
An exploration on ethical norms followed by healthcare professionals

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Abstract: Ethics is characterized as the moral standards that regulate the actions of a person or individual. Healthcare professionals are people who provide health care services and treatment based on their knowledge and experience. Medical ethics is the relevant subject of ethics that analyzes scientific medicinal drugs and associated medical research. Medical ethics is primarily based on the set of values that an expert can talk to in case of misunderstanding or conflict. Ethical Norms followed by Healthcare professionals is influenced by various factors such as Behaviour, Knowledge and Working environment. This study focuses on the various ethical factors influencing health care professionals. This study is conducted to find out the ethical norms followed by the healthcare professionals and to find out the determinants of ethical norms followed by Healthcare Professionals. The conclusion of the study shows that among the factors behaviour, knowledge and working environment behaviour factor have a positive linear relationship and innovation towards Ethical norms.

Keywords: Ethical norms, Healthcare professionals, Medical ethics, behaviour, knowledge, working environment, innovation.

INTRODUCTION

Ethics is described as ethical concepts that govern individual behavior. Medical ethics is a relevant subject of ethics that analyzes scientific medicinal drugs and associated medical research. Medical moral principles are primarily based on a set of values to facilitate an expert who can talk to in case of misunderstanding or conflict. Most of the Professional ethicists or experts recommend using these four basic values, or principles, to decide ethical issues in the healthcare profession and this approach is called the four principles plus scope. Medical ethics provides a general vital ethical logical framework. This study is done to find out the ethical norms followed by Healthcare professionals and to find out the determinants of ethical norms. In the Decision making process, an ethical dilemma is characterized as a problem between two possible options, neither of which is absolutely appropriate from an ethical perspective. The ethical dilemmas are exceedingly difficult and those problems cannot be simply solved. In almost every area of life, anyone can face an ethical problem that involves personal, professional and social issues. Most skilled ethicists agree that there are four basic ethical values which are used to determine the moral issues in the healthcare profession. This approach is simple, it is easy to access and think about ethical issues in the healthcare profession. Our research idea is based on the rich knowledge acquired by our peer teams across the university.(A.C.Gomathi, S.R.Xavier Rajarathinam, A.Mohammed Sadiq, Rajeshkumar, 2020; Danda et al., 2009; Danda and Ravi, 2011; Dua et al., 2019; Ezhilarasan et al., 2019; Krishnan and Chary, 2015; Manivannan, I., Ranganathan, S., Gopalakannan, S. et al., 2018; Narayanan et al., 2012, 2009; Neelakantan et al., 2013, 2011; Neelakantan and Sharma, 2015; Panchal et al., 2019; Prasanna et al., 2011; Priya S et al., 2009; Rajeshkumar et al., 2019; Ramadurai et al., 2019; Ramakrishnan et al., 2019; Ramesh et al., 2016; Venugopalan et al., 2014)

REVIEW OF LITERATURE

(Shawahna, 2020) made a study to know about the ethical, legal norms to resolve dilemmas in daily healthcare practice. It is predicted that pharmacists will play a vital function in patient's direct health service care. During their regular practices, pharmacists are not qualified to deal with ethical, legal, technical dilemmas. To promote dialogue, debate and decision making an eight step structured approach was used. Successful use of systematic approach to address dilemma can advance the care for the patient.

(DuVal et al., 2004) made a study to identify the ethical dilemmas faced by the therapist, the strategies the therapist uses to address them, and the usefulness of ethical counselling. Most therapists remind themselves of current moral dilemmas in practice, but patients with the less training and experience have the least access to ethical

counselling. Healthcare providers need to focus on ethical education to organize doctors for their own moral dilemmas and to pick up the availability and responsiveness of ethical advice as desirable.

(Santos et al., 2013) made a study to know the Ethical principles which guide professional behavior, especially in building a patient - clinician relationship and therefore it needs continuous suggestion. The plan of this research is to inspect the moral experience of an anesthetist caring for the patient. Study results suggest that the classification of the study participant's ethical experience about the patient -clinician relationship was divided into five different categories: Respect for the patient, human treatments, equality in treatments provided, confidentiality rates and value for the patient autonomy. They conclude by saying that respondents will recognize moral, humanitarian standards which guide relationships with the patients.

(Macklin, 2003) examined that all the four principles present the right and practical way to analyze the ethical dilemma. Then he observed that the approach to using these four principles will not offer an exclusive solution to this confusion. Then he explained this with the four situations. In the first situation a diverse set of realistic assumptions can lead to a diverse inference about what is expected through the principle of profit. In the second situation, the question is clear that what's really in the child is determined by society. The third situation showed how the theory of supremacy over freedom can be justified in certain circumstances. The fourth situation explains how, based on the value given to the principle of caution, one may draw distinct conclusions.

(Roberts et al., 2005) examined that ethics training has become an integral part of the education of medical students and residents. Trainees recognize that they need extra academic consideration to the moral, practical professional dilemmas that exist during medical training and practice, regardless of training level or clinical discipline. This study documents the importance placed by residents in ethical education that focuses on the practical dilemmas of the real world and the issues of ethically important professional development.

(Ks et al., 2019) made a research to find out the knowledge of medical students about clinical ethics. This study aims to consider the knowledge of ethics among students, educators in Para clinical and clinical medicine. The results of this study call for establishing priorities for integrating knowledge of codes of ethics into the curriculum and teacher training.

(Cassell, 1991) examined that human suffering without relief is terrible. That is why the relief of suffering is the commitment of medicine and its adequacy test. Difficult ethical questions often arise in all serious illnesses; therefore understanding suffering is necessary not only for clinical medicine, but also for clinical ethics. However, for clinical ethics to fully benefit from the lessons of suffering, The fundamental importance of the emphasis placed on the fundamental principles of ethics in medicine during the last quarter of a century has been to divert attention from a primary concern in the treatment of diseases, and to resort to care based on the interests of the sick people.

(Fourie, 2015) made a study on moral distress in medical ethics. A lot of research is currently being done on the experiences of moral distress experienced by healthcare professionals, especially nurses. However, moral crisis is not always clearly defined and there is debate as to how to define it. The purpose of this article is to help clarify the moral crisis. Two sources of confusion about moral crisis is resolved (1) the holistic nature of a narrow definition of crisis that cites a particular cause, namely moral compulsion, and (2) the moral dilemma (or, more Exact, moral conflict) and the distinction drawn between moral crisis, meaning that the two are mutually exclusive. (Chopra et al., 2013) made a study on the current status of knowledge, attitudes and ethics among healthcare professionals. The recent rise in lawsuits against health professionals is an urgent concern and reflects an increase in unethical practices. Professional relationships between doctors and nurses may differ in their attitude toward patient care. This study highlighted the knowledge gap regarding the practical aspects of medical ethics that doctors and nurses encounter in their daily work. Workplace education tools such as cognition workshops and medical ethics conferences can help fill this gap to some extent.

(Jurkiewicz, 2000) examined that the issues of concern are multifaceted and range from the level of care and budget violations to lies and personnel matters. Differences between CEOs interviewing nonprofits and private companies indicate possible structural/ cultural reasons. The way organizations create and respond to these challenges provides insights into the growing dilemma in healthcare management. Of particular note is the apparent failure of health leaders at the top of the rankings to change the moral environment.

(Pence, 2004) made a research among faculty and students, the rich collection provides a depth view at the important issues that had formed the medicinal principles. This book provides a well-known case by using a broad past, related background and continues to enlighten it by discussing the relevant philosophical theories and in-depth legal and ethical issues.

(Gillon, 1994) made a research and study about the "Four Principles plus Scope" come up to provide easy, nearby and ethnically come up to thinking about ethical problems in healthcare. It provides a general and basic ethical analysis structure for moral language. This study does not provide the policy ordered, but these principles help the healthcare professionals construct decisions when considering ethical problems that occur in the workplace. Healthcare professionals find it helpful to organize their views on ethics.

(Ulrich et al., 2010) made a study on ethical issues and stress in nursing practices. Each day ethical problems that occur in nursing receive modest attention and it can be stressful for Nurses. The frequent occurrences were the

immoral behaviour of health professionals; violation of patient privacy. Younger nurses with less work knowledge are more likely to face ethical issues and report high levels of stress. They face moral challenges on a daily basis in providing quality care. Nurse retention requires specific ethical interventions that address the care of an increasingly complex group of patients.

RESEARCH METHODOLOGY

The aim of this research is to find ethical norms followed by Healthcare Professionals with respect to knowledge, behavior and working conditions. This is done by employing a questionnaire which contains various views with respect to knowledge about ethical norms, the ethical behavior and working conditions of the Healthcare Professionals. The sample size for the study is 50.

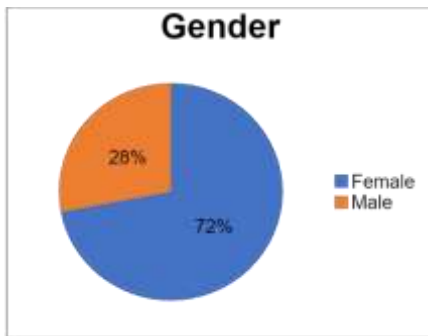


Fig.1: The pie chart mentioned above depicts the percentage of gender in the sample. 28% of the respondents were Male and 72% were Female respondents.

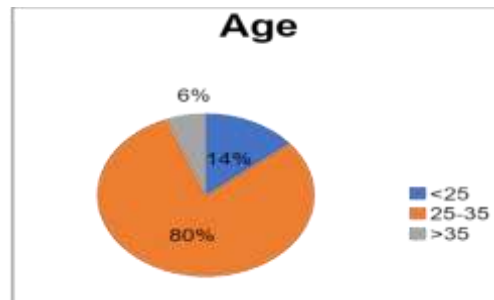


Fig.2: The pie chart mentioned above describes the age of the respondents. 14% of respondents were of age, <25years 80 % of respondents were of age 25-35 and >6% of respondents were of age >35.

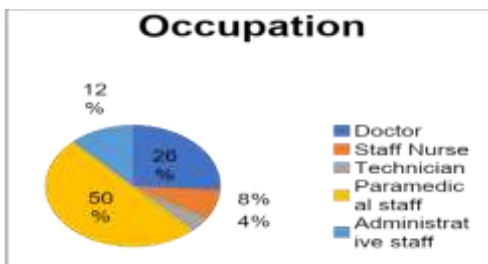


Fig.3: The pie chart mentioned above depicts the percentage of Occupation in the sample. 26% of the respondents were Doctor, 8% of the respondents were staff Nurse, 4% of the respondents were Technician, 50% of the respondents were Paramedical Staff, 12% of the respondents were Administrative staff.

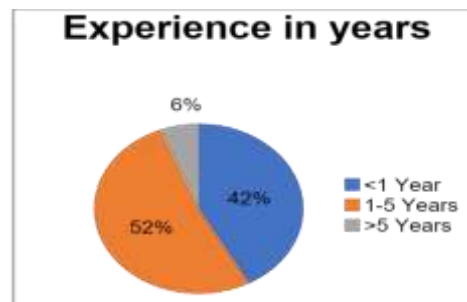


Fig.4: The pie chart mentioned above depicts the percentage of Experience in years in the sample. 42% of the respondents have <1 year of experience, 52% of the respondents have 1-5 years of experience and 6% of the respondents have >5 years of experience.

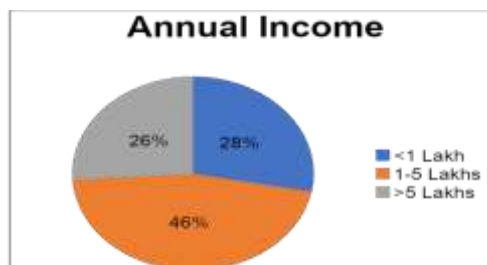


Fig.5: The pie chart mentioned above describes the annual income of sample respondents 28% of respondents were earning less than Rs. 1 lakhs. 46% of employee respondents were earning Rs. 1- 5 lakhs whereas only 26% were earning above 5 lakhs.

Table: 1: Mean Analysis

S.No	VARIABLES	CONSTRUCTS	MEAN	RANK
1	Open Up	Behaviour	3.48	5
2	Right to Refuse		4.22	1
3	Personal Interest		3.58	4
4	Right to Withdraw		3.80	3
5	Own Philosophy		3.82	2
6	Knowledge	Knowledge	3.30	5
7	Decision Making		3.80	3
8	Patient Condition		3.42	4
9	Choice		4.08	2
10	Informed consent		4.40	1
11	Rules and Regulations	Working Conditions	3.92	1
12	Management Pressure		3.62	2
13	Commitment		3.10	5
14	Working Time		3.38	3
15	Confidentiality		3.20	4

Table 1 indicates the mean analysis of 15 variables. With the help of three factors such as behaviour, knowledge and working environment we examine which factors influence the ethical norms of healthcare professionals. From the table it is evident that right to refuse is the most influencing factor followed own philosophy, right to withdraw, personal interest and open up among the behaviour, giving informed consent is the most influencing factor followed by experience, decision making capacity, patient condition and knowledge among knowledge and following rules and regulations is the most influencing factor followed by go with management decision, confidentiality rate, excess working time and commitment among working conditions.

REGRESSION ANALYSIS

Table: 2 Model Summary

Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.519 ^a	.270	.222	.38425

Table 2 shows the values of R and R2. A simple correlation of 0.519 is the R value, showing the degree of correlation. In the dependent variable, the R2 value indicates how much of the total variation can be explained by the independent variable. In this condition, 27 percent, which is an average, can be explained.

Table 3: ANOVA

ANOVA						
Model		Sum of Squares	Df	Mean Square	F	Sig.
1	Regression	2.508	3	.836	5.662	.002 ^b
	Residual	6.792	46	.148		
	Total	9.300	49			
a. Dependent Variable: Ethical norms						
b. Predictors: (Constant), Working environment, Knowledge factor, Behavior						

The ANOVA table indicates that the significant value is less than 0.05 which means dependent variable ethical norms are significantly predicted by independent variables namely behaviour, knowledge and working environment at 99 % of confidence level.

Table 4: Coefficients

Model		Unstandardized Coefficients		Standardized Coefficients	T	Sig.
		B	Std. Error	Beta		
1	(Constant)	1.673	.629		2.660	.011
	Behaviour	.370	.148	.340	2.499	.016
	Knowledge Factor	.093	.114	.106	.818	.418
	Working Environment	.137	.078	.243	1.760	.085

The above table indicates regression analysis with B & Beta value for the dependent and independent variables which are assumed. It is clear that the behaviour factor seems to have a significant impact on ethical norms. But, Knowledge factor and working environment does not possess any impact on ethical norms.

CONCLUSION

Medical ethics is many-sided and it is fundamentally important to citizens of all societies, as the provision of health care is essential to the well-being of all. Many ethical problems rising from healthcare will affect the relationship between healthcare professionals and the patients. Healthcare professionals are often forced to make difficult decisions. They also face many ethical dilemmas. Failure of their decisions will result in injustice; it may also harm others. Medical ethics will help the Healthcare professionals to know about the basic healthcare related questions. Medical practice is considered ethical when it respects all the four principles of Medical ethics. Ethical Norms followed by Healthcare professionals is influenced by various factors such as Behaviour, Knowledge and Working environment. Among these factors behaviour has a positive linear relationship towards Ethical norms.

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