## FROM THE EDITORS - Margaret McMillan and Jane Conway

# MAINTAINING ETHICAL PRACTICE: THE CHALLENGES FOR CLINICIANS, SCHOLARS, REVIEWERS AND EDITORS

n the days following the recent inaugural Australian National Health and Medical Research Council's (NHMRC) conference on 'Ethics in Human Research', we were caused to think about our roles as editors in ensuring the process of research and subsequent publication is ethical.

We acknowledge the advances made in nursing knowledge as a result of research, and recognise that dissemination of knowledge through journals such as *AJAN* underpins the professional imperative that the nursing community values research based practice. However, we also experience occasional disquiet about whose needs are served through publication in a professional environment in which the 'publish or perish mentality' is increasingly pervasive.

In an attempt to understand how nurses might improve practice and align the professional ideal of caring with the demands of clinical practice, some nurses engage in research or reflect on their practice through scholarly writing. However, we are aware that beginning researchers frequently see ethics clearance as an obstacle to overcome in the research journey and may struggle with demands for compliance with guidelines.

The NHMRC National Statement on Ethical Conduct in Research is a critical mechanism to identify essential matters of research ethics. It provides us with a way to examine matters of conscience, particularly if human subjects are involved. In general, these focus on individual studies in relation to questions such as:

- How well do nurses articulate those aspects of a situation that pose a moral dilemma for them?;
- Is the research involving health personnel and consumers consistent with elements of quality in ethical decision making?;
- Is the research undertaken ethical and scientifically robust?;
- Were the processes of obtaining ethics clearance efficient and reflective of the maintenance of the rights of the participants?;
- Does the design of the nursing research accommodate the need to treat all potential participants in a just manner?;
- Are there any unfair burdens placed on those who are approached to participate?;
- Are their risks to participants and if so how have these been minimised?;

- Are these risks balanced by the likely benefits?; and,
- Is there regard for the welfare, rights, beliefs, perceptions, customs and heritage of the persons on whom the research focuses?

Perhaps the superordinate question should be: How is the research that nurses sometimes see as easy to undertake relevant to the needs of the community?

To begin, we need to ask 'What justifies this research involving humans?' People need to have control over their lives and any level of interference needs to be justified. In order to do this, we need to be sure that the outcomes of the research add value to professional practice, increase knowledge or provide benefit to society. There needs to be guarantees that in their enthusiasm to research and publish, nurses do not violate human rights and that the benefits of the research outweighs any risk for those involved.

As editors and reviewers, we also need to ask 'What justifies publication of this article?' We need to ensure that the claims made about the adequacy of, and need for, any study we publish are based on a thorough analysis of any prior work undertaken in the area of concern. We rely heavily on the integrity of the authors to present papers for publication that meet ethics criteria.

There are a number of issues pertinent to questions about ethics in reports of research and philosophical commentary in the scholarly papers in this journal. In particular, there is a need to address the issues that arise from the potential to exploit easily accessible or vulnerable groups. A number of these are identified in Tuttle and Siebold's paper that explores the conduct of research with vulnerable groups, the gay and lesbian population, those dependent on alcohol and other substances, and clientele with learning disabilities.

Other papers use a number of research methods to examine student nurse perceptions. In selecting these papers for publication we examined the benefits of the knowledge generated by these as we are conscious that student nurses themselves may well be a vulnerable population and that, as a profession, nursing needs to be vigilant against exploiting students as a research population.

All of the papers highlight key issues that need to be addressed in order to meet the community need for, and expectation of, nurses.

The study by Ward et al centres on the critical issue of what attracts people to enter nursing and stay within the workforce. The study is significant to society, they argue, because of the shortage of nurses.

When examining ageism in nursing students, de la Rue uses participatory action research. This method poses particular challenges to managing participant consent in a study setting that seeks to be inclusive and democratic, and relies on a high level of ongoing commitment to achieve change in the culture across contexts of practice. Moyle's study required consent from students enrolled in a nursing program. This paper explores the views of nursing students towards older people and ageing and suggests a number of strategies to enhance students' perceptions of older people.

For those in practice, the present world of health care often appears messy and complex. This messiness and complexity arises because of inherent tensions and competing demands that arise from the heightened awareness of stakeholder needs. For example, it can be difficult for nurses to make sense of their contexts of practice when they have a commitment to a culture of client focused care (whatever the meaning they attach to that concept), and are faced with the daily challenges of managing care within resource constraints. The situations nurses need to contend with or attempt to manage inevitably have an ethical dimension.

Working in complex situations may result in the need for interventions that support nurses more effectively. Two of the articles in this *AJAN* highlight the need for nurses themselves to have their rights in the workplace respected and their needs met. Patterson and McMurray examine

the changing scope of professional practice and the expectations of consumers and practice nurses (PNs) about the nature and extent of care provided by a PN in an expanded role. This topic raises issues about the complexity of practice and the difficulties in maintaining ethical relationships in such an environment. On the other hand, the work presents a model of collaborative practice rather than the traditional hierarchical approach. Such a change in models of practice may well have the potential to foster more ethical professional interactions.

Jeavons and O'Connor examine an area of great sensitivity - stress debriefing. There is particular need in this type of research to ensure that participants in the research project are not exposed to further distress or harm as a result of participation in the study.

While individual nurses aspire to ethical practice in their daily lives, the profession's collective commitment to ethical practice is also evident when one takes a 'big picture' view and examines the work of clinicians, researchers, reviewers and editors as scholars.

Dr Mary Chiarella, the recently appointed Chief Nurse in New South Wales, has to take a big picture view. In her role she has to deal with a range of health service personnel and represent the interests of nurses. She too would be cognisant of the need to embrace a set of sound principles of ethical conduct in every facet of her role.

### REFERENCE

1 The NHMRC Statement on Ethical Conduct in Research, www.health.gov.au/nhmrc/publications/synopses/e35syn.htm

## **CALL FOR REVIEWERS**

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