

ETHICAL ISSUE AND NURSING STRATEGIES FOR ACHIEVING PROFESSIONAL STANDARDS IN NURSING EDUCATION

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Abstract

Background: This paper aimed at presenting in-depth information on strategies of implementing ethical decision making in nursing practice and education in the contemporary society. The complex issues in nursing education and practice have ethical implications for the attainment of professional standard. The ability of nurses to engage in ethical practice in everyday work and to deal with ethical situations, problems and concerns could be the result of decisions made at a variety of levels. Sometimes, nurses find themselves trapped in an ethical dilemma and caught between conflicting duties and responsibilities. Ethical-dilemmas require ethical-reasoning and decision -making, which is a skill that could be learned. However, many nurses are ill prepared both in knowledge and in skill to live up to expectations in such circumstances.

Conclusion: To achieve professional standard, nurses should ensure acquisition of adequate and relevant knowledge in ethics and ethical decision-making models and promote dialogue on ethical issues in health and educational institutions. Furthermore, advocacy is needed for the elimination of quackery in nursing practice to promote safe, competent and ethical care and practicing nurses should increasingly acquire new knowledge and skills in their areas of practice. Additionally, clients care should continually receive impetus from relevant research findings.

KEYWORDS: Decision-making; Dilemmas; Ethical-problems; Ethical-reasoning, Nursing-ethics; Nursing-education; Rights.

INTRODUCTION

Nursing in the contemporary society

The nursing profession uses regulatory mechanisms, code of ethics and ethical principles to ensure ethical behaviour among the practitioners. The Nigerian nurses, just like their counterparts globally operate under the tenets of the International Council of Nurses' (ICN) code of ethics. To achieve professional standard, nurses have four fundamental ethical responsibilities, which include promoting health, preventing illness, restoring health and alleviating suffering. These roles are all embedded in the all-embracing definition of nursing as provided by the International Council of Nurses (ICN), (2007):

Nursing encompasses autonomous and collaborative care of individuals of all ages, families, groups and communities, "sick or well and in all settings. Nursing includes the promotion of health, prevention of illness, and the care of ill, disabled and dying people. Advocacy, promotion of a safe environment, research, particularly in shaping health policies and in patients and health systems management and education are also key nursing roles".

It is important to state that the ICN is the worldwide voice of Nursing. Nigeria has similarly adopted and endorsed the ICN regulatory role through the code of ethics as it affects the nursing profession (NANNM, 2007). Thus, the ICN code of ethics continues to serve in lieu of national codes and as an international reference for regulating nursing practice to enhance professional standard.

Although the ICN definition of Nursing is mostly focused on the roles of nursing, it directs attention to several issues. In the first instance, nursing practice is carried out both at the independent level and as teamwork in

collaboration with other relevant professionals within and outside the health care sector. Secondly, nursing should provide care to must be directed at every individual, irrespective of age, family background, the groups to which they belong as well as their communities. Thirdly, nursing is not expected to focus on episodic care being provided only during the period of sickness. The ICN definition directs attention to the provision of nursing care to all individuals, whether sick or well in accordance with identified areas of needs. With the fourth dimension, nursing practice is required in all settings, both within and outside the health institutions. In the final analysis, the definition communicates the all-embracing and wider scope of nursing roles in the contemporary society. All these have implications for ethical consideration if professional standards must be achieved and sustained.

Furthermore, advances in medicine and the emergence of new infectious diseases including HIV/AIDS has created serious clinical and public health challenges and dilemmas, especially with the issue of confidentiality. These challenges reinforce more than ever before the need for moral judgment in decision-making for the achievement of professional standards in Nursing education and practice. With the increasing population in the sub-Saharan Africa including Nigeria, and the low economic trend, the demand for health services has far exceeded supply especially among the less privileged members of the society. While these issues continue to attract public attention, they also present nurses and other health care providers with real ethical dilemmas in their professional practice and responsibilities.

This paper highlights nursing in the contemporary society, the concepts and principles of ethics as they relate to nursing, some ethical dilemmas in nursing education and research and also reviews the problems of implementing ethical obligations. Approaches to ethical reasoning are also provided, with possible challenges which could be encountered with the approaches. Thereafter, steps in ethical decision-making process will be highlighted and suggestions provided on the way forward.

Ethical concepts, principles and rights, and some related ethical dilemmas

According to Anarado (2002), ethics deal with the science of morality. Every profession is guided by its code of ethics. A prominent code of ethics in the health care sector is the universal code of ethics. This ethical component is very vital and places emphasis on respect for life, altruism or concern for the welfare and well-being of others by making the good of the patient the primary concern. Furthermore, the universal code of ethics directs attention to the practitioner's integrity of acting in accordance with appropriate code of ethics and accepted standard of practice; always doing good (beneficence) and no harm (non-maleficence); maintaining confidentiality and ensuring justice for health care consumers. Additionally, safe, competent and ethical care emphasizes the need to cooperate with colleagues for the benefit of the client and as well as the need to protect a client when his/her life is endangered by a co-worker or any other person.

The code of nursing ethics sets out the ethical behavior expected of all registered nurses and provides guidance for decision-making concerning ethical matters. It serves as a means for self-evaluation and self reflection in respect to ethical nursing practice, providing a basis for feedback.. The code identifies what nurses must know about their ethical responsibilities, informs other health care professionals and members of the public about the ethical commitments of nurses and upholds nursing as a self-regulating profession. According to Canadian Nurses Association (2002), nursing code of ethics serves as a basis from which to advocate for quality practice environments with the potential to impact the delivery of safe, competent and ethical nursing care. According to the Association, ethical practice is influenced by decisions made at the individual, organizational, regional, national and international levels. In all the levels of decision-making, the ethical code offers guidance for providing care that is congruent with ethical practice.

In their practice, nurses constantly face situations involving ethics. Such situations are addressed in the nursing profession through the use of regulatory mechanisms including the code of ethics. Inherent in nursing is respect for human rights including the right to life, confidentiality, to dignity and to be treated with respect (ICN, 2000). Furthermore, the ICN code of ethics for nurses (2000) affirms that nurses have four fundamental responsibilities, which include promoting health, preventing illness, restoring health and alleviating suffering. Sometimes, nurses are trapped in an ethical dilemma, caught between conflicting duties and responsibilities to clients, employers and to themselves. Ethical dilemmas require an individual to make a choice between two equally unfavorable alternatives. The performance of the four responsibilities identified in the ICN code of

ethics need to be done based on ethical principles. For instance, the Canadian Nurses Association (2002) identified eight primary principles that are central to ethical nursing practice. These include:

Principles of safe, competent and ethical care/ quality of practice environment

These two principles are interrelated. The principles hold that nurses must provide safe, competent and ethical care that allow them to fulfill their ethical and professional obligations to the people they serve. For instance, a dilemma could ensue where a nurse believes that another staff member's actions have compromised patient's safety. The competing loyalty between a patient and a nurse colleague/physician, or a potential nursing student in the case of school admission and the nurse's employer with vested interest in the students' admission could pose as ethical dilemma confronting a nurse practitioner or educator. In this dimension also, ethical dilemma ensues when the much needed resources for protecting and sustaining health and well-being, or providing safe, competent and ethical care is completely lacking. In this category also, is the problem of teaching nursing students without the necessary materials required for such teaching especially when appropriate use of such materials are part of what is needed for safe, competent and ethical care. Another source of dilemma is the increasing use of low quality materials in health care delivery. It could be noted that in providing quality of practice environment, nurses are expected to maximize benefits to clients and ensure freedom from harm.

Attention to health and well being

Nurses must promote health and well being by assisting people to achieve their optimum level of health in situations of normal health, illness, injury, and disability or at the end of life. In health promotion, an example of a dilemma is in respect to providing information on artificial but more effective contraceptive methods to an unhealthy looking multi-parous woman whose religious beliefs disapprove their use.

Principle of choice or autonomy

Nurses are expected to respect and promote the autonomy of persons and help them to express their health needs and values, and to obtain the desired information and services so that they could make informed decisions. On the other hand, autonomy is not absolute. The Canadian Nurses Association (2002) noted that under certain conditions, limitations could be imposed on clients' autonomy. For instance, the patient has the right to refuse treatment EXCEPT in cases such as tuberculosis or other contagious diseases where there is the risk of infecting others. On the other hand, ethical dilemma occurs when health care professionals, patients or family members disagree over what course of action is in the patient's best interest.

Secondly, there could be difficulty in choosing the course of action that could maximize patient's right of self-determination especially when someone other than the patient must determine what's best for him or when the patient himself has refused what is best for him. Additionally, the nurse faces a dilemma in providing appropriate counseling regarding the choice of induced abortion as the method of birth control by a patient who expresses her autonomy or right to choose but such a right is in conflict with the right to life of the fetus or unborn child.

Principle of dignity

Nurses are expected to recognize and respect the inherent worth of each person and advocate for respectful treatment of all persons. A dilemma ensues where a nurse should act or refuse to act to defend herself in the face of aggression.

Principle of confidentiality

This expresses the need to safeguard information obtained in the context of a professional relationship to ensure that such information is shared outside the health care team only with the person's informed consent, or as may be legally required, or where the failure to disclose would cause significant harm. For instance, a nurse who is aware of a man who refuses to tell his partner of his HIV-positive status faces an ethical dilemma, as disclosing this information without his approval could constitute a breach of confidentiality. On the other hand, failure to disclose that information (individuals have right to information to make informed decisions) could lead to HIV infection of the partner, thus breaking the obligation of justice (to be fair to all).

Principle of justice

Nurses uphold principles of equity and fairness to assist persons in receiving a share of health services and resources proportionate to their needs and in promoting social justice.

Principles of accountability and obligation

Nurses are answerable for their practice, and they must act in a manner consistent with their professional responsibilities and standards of practice. This principle expresses the notion of doing good (beneficence) and no harm (non-maleficence) to clients under their care. Also included is the expression of standard of best interest. According to American Nurses Association (2007) this is particularly important when a client is unable to make an informed decision. The nurse in such a case, with the family, take decisions and carry out actions that she could personally account for, based on the principle of beneficence and non-maleficence. An extension of the principle of non-maleficence also requires that health care providers protect those who cannot protect themselves from harm (children, mentally incompetent, unconscious patients). Obligation is the principle, which places demands on individuals, a society or a profession to fulfill and honor the rights of others. Such obligations could be legal involving formal statements of law that are enforceable under law, or based on moral or ethical principles, which are not enforceable under law, for instance assisting accident victims on the road.

The principle of obligation demands fulfillment and honoring the rights of others. In relation to the principle of obligation, nurses often suffer from “dual loyalty complex” resulting from problematic ethical and human rights issues. This might arise from competing loyalties between the interests of patients and physicians as well as employers.

Furthermore, the debate around “not for resuscitation orders” continues to attract attention. Many argue that it should be permissible on grounds of the ethical principle of autonomy (Sullivan, 2001) while others see it as being incompatible with the principles of safe and accountable care with attention to non-maleficence. Zimelman and White (1999) argued that such action is incompatible with the fundamental role of a health care provider, especially the nurse.

The principle of truthfulness

In respect to truthfulness, the nurse is not expected to lie, mislead or deceive intentionally. In other words, she must “tell the truth”. In American Nurses Association’s (2007) estimation, limitations however exist. For instance, if telling a patient the truth would seriously harm (non-maleficence), such as hindering the patient’s ability to recover or would produce greater illness, then such truth telling could be with-held until a more convenient time.

RIGHTS

This involves obligations owed to an individual according to just claims, legal guarantees or moral and ethical principles. Three types of rights exist, identified as welfare rights, ethical rights and option rights (American Nurses Association, 2007). Welfare rights are the legal rights guaranteed by law such as those included in the constitution (e.g. right to life). Violation is punishable under law. Ethical rights are based on moral or ethical principles. They do not usually require power of law to be enforced. Option rights are based on fundamental beliefs in dignity and freedom of humans. These are basic human rights. They give individuals freedom of choice, but within boundaries..

Ethics provide a systematic, rational way to work through dilemmas and to determine the best course of action in the face of conflicting choices. Thus, whether legal, ethical, or option rights, the nurse has an obligation to respect such rights so as to enhance quality care to clients under her care. The aforementioned ethical principles and rights are all embedded in the four elements of the ethical code provided by ICN (2006). The elements alienate the relationships between nurses and people, nurses and practice, nurses and the profession and nurses and co-workers.

In furtherance to the need for quality care that meets professional standard, the ICN (2007) and NANNM (2007) have both separately submitted that in other for ethical code to be meaningful as a living document it must be applied to the realities of nursing and health care and in accordance with the needs of the changing society.

Ethics in nursing education and research

Code of ethics also exists to protect subjects used in research. All the ethical principles are also valid in relation to nursing education and research. The ethical code is aimed at protecting the rights of individuals used for a research. The primary factors involved in such protection consist of:

- Voluntary and informed consent on the part of the participants.
- Confidentiality of the collected data
- Protection of the individual from harm but promoting benefits
- Respect for human dignity
 - Right to self determinism
 - Right to full disclosure.

With respect to human dignity, an ethical dilemma could arise if full disclosure, for instance during research might result in inaccurate information and result. Researchers who feel that full disclosure is incompatible with the aims of their research sometimes use two techniques. These include concealment and deception. The practice of concealment or deception is problematic from ethical point of view since they interfere with the participants' rights to informed consent. Standhope and Lancaster (1996) opined that concealment or deception could be acceptable where there is no risk and the participants' right to privacy has not been violated. Furthermore, the American Psychology Association's (1982) code of ethics provided specific guidelines to cover instances when the use of deception or concealment could be permitted. In such a case, the researcher is to first determine if the use of such technique (deception or concealment) is justified by scientific, education and practical values of the research. Secondly, there must be due consideration as to whether any alternative procedure exist that do not use concealment and thereafter ensure that the participants are given appropriate explanation as soon as possible.

- The right to fair treatment and of privacy:

This involves ethical considerations during project design; subject recruitment; research procedure; presentation of research results and implementation of research findings to actual life situations. In respecting the various ethical codes, nurse educators and researchers involved with human participants' just like nurse clinicians are sometimes faced with ethical dilemmas. Although they have the need to advance knowledge using the best research method available, they must also adhere to the dictates of ethical codes that have been developed to protect human rights.

Problems of implementing ethical decisions

- 1 Lack of systematic and detailed education on ethics including approaches in ethical decision-making. Many nurses face ethical problems on a daily basis. This problem is worsened with the fact that there are no documentation of ethical dilemmas experienced by nurses and information on how those dilemmas were resolved.
- 2 The ability of nurses to engage in ethical practice in everyday work and to deal with ethical situations, problems and concerns could be the result of decisions made at a variety of levels including individual, organizational, regional, national and international. Situations at each of these levels could prove un-conducive for implementing ethical decisions.
- 3 Ethical violation in which action is not implemented could occur in a situation where the nurse is aware that either way, taking action or lack of action could still pose as a problem.
- 4 Ethical dilemma could result in no implementation of ethical decision if the nurse is unable to identify appropriate decision.
- 5 Ethical distress could also occur in which a nurse is unable to fulfill her ethical obligations and commitments, unable to pursue what she believes to be the right course of action or live up to expectation of ethical practice. Webster and Baylis (2000) asserted that such a problem could be as a result of error in judgment, insufficient personal resolve to implement ethical decisions or other circumstances beyond the nurse's control.
- 6 Ethical uncertainty occurs when the nurse is unsure of which ethical principles or values to apply.
- 7 Problem of inability and non-utilization of ethical decision-making models in resolving ethical conflict.
- 8 Nurses inherent values, which are strongly held personal and professional beliefs about worth and importance of phenomenon could influence or prevent the implementation of ethical decision.

Approaches to ethical reasoning (ethical decision-making models) with envisaged challenges

1. The consequential or utilitarian approach

In this approach, the decision-maker determines right or wrong actions based on expected outcomes or consequences (American Nurses Association, 2007). Thereafter, a choice is made in favor of those actions that will result in the greatest good for the greatest number of people.. The approach identifies "pleasure" as the good that must be maximized and "pain" as the evil that must be minimized. Since happiness must be

maximized, the action, which will have the best outcome in terms of providing happiness or pleasure to a greater number of people, is chosen as the best moral action. Terms usually associated with consequential approach are consequences, outcomes, cost/benefit analysis, “the ends justify the means”.

Advantages

- It considers the interest of all persons equally
- It directs attention to the consequences of actions
- It is easy to use since it offers a familiar form of reasoning – thinking about consequences as a guide to actions.
- It could be used to establish public policy

Challenges

- Bad acts with good consequences might be permissible
- It does not take into consideration any particular or morally significant relationships relevant to the situation.
- Interests of majority override the rights of minorities, the situation of which could also pose as a problem.
- Usually, the determination of what constitutes the greatest happiness could be subjective, resulting in inconsistent decisions.
- The tenet that “the end justifies the means” has been consistently rejected as a rationale for justifying moral action. The Nazis used this tenet in 1930-1940. (Polit and Hungler, 2002).

2. Non-consequential (deontological) approach

This is a system of ethical decision-making based on unchanging moral rules and principles, which are rigidly applied. (Bishop, 2007) As an opposite of the consequential approach, the focus is on the “action” to be taken and not on the consequences or outcome of that action. The emphasis is acting in accordance with moral duties, obligation to duties and respect for persons. With this approach, principles are absolute, regardless of the consequences of the decision. The approach is based on the belief that standards exist, which are fixed to guide ethical choices and judgments.

Advantages

- It permits quick ethical decisions since ethical judgment is based on already existing rules and principles.
- It permits objective decisions and actions, which will be the same in a variety of given situations regardless of time, person and place involved.
- Due to already existing moral rules and principles, many consider deontology (non-consequential) approach the only acceptable ethical reasoning model for ethical decision-making in health care.

Challenges

- It does not provide appropriate direction when the basic principles conflict with each other.
- Few decision-makers in practice follow completely the non-consequential approach since most people will prefer to consider the consequences of their actions.

3. The principles of autonomy, justice, beneficence and non-maleficence as ethical reasoning approach

The focus of this approach is based on the four ethical principles, guided by due consideration to the issue at hand.

Advantages

- It draws from already existing principles that are familiar to most people.
- It focuses on both action and outcome
- It provides useful and fairly specific guidelines for action.
- It allows for weighing and balancing and is therefore flexible and responsive to particular situations.

Challenges

- It does not provide specific guideline that is absolute for action
- There could be difficulty in taking decision where the principles conflict.
- It could be difficult to weigh and balance various principles based on the issue at hand
- Different cultures respond differently to the concept of autonomy. To some, autonomy is seen in the perspective of an individual while in others; the concept has a universal application referring to group, a family or community.

4. Ethical decision-making approach based on virtues

This approach reflects on the character of the decision-maker and her attitudes. Relevant identified concepts, which could guide an action, are honesty, courage, concepts, integrity, trustworthiness, wisdom, temperance and justices. Thus an action is right if it conforms to a set of attributes inherent in a particular community.

Advantages

- It recognizes an important part that an individual's character could play in decision-making.
- It encourages the cultivation of good character as a prerequisite for good practice. (For instance this could inform the requirement for referees from potential employers).
- It is compatible with ethical principles of "doing good" and "doing no harm".

Challenges

- It lacks consensus regarding actions
- A decision-maker could be of good character but performs a wrong act or be of bad character but do right. This fact is not clearly identified and explained.

5. Ethical decision-making approach based on care

This approach relies on relationships, power and understanding the structures underlying situations. For decision-making using this approach, various issues are considered:

a. The vulnerable populations

- * Those that make up the vulnerable populations are identified.
- * Ethical analysis is focused on the vulnerable population because according to the care approach, how they are treated in a society reflects the morals of that society.

b. Importance of experience

- * Due consideration is given to personal and collective experiences of the vulnerable group.
- * Knowledge from the identified experience is seen as valuable in determining their welfare.

c. Underlying structure

- The underlying structure of the situation is examined.
- Due consideration is given to ascertain if the identified structure is oppressive.
- Effort is made to identify facts that are ignored.
- Attention is paid to possible distraction from expectation required of the decision-maker.
- Attention is paid to identifying the possible beneficiary of the action, at whose expense and what is possibly left out.

d. Relationships

- Qualities of the relationships must be identified.
- Decision-making focuses on the fact that right relationships honour the dignity of human beings and are based on mutual benefit instead of domination.

Advantages

- It provides a context for decision making
- It provides a balance to approach based on principles

Challenges

- It doesn't identify specific principles that could be easy to apply.
- Power relationship may not always be evident.

ETHICAL DECISION-MAKING PROCESS

Irrespective of the ethical decision-making approach chosen, a systematic process should be used to arrive at decisions. Just like in the regular decision-making process, the tool often used is the nursing process. The goal is to determine right and wrong especially in situations where clear demarcations are not apparent. The nursing process in this situation is utilized with the understanding that the nurse knows the approaches of ethical decision-making in existence as well as the contents. It comprises of the following steps:

Step 1: Collection, analyzing and interpreting of data

- It requires knowledge of client's and family's wishes
- Identifying physician's beliefs
- Having awareness of personal orientation regarding life and death.

Step 2: Stating the dilemma

- Identifying and stating the dilemma clearly
- Identifying those involved in the dilemma
- Focusing attention on understanding ethical principles
- Examination of the client's wishes first, and in the case of unconscious client, considering family input.

Step 3: Considering choices of action and ethical approaches to decision-making

- This could also require input from external sources where possible.

Step 4: Analyzing advantages and disadvantages of each course of action

- A major factor in this step is choosing the correct code of ethics based on the ethical decision-making approach.

Step 5: Making the decision

- This involves making the decision and following through the action.

Most often, ethical dilemmas produce differences of opinion such that all may not be pleased with the decision. An important consideration is that clients' wishes should always supersede decisions by health care providers (Canadian Nurses Association, 2002). This argument corroborates the submission by ICN (2006) that the nurse's primary professional responsibility is to the people requiring nursing care. The question then is, in our professional practices, do we leave enough power with the clients?

IMPLEMENTING ETHICAL DECISION IN NURSING: THE WAY FORWARD

Ethical decision-making is a skill that could be learned, based on understanding of underlying ethical principles, ethical theories, decision making process and the nursing code of ethics. For this reason, nurses in every area of practice would benefit from good knowledge about ethics and ethical decision-making models to increase their skills in decision-making. Increasing opportunities for dialogue about ethical problems and decision-making could also be a step in the right direction.

Regular workshops and seminars should also be held for all cadres of nurses in respect to ethical issues. It is important to state here that in many health institutions, ethical committees are constituted to only assess and take decisions on research work. Nurses should have groups for the promotion of ethical practice in all nursing institutions. Such groups could then take charge of providing continuing education on ethical issues in such institutions, identifying problems hindering implementation of ethical decisions so as to provide suggestions towards the elimination of those problems. Nurses in all sectors of practice should constantly review and look back on their practice, thinking about what ethical problems were encountered and how the problems were resolved. Dialogue on such reviews could thereafter be made during opportunities created by the group for the promotion of ethical practice of the institution. It is necessary to also indicate that such practice could enhance

documentation, a deeper analysis of the situation and subsequently, improvement in knowledge and skills with respect to ethics and ethical practice.

Part of ethical practice in nursing is to act as advocate to the clients. To promote professional standard in nursing, there is need to address the issue of quackery in nursing in the developing nations and practicing nurses should increasingly acquire new knowledge and skills in their areas of practice. Additionally, to enhance safe, competent and ethical care, nursing practice should regularly receive impetus from relevant research findings wherever possible.

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Received for Publication: 07/02/2010

Accepted for Publication: 12/04/2010