

Diploma in midwifery 3rd year

Complexities of Maternity Experience

Day 10:

Topic: Ethics

Introduction of ethics:

At its simplest ,ethics is a system of moral principles.

They affect how people make decisions and lead their lives. Ethics is concerned with what is good for individual and society. It is also described as moral philosophy.

The term ;ethics' is derived from the Greek word ethos which can means custom, habit character or disposition.

Ethics covers dilemmas such as:

1. How to live a good life
2. Our rights and responsibilities;
3. The language of right and wrong;
4. Moral decisions-what is good and bad?

our concept of ethics have been derived from religions, philosophies and cultures. They infuse debates on like topic like abortion, human right and professional conduct.

Ethics terminology

- Informed consent
 - Information regarding options for care and treatment, which the persons then consents to or dissents from.
- Rights
 - Justified claim to a demand
- Duty
 - A requirement to act in a certain manner
- Justice
 - Being treated fairly
- Best interest
- Deciding on best course for an individual

- Utilitarian
 - Greatest good for the greatest number
- Deontological
 - Duty if care
- Beneficence
 - Doing good
- Non-maleficence
 - Avoiding harm

Ethical theories and principles

Edwards four level system of the ethics or moral thinking:

- Level one: judgments

- quickly made

- Based on information seen or quickly gained

- May have no real foundation except personal belief

- May be biased

- May not be well thought through

- Judgments often based on personal values and beliefs

Level two: Rules

- Rule differ depending on the society and culture we live in
- Different types of rules:
 - substantive rules (e.g. privacy, truth, telling. confidentiality)
 - Authoritative rules(determined by those in power, enforced on a country or a section of society);
 - procedural rules(a set course of actions to follow)

- rules can be enabling
- Rules can define the limits or boundaries of practice
- Rules can allow freedom to act, knowing the limits of those actions
- Rules can be set by e.g. Nursing and Midwifery Council-statutory rules bound by laws
- Codes can be less formal or obligatory than can act as guidelines to support safe practice.

Level three: principles

4 main principles

1. Respect for autonomy:

- Focus of modern health care
- Professional duty to respect an individual autonomy
- This is especially true in maternity service e.g. women centred care

2. Non-maleficence

- avoid doing harm
- harm may sometimes be a consequence of an actions in healthcare
- Aim to minimize harms as much as possible

3. beneficence:

- Doing good
- Balancing the benefits against the harms in a given situation
- Positive action to interest of the woman and best interest of the fetus are not always the same; how to balancing those?

4. justice:

- Means to be treated fairly
- Important that health professional are seen to be acting fairly and treating everyone equally
- Justice is about people rights, obligation and duties
- People should have equal access to health care based on need
- All women should have the same access to services, the same level of care, the same options and choices

Level four: ethical theories

- There are a number of theories that could be explored in relation to midwifery health care:
- Liberalism(no one should be forcibly prevented from acting in any way he/she chooses provided his/her acts are not invasive of the free acts of any other)
- Communitarianism(the need to balancing individual right and inter ests with of the community as a whole ,and argues that individual people are shaped by the cultures and values of their communities)\
- Casuistry (a specific method of doing ethics that relies on the analysis of /individual cases, exploring them in relation to paradigm cases and broad principles)

- Feminism (approach to ethics tht builds on the beliefs that traditionally ethics theories focused on men perspectives and under valued and or under appreciated women's experiences, feminist ethics therefore choose to reimaging ethics though a holistic feminist approach to transform it)
- But generally the two main ethical theories are
- Utilitarianism(an ethical philosophy in which the happiness of the greast number of people in the society us considered the greatest good)
- Deontology(an system of ethics that judge actions based on whether they adhere to a set of moral rules or duties)

- Approach to ethics:

Philosopher tend to divided ethical theories into three areas; meta ethics, normative ethics and applied ethics

1. Meta ethics-deals with the nature of moral judgment. It looks at the origins and meaning of ethical principles.
2. Normative ethics-is concerned with the content of moral judgment and the criteria for what is right and wrong.
3. Applied ethics-looks at controversial topic like war, animal right and capital punishment.

The four principles approach to health care ethics, autonomy, beneficence, maleficence and justice

The four principles plus scope approach to health care ethics provides a simple, accessible and culturally neutral approach to thinking about ethical issues in health care. The approach offers a common basic moral analytical framework and a common basic moral language.

The approach developed by Gillon in the 1990s in United States, is based on four common, basic basic moral commitments.

- ✓ Respect for autonomy
- ✓ Beneficence
- ✓ Non-maleficence
- ✓ Justice

Day 11:ethics continued

- Topic continued:

A code of ethics is a set of guidelines which are designed to set out acceptable behaviors for members of a particular group, association or profession. in recent years has been more understanding of the importance of an ethical basis for any health care practice, including midwifery.

When midwives graduated they can ethical midwifery practitioners who emphasies ethical principles, including baneficence,non-maleficence, justice respect for women autonomy and confidentiality ij their work.

ICM codes of Ethics

The code,

1. Midwifery relationships

- Midwives respect a women informed right of choice and promote the women's acceptance of responsibility for the outcomes of her choices.
- Midwives work with women, supporting their right to participate actively in decisions about their care, and empowering women to speak for themselves on issues affecting the heallth of women and their families in their culture/society.

- Midwives ,together with women , work with policy and funding agencies to define womens needs for health services and ensure that resources are fairly allocated considering priorities and availability.
- Midwives support and sustain each other in their professional role and actively nurture their own and others sense of self worth.
- Midwives work with other health professional consulting and referring as necessary when the woman's needs for care exceeds the competencies of the midwife.
- Midwives recognizes the human interdependence within their field of practice and actively to resolves inherent conflicts.

2. Practice of midwifery

- Midwives provide care for women and childbearing families with respect for cultural diversity while also working to eliminate harmful practice within those same cultures.
- Midwives encourage realistic expectation of childbirth by women within their own society, with the minimum expectation that no women should be harmed by conception or childbearing.
- Midwives use their professional knowledge to ensure safe birthing practice in all environment and cultures
- Midwives responds to the psychological , physical ,emotional and spiritual needs of women seeking health care, thatver their circumstances.

- midwives act as effective role models in health promotion for women through their life cycle, for families and for other health professionals.
- midwives actively seek personal, intellectual and professional growth throughout their midwifery career.

3. The professional responsibility of midwives

- Midwives hold in confidence client information in order to protect the right to privacy, and use judgments in sharing this information.
- Midwives are responsible for their decisions and actions, and are accountable for the related outcomes in their care of women.
- Midwives participate in the development and implementation of health policies that promote the health of all women and childbearing families.

4. Advancement of midwifery knowledge and practice

- Midwives ensure that the advancement of midwifery knowledge is based on activities that protect their right of women as persons.
- Midwives develop and share midwifery knowledge through a variety of processes, such as peer review and research.
- Midwives participate in the formal education of midwifery students and midwives.

Political and economic influence on pharmaco-therpeuties

- Pharmaceuticals can be life saving; they can be health promoting; they can be pain relievers, infection-fighter, disease manager or disease preventers, pharmaceuticals are important.

Pharmaceuticals should be available to all who need them, whether they are rich or poor; whether they are female or male; whatever nationality, tribe or ethnicity a persons is, if they require medication they should be able to access them. but in too many parts of the world, that is not so. Too often, economics and polities determine who has access to medications.

There are many drug companies, and there are massive profits to be made from the international sale of pharmaceuticals.; each company wants it to be their product to be sold, so that their company makes the most profit.

One particular aspect of ethics in health care is the bribery and corruption which occurs globally in relation to supply and promotion of specific drug company products, and of infant formula company products. Traditionally ethic has been directed at higher level, politically or to hospitals/health facilities and to doctors. but increasingly nurses and midwives are also being targeted, as they play a larger role in the health system. It is therefore important that students midwives are alerted and have a plan in place to avoid these ethical dilemma.

Day 12: Difficult situations and conflict resolution:

Topic: skills for working and communicating effectively in difficult situation.

Good communication is key personal attributes for a midwife. To refresh some of the skills learnt earlier in the programme, a summary of effective communication skills many include:

- Effective communication skills: Dos
- Do maintain appropriate eye contact
- Do be aware of your own body language and tone
- Do ask for clarification
- Do ask open-ended questions
- Do paraphrase at the appropriate time
- Do listen

- Effective communication skills-DON'Ts
- Do not look down or away
- Do not mismatch your style to the situation
- Do not assume
- Do not interrupt

Midwives sometimes are in situations that require them to have advanced communication skills. They need to deliver unexpected or bad news to parents and their families, or to have difficult conversations. Sometimes there is conflict, whether in the institution or between colleagues, in families or between staff and a woman.

- Recommendations for advanced communications skills for difficult situations include:
 - Gather all information
 - make sure you have your facts straight; anticipate questions, and plan how you might answer them.
 - Be assertive
 - be assertive, and once you start having a difficult conversations, continue rather than backing down
 - Be empathetic
 - Put yourself in the other persons shoes; think about how would feel hearing what you are saying; give them time questions and comments;

○ Be prepared to negotiate

-in some conversations(e.g. about the mother is doing which may not be best practice for he own health, the growth and development of the fetus, or about the care or feeding of the new baby) there needs to b some room for negotiations;a'win-win ' situation is the best goal to aim for;

Use appropriate verbal and non verbal language

-speak clearly; avoid any jargon that the other persons may not understand; use eye contact appropriately; sit or stand in a relaxed way; do not use language or body language that could be interpreted as confrontational;

- Listen deeply
 - Try to be unstressed and listen carefully to the others person views opinions and feelings;make us of clarification and reflection techniques to offer feedback, and demonstrate that you were ;listening;
- Stay clam and focused
 - communication is easier when everyone is calm, so take some deep breaths and try to maintain an air of calmness so that others are more likely to remain calm too; keep focused on what you have to say;dont deviate or get distracted from the reason that you are communicating.

- One such framework is one developed for oncologist who have news of cancer diagnosis and prognosis to deliver to patients. the SPIKES framework has 6 steps:

Step 1: S=set up the interview

- mental rehearsal/plan the news to be told
- physical setting –privacy; involve significant make connection with ;manage time constraints and interruptions;

Step 2: P=Assess the patients perception

- before you tell ask –use open ended questions to ask how the patients perceives the situations-their knowledge, understanding, expectations, and hopes
- correct any information that is incorrect
- tailor the bad news to what the patents understands

Step 3: I = Obtain the patients invitations

- most people want to know all of the news; some do not
- Shunning information is a valid psychological coping mechanism
- ask questions like 'how would you like me to give you the information about the rest results?' or 'Would you like me to give you all the information now, or just the overview, and go over it again later?'
- schedule another meeting in the future; consider if they want significant others involved.

Step 4: K = give knowledge and information

- warn the patients that bad news is coming so as to lessen the shock.

Preface with a phrase like; 'Unfortunately I have bad news to tell you...' or 'I'm sorry to tell you that...'

- give medical facts at the level of comprehension and vocabulary of the patient

- try to avoid technical terms and jargon

- avoid excessive bluntness

- give information in small chunks

- check regularly for understanding

Step 5: E=Address the patient emotions with empathic responses

- Challenging as patients emotional responses may vary

- offer support and solidarity by making this 4 step empathic response to their reaction to the news

- 1. observe for any emotion.
- 2. identify the emotion by naming it to yourself.
- 3. identify the reason for emotion.
- 4. give patient a brief period of time to express their feeling; then make a connecting statements to let them know have connected their emotion with the reason for the emotion.

Step6:S= Strategy and summary

- check patients is ready for the next step; outline a clear treatment plan for the future.
- share responsibility for decisions making.
- Summaries and check patients understanding; clarify any misunderstandings.

Day 13

Topic: Regulatory professional and legal system in Bangladesh which relates to midwifery ;protocol and guidelines; policy documents and development; midwifery act.

The international confederation of midwives states that: the three pillars of a strong midwifery profession are education to provide a highly competent, qualified workforce; Regulation of the activities of the professionals and organization of the members in a strong Association.

All of the ICM core documents guide midwives associations and their governments to review, improve and strengthen the education and regulation of midwives and midwifery. They enable countries to review their midwifery curriculum for supporting and retaining a quality midwifery workforce.

In Bangladesh the Bangladesh Nursing Council and Midwifery Council, with separate Boards for nurses and midwives.