

Effectiveness of an Instructional Program on Nurses-Midwives' Practices about Application of Ethical Rules at the Delivery Room

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ABSTRACT

Background: Nurse midwives are often expected to make ethical decisions in the context of their professional practice, which can lead to ethical confrontations, some of which may lead to ethical dilemmas. The nurses and midwives in the delivery room must keep ethical considerations in mind while caring for a woman in labor so that correct judgments can be made. As a result, the current study emphasized raising ethical efficacy by creating scenarios that simulate the reality of working in the field of reproductive health in order to prepare nurse-midwives who comply with ethical rules during professional practice.

Purpose: The main aim of this study is examining how an instructional nursing professional ethics-focused program may affect practice among nurses- midwives in the delivery room.

Methods: The quiz experimental design (one-group pretest–posttest design) was used. The purposive non-probability sample consisted of 50 nurse-midwives who worked during the data collection phase in the delivery room. Data collection began in May 2021 - June 2022, using a tool that contains 20 case-scenario that simulate the reality of reproductive care and clinical practice of nurses and midwives regarding professional ethical issues

Results: The findings revealed that instructional intervention had a positive impact on nurses - midwife's ethical performance in terms of following professional ethics rules

Conclusion: The use of the case-scenario based simulation approach to teach professional nursing ethics contributed to improving compliance with the ethical rules for nurses-midwives working in the delivery room

Keywords: Ethical Rules, Instructional Program, Delivery Room, Nurses-midwives, Practices

INTRODUCTION

Ethics are all the principles and values that guide an individual's behavior to be acceptable. Professional ethics are very important especially in the field of healthcare because of its direct impact on patients' well-being (Turkan Karaca et al., 2018). Nurses may face many challenges in the nursing practice environment, which is often complex, affecting their professional performance. Therefore it has become imperative to apply ethical rules more than ever before (Khandan et al., 2015). The current study adopted the preparation of a professional ethical program to increase the professional ethical efficiency among nurses and midwives working in the delivery room in order to provide the best services in the field of reproductive health

One of the most important aspects of providing quality care to patients is practicing according to nursing code of ethics (Jasemie et al, 2020). In a woman's life, delivery is one of the most critical phases, affecting her physical, psychological, mental, social, spiritual, and emotional facets her life. A key component of providing humanistic, competent, and ethical care, health workers must respect the Bill of Rights of pregnant women (Mirlahi et al, 2015). Therefore, more concerted efforts are required to achieve high- quality maternal healthcare ensuring better outcome (Ameyaw et al, 2020)

Midwifery is an old health care branch aiming for assisting and caring for women and their families. Women's essential needs are met by midwives, who protect and work diligently to improve the health of the mother, child, and society (Riahipour et al, 2020). Midwives should serve their clients based professional ethics principles and values that reflect their professional dedication to the community, when providing a wide range of reproductive health services (Nasiriani et al, 2018). The promotion of professional values is a critical component of the development of the nursing profession, and therefore any practice that violets the professional commitment and ethics may jeopardize the quality of the nursing service (Tayebi e tal, 2019). Nursing ethics is crucial, as it is linked to clinical care, quality, and nursing competence (Gholamhosseini et al 2015; Hassan et al, 2019; AL-Fayyadh, 2020)

Nurses, as nursing care providers, have tremendous potential to assure and preserve population health; but, in order to maximize the quality and effectiveness of this potential, they must

understand, develop, and instill professional ethical values. These factors have an immediate impact on professional decisions, actions, and behavior. As a result, they serve as the bedrock for providing high-quality, ethical nursing care (Jahromi et al, 2018). Ethical concerns in nursing are not only related to providing direct care to patients and the likelihood of ethical dilemmas, but health institutions must also provide educational programs on professional ethics guidelines to educate health care practitioners with how to deal with these dilemmas (Toumová et al, 2021)

During their professional practice, education and training of healthcare providers within their organizations plays an important role in increasing their ethical awareness. Ethics focused education is a process that allows health care professionals to visualize the importance of ethical ideals in their interactions with the people they serve, their communities, colleagues, and other health care professions. Understanding these principles is an integral foundation of their competent professional identity (Baykara et al, 2015; Zakaria et al, 2016)

Several efforts have been made in Iraq to develop a code of professional conduct for nurses and midwives, focusing on Islamic principles and incorporating them into these rules. It was established in 2009 by national committees of health care professionals and academics, with the aim of improving the quality of nursing care. However, no previous studies have focused on examining nurse's practices in light of national code of professional ethics. Therefore, the aim of this study was to find out the effect of using the case-scenario based simulation approach to teach professional nursing ethics on the practices of nurse midwives when facing ethical dilemmas in the delivery room. Finally, the following were the primary research questions that the study was created to answer: What is the nurses-midwives' performance level regarding the professional ethics? What is the influence of a professional nursing ethics instructional program on nurses – midwives ethical practice?

MATERIAL AND METHODS

Research design: Quiz experimental design (one-group pretest–posttest design) According to Polit and Beck, a quasi-experimental design is one that includes interference but lacks randomness which is a true empirical sign as well as lacking a control group. One of the strengths of this design is that it is feasible in clinical

settings in which it is impossible to conduct real experimental tests of nursing interventions. On the other hand, the weaknesses of this design are that conclusions depend on human judgment rather than the adoption of more objective criteria, the conclusions of cause and effect are less convincing. (Polit & Beck, 2017)

Setting and samples: The study was conducted in Obstetrics, Gynecology and Children Hospital, starting at May 2021 through June 2022. The selection criterion of the purposive sample was based on: inviting all nurses-midwives who were working in the delivery room and from whom verbal consent was obtained after informing them of the nature and purposes of the study. While the exclusion criteria included nurses-midwives who do not know how to read and write the Arabic language well, since the questionnaire tool is in Arabic, in addition to the participants in a previous training course on professional ethics. The number of participants reached 50 nurse-midwife

Instrument and data collection: The questionnaire was divided into two main sections. The first section included questions about the demographic characteristics of the study participants including: age, educational level, number of years of experience. The second section included 20 multiple-choice questions in the form of case-scenario based simulation that simulate the most important ethical issues and dilemmas that nurses and midwives may face in the delivery room (Ketefian, 1982, Vera, 2019). The method of lecture, group discussion and role-playing was adopted to deliver the information regarding the ethical program. Researchers created this section to assess nurse-midwives' practices in light of professional code of ethics in nursing. Scoring system for questionnaire used 0 for the wrong answer and 1 for the correct answer. After that, practice was classified into two categories, poor practice ($\leq 75\%$) and good practice ($>75\%$). The Pearson correlation coefficient was used to measure the reliability of the tool. The results of this calculation indicate that the correlation coefficient is acceptable (0.804). The validity of the questionnaire was tested by presenting it to 10 experts in the field of health and education. A score of 1 was given to the paragraph that is related to the observed phenomenon or closely related to the phenomenon, and 0 was given to the paragraph that is not related to the phenomenon or the paragraph is somewhat related. Also, consideration was given to modifying some elements according to the expert's recommendations. The Content Validity Index was 0.97, indicating an excellent level of validity

Data analysis: Data were tabulated and analyzed using the IBM-Statistical Package for the Social Sciences (SPSS), version 21.0. The following steps have been performed. First, the frequency (n) and percentage (%) were calculated to show the demographic characteristics of the study subjects. Later, mean, standard deviation of the comparison of ethical compliance score and extent

of the program's effects on the nurses-midwives' practices. A t-test was used to test for the differences between the pre- and post-test, and differences were considered statistically significant at P values of 0.05. The one-way ANOVA analysis was also used to find out the significance of the statistical differences between the variables of the current study.

Ethical consideration: The study proposal was approved by the Research Ethics Committee of the College of Nursing, University of Baghdad. The data was kept confidential in a password-protected file containing all data obtained during the study. All participants provided their oral consent after being told that participation was optional and that they had the right to read the study protocol and to discuss the benefits and risks of participation with the researchers. The study was registered in the Iranian Register of Clinical Trials under reference IRCT20220104053627N1.

RESULTS

Characteristics of the respondents

Table 1 provides an overview of participants' characteristics; the underlined numbers represent the highest percentages of the selected variables. Whereas the highest percentage was (46%) representing the age group 21-25 years. The same percentage of (46%) for the educational level was High school of midwifery. With regard to years of experience in the delivery room, the highest percentage was (38%) for those who had more than or equal 3 years of experience.

Table 1: distribution of the study sample according to the demographic characteristics (n=50).

Age group	No	%
21-25 years	23	46
26-30 years	9	18
31-35 years	8	16
36-40 years	5	10
41-45 years	5	10
Total	50	100
Educational level	No	%
High school of midwifery	23	46
High school of nursing	6	12
Nursing Institute	4	8
Midwifery Institute	5	10
Bachelor of Science in Nursing (BSN)	12	24
Total	50	100
Experience years	No	%
<1 year	15	30
1-2 years	16	32
>3 years	19	38
Total	50	100

Table 2: Comparison of nurse-midwives' compliance with professional ethics in delivery rooms pre and post the educational program.

items	Pre test						Post test					
	Correct	wrong	Mean	SD	%	Level	Correct	Wrong	mean	SD	%	Level
scenario1	20	30	1.4	0.49	70	p	40	10	1.8	0.4	90	G
scenario2	18	32	1.36	0.48	68	p	42	8	1.84	0.37	92	G
scenario3	17	33	1.34	0.47	67	p	41	9	1.82	0.38	91	G
scenario4	19	31	1.38	0.49	69	p	43	7	1.86	0.35	93	G
scenario5	21	29	1.42	0.49	71	p	41	9	1.82	0.38	91	G
scenario6	21	29	1.42	0.49	71	p	40	10	1.8	0.4	90	G
scenario7	18	32	1.36	0.48	68	p	41	9	1.82	0.38	91	G
scenario8	17	33	1.34	0.47	67	p	40	10	1.8	0.4	90	G
scenario9	20	30	1.4	0.49	70	p	39	11	1.78	0.41	89	G
scenario10	18	32	1.36	0.48	68	p	42	8	1.84	0.37	92	G
scenario11	22	28	1.44	0.5	72	p	41	9	1.82	0.38	91	G
scenario12	19	31	1.38	0.49	69	p	43	7	1.86	0.35	93	G
scenario13	20	30	1.4	0.49	70	p	40	10	1.8	0.4	90	G
scenario14	19	31	1.38	0.49	69	p	42	8	1.84	0.37	92	G
scenario15	20	30	1.4	0.49	70	p	39	11	1.78	0.41	89	G
scenario16	18	32	1.36	0.48	68	p	40	10	1.8	0.4	90	G
scenario17	21	29	1.42	0.49	71	p	41	9	1.82	0.38	90	G
scenario18	17	33	1.34	0.47	67	p	40	10	1.8	0.4	90	G
scenario19	19	31	1.38	0.49	69	p	44	6	1.88	0.32	94	G
scenario20	18	32	1.36	0.48	68	p	40	10	1.8	0.4	90	G

etal., 2017). This model confirms that listening and expressing opinion during the discussions would increase the professional ethical competence that is the basis of health practice. Because a midwife's skillsets are dependent not only on her skills in conducting professional tasks, but also on her commitment to professionalism, it is apparent that reaching the basic aims of this profession necessitates a commitment to professional ethics (Khakbazan et al., 2019)

Finally, with regard to the socio-demographic variables of the participants, the results of the statistical analysis in table 4 that when a one-way ANOVA test was applied showed the existence of a statistically significant difference between nurses practice, and age group, educational level and years of experience in the delivery room, where the value of F calculated appeared greater than the tabular F after the completion of the instructional program. In a study by Mohamed and Mohamed (2020); Momennasab et al., (2021) they found statistically significant differences at $p < 0.0001$ in the level of nursing practice issues related to ethical care and educational level, while they did not find any statistically significant differences with the age group and years of experience. In this context, Ulrich et al., (2014) found statistically significant differences with regard to ethical issues, with age of participants, and years of experience. While Hafez et al., (2016); Mai et al., (2012) confirmed that there is no statistical relationship between the degree of practice and the demographic characteristics of the participants

In a conclusion to a study conducted by Chopra et al., (2013), they stated that the knowledge gap in the instructions of the ethical code leads to the commission of unethical practices during the provision of health care, so professional ethics education can help to bridge this gap, especially if education is combined with professional practice in the workplace such as holding conferences or workshops. Therefore, this study focused on educating nurses-midwives about the importance of ethical principles to be followed in their daily practices to be a guide in guiding them towards ethical practice that avoids legal litigation.

Since maternity nurses are in responsibility of providing a wide range of health services, including mother and newborn care, counseling, family planning, and gynecologic problem management, they must adhere to their legal and ethical commitments (Yousefzadeh, et al., 2017). Therefore, the current study proceeded to support and empower nurses-midwives by developing several scenarios that simulate the reality of reproductive care, as well as preparing an instructional program for ethical rules to guide them towards the correct ethical practice to be followed

From the foregoing, the results of the study showed the positive impact of the ethical program by enabling the nurses-midwives to deal with ethical issues, through the results of table 3 it was found that there was a statistically significant difference $p < 0.000$ regarding ethical practice pre and post conducting the program

Implications and limitations: This study provides evidence for the use of a professional ethical intervention to support the educational methods of nurses-midwives working in the delivery room in order to increase professionalism in dealing with ethical issues during clinical practice, which are frequently related to autonomy, fidelity, utility, reliability, and honesty. However, some limitations are understandable, this study did not use the randomization methods to recruit participants and had a small sample size limited to one specialty hospital. Despite these limitations, the study's findings offer insight into how the scenario approach might be used to assist and empower nurse-midwives in dealing with ethical issues

CONCLUSION

In light of the results, the study concluded that the nurses-midwives working in the delivery room at the Obstetrics, Gynecology and Children Hospital have unsatisfactory practice of professional ethics as shown by the results of Table 2. The

practice of nurses-midwives was influenced by age group, educational level as well as years of experience. Based on the results of the current study, the study recommends conducting similar workshops involving a number of local and regional hospitals with the aim of exchanging experiences and improving professional competence Also design and implement a special protocol for nurse-midwives working in the delivery room to enable them to confront and deal with ethical issues related to reproductive care.

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Conflict of Interest: None

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