buddhist (40 out of 50, 80%) and the rest identified as Muslim (10 out of 50, 20%). The majority were 21 years old (31 out of 50, 62%), followed by 20 years old (8 out of 50, 16%), and 22 years old (7 out of 50, 14%).

2. Critical incidents of moral problems faced by nursing students

There were five themes of critical incidents of moral problems which comprised: 1) Compromised Patient Safety with two sub-themes including; 1.1) Compromised patient safety by others, and 1.2) Compromised patient safety by self, 2) Substandard Quality of Care, 3) Lack of Adequate Information, 4) Lack of Concern for the Patients' needs, and 5) Privacy and Confidentiality Violation (Table 1).

Table 1 Frequency and percentage of critical incidents involving moral problems from 63 incidents encountered by 50 nursing students (N1=frequency of incidents; N2=persons)

Moral problems	Incidents (N_1=63)		Participants (N_2=50)	
	n_1	%	n_2	%
1. Compromised Patient Safety	21	33.3	21	42
1.1 Compromised Patient Safety by Others	12	19.0	12	24
1.2 Compromised Patient Safety by Self	9	14.3	9	18
2. Substandard Quality of Care	14	22.2	10	20
3. Lack of Adequate Information	12	19.1	8	16
4. Lack of Concern for the Patients' Needs	9	14.3	6	12
5. Privacy and Confidentiality Violation	7	11.1	5	10

In response to "Compromised patient safety by others," participants took actions which reflected moral courage in there themes: 1) Providing information in respect for patient's rights 2) Intervening to prevent further harm to the patients 3) Encouraging patients and their family to voice their concerns. Actions reflected moral courage in dealing with "Compromised patient safety by self" included: 1) Declaring own mistake, 2) Notifying health care team to solve the problems, and 3) Intervening to prevent further harm to patients (Table 2).

Table 2 Frequency and percentage of actions of moral courage responding to compromised patient safety (N1=frequency of incidents; N2=persons)

Critical incidents	Actions of Moral Courage	N_1	%	N_2	%
1. Compromised patient safety by others (N_1=12, N_2=12)	1. Providing information in respect for patient's rights	8	67	8	67
	2. Intervening to prevent further harm to the patients	7	58	7	58
	3. Encouraging patients and their family to voice their concerns	5	42	5	42
2. Compromised patient safety by self (N_1=9, N_2=9)	1. Declaring own mistake	9	100	9	100
	2. Notifying health care team to solve the problems	9	100	6	67
	3. Intervening to prevent further harm to patients	5	56	5	56

The details of critical incident "compromised patient safety" and action of moral courage are presented as follows:

1. Compromised patient safety was the most frequently reported incident experienced by nursing students. The main cause of this problem was mistakes made by the health care teams or the nursing students. This had negative effects on the patient's safety and quality of care and was separated into two sub-themes.

1.1 Compromised patient safety by others usually resulted from an error in the patient's care

that carried negative effects for patient safety. For example, in the situation below the patient did not know about the error in his medication but the nursing students knew something was wrong with the patient. The students noticed that the physically lighter patient was getting a higher dose than the heavier patient.

> *"I always check the patients' information carefully before I give medicine to patients. I examined the medicine chart of a patient. I found that the medicine had been stopped two days ago, but it was still being given to the patient."* (Participant 1)

The action of moral courage in this situation was "intervening to prevent further harm to the patients." Her actions demonstrated responsibility for the nursing student's role as it prevented harm to the patient. The action of moral courage was for the benefit of the patient as one participant stated:

> *"I checked the medicine of the patient thoroughly just to make sure. I reported this to my supervisor and the health care team because I could not ignore my concerns...I need to prevent harm of the patient."* (Participant 1)

1.2 Compromised patient safety by self was an error made by the nursing students. This was due to carelessness and lack of experience in caring for the patient. Below is an example where a nursing student gave water to the patient when he was meant to fast for an operation.

> *"The patient was going to receive skin graft surgery. I hadn't noticed that there was a sign on his bed saying "no food or drink." The patient told me he was very thirsty so I gave him some water 30 cc. After that he told me that he forgot that he would have an operation later."* (Participant 2)

The action of moral courage in this situation was "declaring one mistake and notifying health care team to solve the problems" Her actions showed awareness of responsibility for her own mistakes and honesty as one participant stated:

> *"I decided to tell the health care team about my mistake because it was the best way out and the only real solution. I hoped that the health care team would help to remedy my mistake and prevent the patient from being harmed."* (Participant 2)

The second critical incident of moral problem was substandard quality of care. Participants dealed with the moral problem by taking actions with reflected moral courage which included 1) Enhancing quality of care, 2) Taking immediate action to provide standard care, 3) Intervening to prevent further quality of care infringements, and 4) Mentally supporting patients (Table 3).

Table 3 Frequency and percentage of actions of moral courage responding to substandard quality of care (N1=frequency of incidents; N2=persons) (N1=14, N2=10)

Actions of Moral Courage	N_1	%	N_2	%
1. Enhancing quality of care	11	79	6	60
2. Taking immediate action to provide standard care	9	64	6	60
3. Intervening to prevent further quality of care infringements	7	50	4	40
4. Mentally supporting patients	5	36	4	40

The details of critical incident "substandard quality of care" and actions of moral courage are presented as follows:

2. Substandard quality of care made the patients feel insecure about the health care service because they did not receive the appropriate standard quality of care for their needs. It is the responsibility of the health care team to maintain the standard of care for patients. In this situation, the nursing student found that the patient received substandard quality of care as one participant stated:

> *"I was assigned to attend to the severe burns of a male patient. The doctor ordered the use of pethidine before cleaning the wound. I checked the doctor's orders and asked the nurse. She said that she did not need to give him pethidine because he was no longer in pain as he had been in the hospital for many days. The nurse decided to clean the wound and the patient suffered pain."* (Participant 3)

The action of moral courage in this situation was "intervening to prevent further quality of care infringements" which showed awareness of quality of care as immediate action was taken to provide standard care.

> *"I told the nurse that the patient complained that it was impossible to endure the pain during the procedure."* (Participant 3)

The third moral problem was lack of adequate information. Participants responded to the moral problem by taking actions of moral courage which included: 1) Notifying health care team about the patient's needs, 2) Encouraging patients and their relatives to speak up, 3) Acting as mediator between patient and health team by good communication, and 4) Giving adequate information to the patient within the scope of the nursing student's role, (Table 4).

Table 4 Frequency and percentage of actions of moral courage responding to lack of adequate information (N1=frequency of incidents; N2=persons) (N1=12, N2=8)

Actions of Moral Courage	N_1	%	N_2	%
1. Notifying health care team about patient's needs	7	58	7	88
2. Encouraging patients and their relatives to speak up	4	33	4	50
3. Acting as mediator between patient and health team by good communication	3	25	3	38
4. Giving adequate information to patient within the scope of the nursing student's role	3	25	2	25

The details of critical incident "Lack of Adequate Information" and actions of moral courage are presented as follows:

3. Lack of Adequate Information refers to the patient and their family receiving incomplete information. Within health care, lack of communication can create serious problems because patients need to be clear to make decisions to benefit their own care. In the situation below, the nursing students perceived that the patient's relatives were inadequately informed of the patient's symptoms as one participant stated:

> *"The patient came to see the doctor with a wound on his left ankle. He had been treated with antibiotics, but his wound was still*

inflamed. This patient was very worried about his symptoms. The health care team tried to explain the situation to him many times, but he still didn't understand some points. He wanted an explanation from the doctor." (Participant 4)

The action of moral courage was "Notifying health care team about patient's needs and giving adequate information to patient within the scope of the nursing student's role" Which demonstrated moral sensitivity to this problem and attempting to mediate between the patient and the health team about the problem regarding information. An example of participant's experience was as follow:

"I tried to let the doctor know about the patient's concern about his condition and that he needed more information. In addition, I tried to give the patient more information about his symptoms by giving adequate information to the patient within the scope of the nursing student's role, so I did the best I could as a nursing student."

(Participant 4)

The fourth critical incident was Lack of Concern for the Patient's needs. The themes of actions of moral courage were identified as; 1) Responding to the patient's needs in accordance with patient's rights, and 2) Encouraging patients and their family to voice their concerns (Table 5).

Table 5 Frequency and percentage of actions of moral courage responding to lack of concern for the patient's needs (N1=frequency of incidents; N2=persons) (N1=9, N2=6)

Actions of Moral Courage	N_1	%	N_2	%
1. Responding to the patient's needs in accordance with patient's rights	9	100	6	100
2. Encouraging patients and their family to voice their concerns	5	56	5	86

The details of critical incident "Lack of Concern for the Patient's needs" and actions of moral courage are presented as follows:

4. Lack of Concern for the Patient's needs has negative effects in regard to perceived respect. In the example below, the patient did not receive sufficient care for his needs as one participant stated:

"The patient had severe abdominal pain and he was screaming with the pain. I could not stand seeing the patient suffering such pain."

(Participant 5)

The action of moral courage in this situation was "Responding to the patient's needs in accordance with patient's rights." The nursing students showed commitment to her duties by intervening to prevent negative consequences for the patient, as one participant stated:

"*I rushed to tell the nurse that he was in tremendous pain. The nurse came to see the patient and she told the patient to wait for doctor's order. After 15 minutes, I asked the nurse again what medicine we could give the patient to help him feel more comfortable... I maintained my duty to provide care specific to the patient's need because I would rather do something to help him than leave him in severe pain."* (Participant 5)

The last critical incident of moral problem was Privacy and Confidentiality Violation. The themes of actions of moral courage were identified as; 1) Taking action to maintain patient privacy and confidentiality, and 2) Advocating to protect patient privacy and confidentiality (Table 6).

Table 6 Frequency and percentage of actions of moral courage responding to privacy and confidentiality violation (N1= frequency of incidents; N2= persons) (N1=7, N2=5)

Actions of Moral Courage	N_1	%	N_2	%
1. Taking action to maintain patient privacy and confidentiality	5	71	5	100
2. Advocating to protect patient privacy and confidentiality	5	71	5	100

The details of critical incident "Privacy and Confidentiality Violation" and actions of moral courage are presented as follows:

5. Privacy and Confidentiality Violation is a fragile feeling of personal privacy, which is as subtle and powerful as the need for personal dignity. One participant stated:

> *"During the wound being dressed by my friend, I noticed that the son of the patient tried to take photos, including taking a photo of my friend and her name badge. He did that without any permission."* (Participant 6)

The action of moral courage in responding to "Privacy and Confidentiality Violation" was "Advocating to protect patient privacy and confidentiality." She demonstrated awareness of violation of privacy and did not ignore the problem, as one participant stated:

> *"I should let my instructor know about that situation. We then tried to tell the relative that doing such a thing was violating the patient's and the health providers' privacy. My instructor asked him to delete all the photos he took.* (Participant 6)

Discussion

This study reported moral problems faced by nursing students and the actions of moral courage they took in responding to the moral problems in nursing practice. The most frequent moral problem was compromised patient safety; defined as patient care being omitted and having unintended mishaps[18] that involved nursing errors and mistakes. Health care in Thailand and many countries needs to establish quality of care and awareness about compromised patient safety by promoting the importance of patient safety.[19] The most frequent actions the moral courage taken by the nursing students were intervening to prevent harm to the patient and fulfilling their nursing duties so as to maintain patient safety. Their actions of moral courage showed awareness of the ethical principle of beneficence, so they demonstrated their actions for protection and prevention, thus, ensuring patients were safe. According to Beauchamp and Childress[20], beneficence means persons take actions to benefit others and promote the security of others that perform deeds of mercy, kindness, and friendship.[20]

The second most frequent critical situation of moral problem was substandard quality of care, which undermines the credibility of nursing care. The patients felt insecure about nursing care due to mistakes.[21] The action of moral courage demonstrated by nursing students enhanced the quality of care, as

they took immediate action to provide standard care and intervened to prevent further quality of care infringements. In this study, actions of moral courage by nursing students showed consideration of the benefits of patients. Their actions in this study demonstrated awareness of the ethical principle of beneficence.

The third most frequent critical situation of moral problem was lack of adequate information, defined as ineffective information which gave rise to incorrect perceptions.[22] This is particularly true as providing information for patients in critical situations is very important for decision making in their treatment. The reason for this is the patients and their family need to clearly understand information to make important decisions regarding the patient's treatment treament.[23,24] The action of moral courage taken by nursing students was acting as mediator between the patient and the health team to improve communication, and giving adequate information to the patients within the scope of the nursing student's role. Moreover, providing adequate information is related to having a good relationship and cooperating. Therefore, their actions of moral courage in this study follow the ethical principle of autonomy and truth telling.

The fourth critical situation of moral problem was lack of concern for the patients' needs, which is a failure to properly maintain the patient's condition, thus, ignoring the patient's needs.[25] Lack of concern for the patient's needs shows failure of nursing duties that discredits the good image of the nurse professional.[26-28] The actions of moral courage taken by nursing students included their efforts to benefit the patients and awareness of moral duty. Hence, their actions follow the ethical principle of beneficence.

The last critical situation was privacy and confidentiality violation, which constitutes a fundamental aspect of individual freedom and is part of basic respect.[29] Defending the patient's privacy and confidentiality are one of the core duties in the nurse's role and standards of nursing care.[30] Confidentiality is extremely important to patients and has historically been regarded with great respect as it protects the patients' right.

Therefore, actions of moral courage by nursing students in this study demonstrated moral problem solving in nursing practice, which relates to cultivating nursing education in nursing colleges. In nursing education, it is required by the Thailand Nursing and Midwifery Council that nursing school in Thailand must have a cause in ethics. In nursing colleges, nursing students are required to study a course the "Ethics and Law in the Nursing Profession" since the earlier year in the curriculum and then they will be taught ethics throughout the program in theoretical and practicum courses. It was specifically integrated with subjects related to nursing practice such as Nursing of Adult and Elderly Practicum I, II, and III.

Moreover, the "Ethics and Law in the Nursing Profession" course in nursing colleges focuses on distinguishing good and bad actions by following the code of ethics and ethical principles. In practicum courses, nursing students expose situation of ethical dilemmas which require ethical decision making. Nurse educators are expected to be an ethical role model who inspire and support students to perform actions which reflect moral courage when they encounter ethical dilemmas. In addition, ethics education in nursing colleges is continuing to increase the scope of learning activities such as role playing activities, ethical case scenarios, ethics conferences, and ethics rounds. Through case analysis from role playing, ethics rounds, nursing students are cultivated to be moral agents. According to Liaschenko and Elizabeth[31] moral agents tend to perform actions of moral courage when they are faced with difficult situation as ethical dilemmas, and they will continue to take actions

even though their welfare is compromised.

Conclusion and recommendation

This study reported critical incidents of moral problems faced by nursing students and their actions of moral courage. They acted to maintain quality of care and had a strong commitment to take action for the benefit of the patients. Their actions of moral courage followed ethical principles such as beneficence, non-maleficence, autonomy, truth telling, privacy and confidentiality. Therefore, nursing colleges must realize the importance of moral courage and cultivate nursing students to have moral courage in their nursing practice. Innovative Course designs and teaching-learning strategies enhancing moral courage of nursing students are needed.

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