

Nurses' Responses to Ethical Challenges in Oncology Practice: An Ethnographic Study

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Oncology nurses encounter increasingly complex ethical challenges in clinical practice. This ethnographic study explored 30 oncology nurses' descriptions of ethical situations and 12 key informants' perspectives on factors that influence the development of ethically difficult situations. Nurses described the goals of preventing patient suffering and injury, being honest with patients, and contributing meaningfully to patient improvement and stated goals. Nurses experienced six primary challenges in meeting their goals: being the eyes and arms of patient suffering, experiencing the precariousness of competing obligations, navigating the intricacies of hope and honesty, managing the urgency caused by waiting, straining to find time, and weighing risks of speaking up in hierarchal structures. Nurse actions included addressing concerns, creating other avenues, murmuring to one another, staying silent, and looking away. Several factors influenced nurses' responses to ethical challenges. Results imply a contextual model of moral action that reveals a need for altering practice environments in addition to improving nurses' ethics skills. Nurses are very aware of their moral responsibilities in ethically difficult situations and need work environments conducive to interprofessional collaboration and open dialogue.

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When caring for patients with life-altering and life-threatening disease, oncology nurses confront many challenges ranging from complex and fragmented healthcare systems, continuous research advances, multiple treatment choices, and helping patients and families adapt, all while considering the moral dimensions of care and articulating ethical concerns. Researchers have suggested that oncology nurses frequently encounter ethically difficult situations (Ferrell, 2006; Raines, 2000; Shepard, 2010), experience more moral distress than other nurses (Rice, Rady, Hamrick, Verheijde, & Pendergast, 2008), and confront ethical issues such as value conflicts with pain management, resource use, informed consent, and end-of-life decisions (Cohen & Erickson, 2006; Raines, 2000; Shepard, 2010). According to some researchers, healthcare providers (including nurses) report increasing pressure from administrators, colleagues, patients, and families to provide life-extending treatments (Chen, 2007; Hamric & Blackhall, 2007; Morris & Dracup, 2008). Too

often, structural problems such as inadequate interprofessional communication and collaboration result in mounting moral distress (Ulrich, Hamric, & Grady, 2010), which lead to patient safety concerns and quality-of-care issues (Campbell & Cornett, 2002; Maiden, Georges, & Connelly, 2011). This article describes an ethnographic study that explored the experiences of oncology nurses and other key players (e.g., clinical ethicists, oncologists) in ethically difficult clinical situations. The results yielded deeper understandings about ethical challenges that nurses encounter and factors that impact their response.

Moral Complexity in Clinical Practice

Nurses in a variety of settings report using moral-ethical advocacy more than any other type (Kubsch, Sternard, Hovarter, & Matzke, 2004). However, coping with the ethical dimensions of patient-centered care in systems that emphasize science-based decision making and cost containment is challenging (Goethals,