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RESEARCH ARTICLE

A STUDY TO ASSESS THE ETHICAL CHALLENGES FACED BY THE NURSES POSTED IN COVID CARE UNIT IN SELECTED HOSPITAL OF JAMMU AND KASHMIR

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Abstract

Statement of the problem: A Study to assess the Ethical challenges faced by the nurses posted in COVID care unit in selected hospital of Jammu and Kashmir

Background of the study: COVID-19 infection is a novel disease that infects and kills a substantial number of people every day around the world. Corona Virus Disease 2019 (COVID 19) pandemic has provided a significant challenge to global health care systems. Health care providers, particularly nurses, are dedicated to serving society, and the greatest difficulty they face today is curing and caring for COVID 19 patients..

Aim of the study: To assess the ethical challenges faced by the nurses posted in COVID care unit in selected hospital of Jammu and Kashmir

Material and Method: Quantitative research approach and Descriptive research design was used to assess the ethical challenges faced by the nurses working in COVID care unit. Sixty staff nurses who were posted in COVID care unit in DRDO hospital, Jammu and Kashmir were selected using Convenient sampling technique. A Structured rating scale were used to assess the ethical challenges faced by the staff nurses posted at COVID hospital.

Results: The result showed that 7.7% strongly agreed on facing ethical challenges, 44.6% agreed, 32.3% were not sure and 15.4% were somewhat not agreed on facing ethical challenges during duty in COVID care unit.

Conclusion: According to the study's findings, the majority of staff nurses agreed to face ethical concerns while working in the COVID care unit. Staff nurses should be thoroughly trained to reduce or prevent such issues. They should receive backing from management and administration. This study also suggests that staff nurses should seek support from their families, friends, and society.

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Introduction:-

Coronavirus disease (COVID-19) is a virus-borne infection caused by the SARS-CoV-2 virus

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On 12 January 2020, the World Health Organization (WHO) recognized the new virus 2019 novel coronavirus (2019-nCoV) and subsequently formally named this infectious disease coronavirus disease 2019 (COVID-19) on 12 February 2020. Based on phylogeny, taxonomy, and established procedure, the International Committee on Taxonomy of Viruses (ICTV) formally classified the virus as SARS-CoV-2.¹

In the midst of the pandemic, health practitioners were challenged to use the four basic principles of biomedical ethics in caring for their patients: autonomy, justice, beneficence, and nonmaleficence. For example, health personnel who were assigned to duty without personal protective equipment were putting themselves, their families, and other clients at risk of infection. As a result, it breaches the "no harm to others" or "non-maleficence" ethical principle.²

Nurses are among the frontline health workers in the health care system, particularly when it comes to caring for COVID-19 patients. They were also heavily involved in hospital leadership and management tasks, such as organizing hospital resources in response to the epidemic. As a result, it is understandable that they face several ethical dilemmas and difficulties, especially given the pressures of their workloads. According to Turale et al, in practice, nurses have confronted distasteful and complex ethical difficulties, including moral conflicts, a high rate of patient deaths, and lengthy working hours.³

Need Of The Study

COVID-19 has had an impact on the lives and health of over one million people worldwide. This overwhelms many countries' healthcare systems and, of course, has an impact on healthcare personnel like nurses who are fighting on the frontlines to save the lives of everyone affected. Investigating the challenges that nurses confront during their combat will aid in their assistance as well as the development of guidelines and plans to increase their preparedness.⁴

According to WHO COVID-19 statistical data⁴ on 27th September 2021 total cumulative cases were 33,713,819 and total cumulative deaths were 448,817. According to recent data (updated on 10th June 2022) the global statistical data and data of India regarding COVID-19 is shown in Table no. 2

Table No. 1:-

Date	Name	Cases- cumulative total	Cases - newly reported in last 7 days	Deaths - cumulative total	Deaths - newly reported in last 7 days	Total vaccine doses administered per 100 population	Persons fully vaccinated with last dose of primary series per 100 population	Persons Boosted per 100 population
12/06/22	Global	532,201,219	3,267,537	6,305,358	8,893	152.09	61.45	24
12/06/22	India	4,205,105	36,521	524,747	96	142.2	64.91	4.02

According to data given in Table-1 Globally, as of 5:19pm CEST (Central European Summer Time), 13 June 2022, there have been 532,887,351 confirmed cases of COVID-19, including 6,307,021 deaths, reported to WHO.⁵

In May 2021, Gdiom Gebreheat and Hirut Teame conducted a study to determine the major ethical problems experienced by nurses during the COVID-19 epidemic. An integrative review strategy was used. The Preferred Reporting Items of Systematic Reviews and Meta-Analysis Protocols led this integrative review. The Preferred Reporting Items of Systematic Reviews and Meta-Analysis Protocols (PRISMA-P) checklist standards were

followed for this investigation. The JBI quality appraisal checklists for analytical cross-sectional studies, the JBI quality appraisal checklists for text and opinion publications, and the JBI quality appraisal checklists for qualitative research were used to assess the methodological quality of the included articles. The study concluded that 8 articles reflected on the ethical problems that nurses faced during the COVID-19 pandemic. Following a thorough reading and conceptual understanding of the papers included in the review, a content analysis was performed to determine the ethical problems faced by nurses during the epidemic. As a result, nurses' ethical difficulties were divided into three categories: nurses' safety, role and moral anguish, resource allocation, and the nurse-client connection⁶

During the epidemic, health care personnel serve as front-line heroes, but they face challenges from society and families because everyone believes they are carriers of the disease. Because of the fear of infection, such an adverse circumstance can lead to inappropriate social conduct, social loneliness, social isolation, anxiety, dread, melancholy, anger, irritation, and low self-esteem at work..

Hence, Researcher felt need to conduct the study on social and ethical challenges faced by staff nurses posted in COVID care unit.

Objectives:-

1. To assess the ethical challenges faced by the nurses posted in COVID care unit.
2. To find out the association between ethical challenges faced by the nurses posted in COVID care unit with their socio demographic variables.

Research Methodology:-

Descriptive research design was used to assess the ethical challenges faced by the nurses working in COVID care unit. The sample size for this study was 60 staff nurses who were posted in COVID care unit and they selected by using Convenient sampling technique. . The accessible population was staff nurses posted at COVID care units. The sample size for this study was 60 staff nurses who were posted in COVID care unit.

Development And Description Of The Tools

Section A- Demographic data to assess the demographic characteristics of staff nurses who were posted in COVID care unit.

Section B- Structured rating scale to assess ethical challenges faced by staff nurses during posting in COVID care unit.

Results:-

Section-A

Table no 2 includes 7 socio demographic variables that is age, gender, education Qualification, marital status, number of children, type of family, period of working with COVID patients. This also includes frequency distribution and percentage related of staff nurses in COVID care unit.

Table No. 2:-

n = 60

SECTION-A socio demographic data		Percentage(%)	Frequency(f)
Age	20-30 years	77%	46
	31-40 years	23%	14
Gender	Male	10%	6
	Female	90%	54
Educational Qualification	GNM	23%	14
	Post basic Nursing	27%	16
	B.Sc. Nursing	50%	30
Marital Status	Married	35%	21
	Single	65%	39
Number of children If Married	Nil	82%	49
	1 child	8%	5
	2 children	10%	6
Type of Family	Nuclear	94%	56
	Joint	6%	4

Period of working in COVID area	1-5 months	3%	2
	6-10 months	10%	6
	11-15 months	12%	7
	More than 16 months	75%	45

Table 2:- Frequency and percentage distribution of the staff nurses.

This table deals with the findings related to the association between ethical challenges score and selected demographic variables.

Table 3

(n=60)

Demographic Variables		Levels (n=60)				ASSOCIATION WITH SOCIAL SCORE			
Variable	Opts	Disagree	Neutral	Agree	Strongly Agree	Chi Test	P Value	df	Result
Age	20-30 years	6	14	23	3	1.66	0.64	3	Not Significant
	31-40 years	3	2	8	1				
Gender	Male	1	1	4	0	0.65	0.88	3	Not Significant
	Female	7	12	31	4				
Educational Qualification	GNM	2	2	7	3	4.54	0.60	6	Not Significant
	Post basic Nursing	3	2	10	1				
	B.Sc. Nursing	3	8	17	2				
Marital Status	Married	3	4	10	4	3.875	0.60	3	Not Significant
	Single	5	7	24	3				
Number of children If Married,	Nil	4	11	31	3	6.06	0.41	6	Not Significant
	1 child	1	2	1	1				
	2 children	1	0	4	1				
Type of Family	Nuclear	7	16	28	5	3.05	0.38	3	Not Significant
	Joint	0	0	3	1				
Period of working in COVID areas	1-5 months	0	0	2	0	4.14	0.901	9	Not Significant
	6-10 months	1	1	3	1				
	11-15 months	1	3	2	1				
	More than 16 months	6	15	20	4				

Data in table 3 shows that there was no significance association between the level of ethical scores and other demographic variables

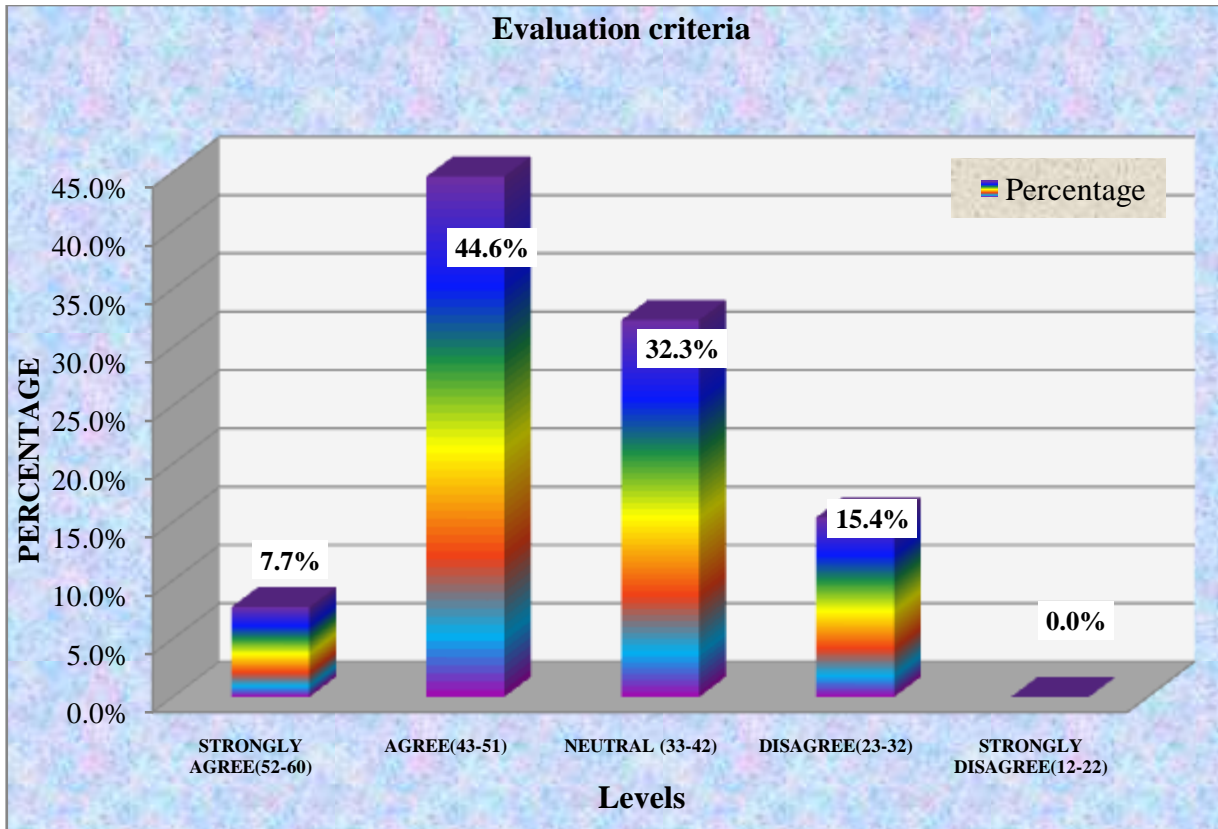


Figure No. 1:- Bar diagram showing Level of Scores on facing ethical challenges during duty in COVID care unit. According to this data 7.7% staff nurses have strongly agreed on facing ethical challenges, 44.6% agreed, 32.3% were not sure and 15.4% disagreed on facing ethical challenges during duty in COVID care unit.

In present study data shows that, 7.7% staff nurses have strongly agreed on facing ethical challenges, 44.6% agreed, 32.3% were not sure and 15.4% disagreed on facing ethical challenges during duty in COVID care unit.

Ana Luiza Ferreira Aydogdu (2022) did an integrative analysis of qualitative research to uncover ethical quandaries encountered by nurses while caring for patients during the COVID-19 pandemic. The ethical quandaries that nurses face are mostly the result of a lack of Protective Personal Equipment (PPE), limitations of medical supplies and staff, and the uncertainties that pervade an environment threatened by a novel and highly contagious disease such as COVID-19. So, this review includes information that can motivate nurse managers working during the COVID-19 pandemic to support and empower nurses to act ethically, which is critical in order for nurses to safeguard themselves while providing efficient and effective care.

As a result, the studies reveal that nurses encountered ethical concerns while working in COVID. ⁷

Implications

Implications For Nursing Practice:-

Nurses should be informed and educated before dealing with COVID patients.

To address the ethical concerns of nurses, hospitals should establish a grievance committee.

Implications For Nursing Administration:-

Higher authorities should organize ongoing nursing education/workshops on pandemic safety measures and management.

Nurse administration should schedule meditation and yoga classes to help nurses cope with anxiety and stress.

Implications For Nursing Research:-

More researches can be done to find out the issues faced by the nurses during pandemic.

Implications For Nursing Education:-

Nurses should be knowledgeable about safety precautions. Nurses should understand their own rights and responsibilities.

The training director should teach the nurses how to overcome tension and anxiety when entering a stressful environment.

Recommendation:-

Based on the study's findings, the following recommendations for future research are made.

A similar study might be carried out on a larger population.

A research can be undertaken to determine the physical and mental concerns that nurses faced throughout the pandemic.

A comparative study between two diverse locations can be undertaken to enhance more favorable and improving results.

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