A Critical Approach to an Ethics and Diversity Class

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Comprehensive Exams

Spring Semester 2014

A Critical Approach to an Ethics and Diversity Class: Executive Summary

 With heavy content laden courses, adding more information can be overwhelming for students and educators. However, recent unethical nursing behaviors and a rising diversity in the patient and nursing population has placed an emphasis on formerly overlooked concepts of ethics and cultural diversity (Shaw & Degazon, 2008). Nurses need the vital skill of ethical comportment in order to practice expertly and successfully in their field (Benner, Sutphen, Leonard, & Day, 2010). Also with the growing awareness of cultural diversity and its affect on patients’ health and the changing demographics of nursing students (Strayer & Beitz, 2010), topics of diversity – including the concepts of human dignity and social justice – should be included in the undergraduate nursing curricula (Shaw & Degazon, 2008). Nursing educators must incorporate these topics to better prepare nursing students for the ever-changing healthcare profession.

**Aims**

 When designing this course, four aims became apparent. First, students must develop their critical thinking skills to be able to function well in the nursing practice. Second, students need to be exposed to varying viewpoints to transform the way they learn. Third, students need to be able to apply theory and knowledge to their nursing practice. Last, nursing educators need to instill the need for social change in their students. Enhancing critical thinking, transforming students’ learning, reducing the theory versus practice gap, and promoting and advocating social change will produce more effective and ethical nurses that are diverse in thinking and worldviews.

**Methods**

Nursing educators need to rely on many different instructional strategies to reach students with various learning styles. In this course, traditional instructional practices are combined with innovative, active learning strategies to better meet the aims. Using textbook readings, PowerPoint presentations, and links to relevant websites will help introduce the students to the content of the course. Debate and ethical decision-making models will assist students in applying philosophical theory of ethics into their nursing practice. Then incorporating case studies and service learning can submerge students in a different culture and worldview from their own. Finally, integrating reflective journaling throughout the course can help students to identify their own sets of beliefs, values, and biases. The combination of these teaching methods can improve students’ critical thinking skills and enhance the socialization of students to the nursing profession.

**Content**

In order for students to be exposed to different viewpoints and to learn to think about alternative solutions to complex problems, nursing educators need to introduce different theoretical views of ethics and diversity. For the ethical content, students will be introduced to brief overviews of philosophical theories of teleology, consequentialism, deontology, virtue-based ethics, care-based ethics, and bioethics. Also students will delve into the American Nurses Association’s (ANA) code of ethics for nurses to identify ethical values of the nursing profession. For diversity, students will be exposed to Leininger’s Cultural Care Theory and to Critical Social Theory. Also introducing students to American Association of Colleges of Nursing’s (AACN, 2008) core professional nursing values (altruism, autonomy, human dignity, integrity, and social justice) will help students situate issues of ethics and diversity into the nursing context. Using content outside and within the nursing profession exposes student to a better-rounded knowledge base and allows them to incorporate that understanding into their practice.

**Conclusion**

 Students will encounter ever increasing ethical and diversity dilemmas in their nursing practice. Ensuring exposure to different theoretical views of ethics and cultural diversity allows students to formulate and articulate solutions to complex problems in the healthcare setting. Incorporating various active learning methods assures higher order learning in students (Kafai, 2006). When students improve their critical thinking skills, transform the way they learn, apply theory to practice, and advocate for social change, they will become more effective nurses (Benner et al., 2010).

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Nursing educators, in addition to teaching content-laden courses, must also promote learner development and socialization and become a change agent and leader (National League of Nursing [NLN], 2005). To facilitate learner development and socialization, nursing educators must model professional nursing behaviors (such as integrity and advocacy) and create learning environments to socialize students and develop their affective, cognitive, and psychomotor skills. As a change agent and leader, nursing educators must display leadership qualities and produce innovative teaching strategies to create a better future for the nursing profession (NLN, 2005). Through effective course design on ethics and diversity, nursing educators can fulfill all these professional roles.

**Statement of Problem**

 Nursing students and nurses struggle with issues of ethics and diversity. They are unprepared to handle clinical situations that deal with these issues (Shaw & Degazon, 2008). To address this problem, nursing educators need to see the problems with the lack of ethical education and lack of culturally diverse understanding. First, the lack of ethical education can contribute to the nursing shortage through nursing burnout, especially due to moral distress (Burston & Tuckett, 2012; AACN, 2014). Second, the absence or inadequate knowledge on diversity can be detrimental to the rising diverse nursing student population and can perpetuate social injustice (Bednarz, Schim, & Doorenbos, 2010; Browne, Varcoe, Smye, Reimer-Kirkham, Lynam, & Wong, 2009; Philibert, Allen, & Elleven, 2008). By acknowledging that graduate nursing students are unprepared to handle ethical and diversity issues, nursing educators can design and implement a course or curriculum to better instruct students to function in nursing practice.

**Lack of Ethical Education**

**Nursing shortage.**

The current nursing shortage has significantly impacted the nation’s healthcare system and nursing education. According to the Bureau of Labor (2012), the registered nurse has the highest job growth through the year 2020. In addition to job growth, the aging nursing population – average age of a registered nurse is over 50 in 2012 (Donelan, Buerhaus, DesRoches, Dittus, & Dutwin, 2008)—will need replacing at an estimate of 1.2 million by 2020 (Bureau of Labor, 2012). Other contributing factors of the nursing shortage include changing demographics of the patient population, nursing burnout, and high nursing turnover rates (AACN, 2014).

 **Nursing burnout.**

 Not only is the nursing profession experiencing an aging workforce close to retirement, but also a high number of nurses are leaving the nursing profession due to decreased job satisfaction, high levels of stress, and experiences of moral distress (AACN, 2014; Burston & Tuckett, 2012). Decreased job satisfaction is related to the patient-to-nurse ratios, unhealthy work environments, high levels of stress, and, ironically, the increasing nursing shortage (AACN, 2014). Nurses, who already work a stressful job, have increased pressures to perform more efficiently and with more cost effectiveness with less staff (AACN, 2014). In addition to job stress, nurses also must contend with difficult ethical dilemmas that can result in moral distress (Burston & Tuckett, 2013; Ganz & Berkovitz, 2011).

 **Moral distress.**

As defined by Jameton (1984, p. 6), moral distress “arise when one knows the right thing to do, but institutional constraints make it nearly impossible to pursue the right course of action.” Moral distress can negatively affect the physical and emotional health of nurses and influence the patient care that those nurses provide (Burston & Tuckett, 2012; Garity, 2009). Moral distress can even negatively impact nursing students and their practice (Garity, 2009). Ethical dilemmas that lead to moral distress contribute to the attrition of nurses and nursing students.

As nurses suffer, so does the care of their patients. Decreased quality of patient care has led to rising mortality and morbidity rates (Grob, Leng, & Gallagher, 2012). Examples of aggressive treatment of terminally ill patients, unnecessary tests and procedures, deceptions to patients, and power imbalances (all factors that contribute to moral distress) can increase the risk of harm to patients (Garity, 2009). Also feelings of powerlessness, bitterness, cynicism, and exasperation caused by moral distress can deteriorate relationships between nurses and their patients (Burston & Tuckett, 2012).

**Lack of Diversity Education**

 **Rising diverse nursing student population.**

As the economy changes and the nursing shortage worsens, population of the nursing student will continue to become more diverse (Bednarz et al., 2010; Philibert et al., 2008). According to Jefferys (2004), the traditional nursing student is a white female under 25 years old who is enrolled in school full time, resides on campus, has no children, speaks English as first language, has U.S. high school diploma, and requires no remedial classes. Students of different backgrounds, including males and different ethnicities, and older students, are entering nursing education (Sutherland, 2010). This increasing diversity in student population presents challenges for nursing educators to meet, especially when teaching about cultural diversity.

**Perpetuation of social injustice.**

Historically, nursing education does not adequately cover cultural diversity. Nursing curricula, often Eurocentric, reduce cultural care to knowing health practices of different cultures (Browne et al., 2009; Sutherland, 2010). This practice of reduction ignores the social and structural inequities that increase health disparities (Browne et al., 2009). The current nursing education of cultural diversity perpetuates discrimination and social injustices among nursing students and patients (Browne et al., 2009). A more critical approach to cultural diversity is needed to teach culturally safe care to nursing students.

**Student’s Unpreparedness to Handle Ethical and Diverse Situations**

 When students transition from student to professional nurse, they are unprepared to hand ethical or diversity issues (Grob et al., 2012; Numminen, van der Arend, & Leino-Kilpi, 2008; Shaw & Degazon, 2008). Nursing literature shows that nursing students’ application of theoretical concepts is often lacking and inadequate (Benner, Sutphen, Leonard, & Day, 2010). This theory versus practice gap extends to ethical and culturally diverse dilemmas. Preparing nursing students to adequately handle these highly controversial issues will improve their practice and help socialize them into the culture of nursing (Benner et al., 2010; Shaw & Degazon, 2008).

**Literature Review**

**Ethics Education**

Traditionally, institutions of higher learning were created to train ministers and clergy (Colby, Ehrlich, Beaumont, & Stephens, 2003). The original curricula were steeped in religious theology and moral education. However, the advent of the scientific method transformed education into specialized, evidence-based learning pushing virtue and moral education to the periphery (Colby et al., 2003). Many institutions of higher education rely on general courses (such as Western Civilization or literature) or on extracurricular activities to convey moral education (Colby et al., 2003). As a result, youth today are apathetic, unethical, callous, disrespectful, and self-interested (Colby et al., 2003).

 To combat this trend in nursing school and to socialize students to the nursing profession, ethics (based on moral philosophy) is emphasized in the nursing curriculum (Grob et al., 2012; O’Connor, 2010; Shaw & Degazon, 2008). Benner et al. (2010) emphasizes the essential need of student’s obtaining moral imagination in order to become a “good nurse.” “With knowledge and experiential learning, students develop notions of good from their practice that transform their understanding of nursing’s social contract to care for vulnerable patients” (Benner et al., 2010, p. 166). This moral imagination, or ethical comportment, must be taught and habitually practiced to produce morally grounded nurses (Benner et al., 2010).

 Although ethics is taught in nursing programs, this content is often reduced to focusing on bioethics or the code of nursing ethics (Numminen et al., 2009; O’Connor, 2010). To encourage more critical thinking in students, nursing educators should present different theories of ethics (Grob et al., 2012; O’Connor, 2010). In today’s ethically charged atmosphere and multidisciplinary team approach, nursing students must be able to understand ethical content and theory and to make ethical decisions based on that knowledge (Grob et al., 2012; O’Connor, 2010). In addition to learning about moral philosophy, ethics education challenges nursing students to analyze their own beliefs, values and assumptions (Harding, 2013). To assist students with decision making and moral reasoning, nursing educators must plan in-depth ethics content in their nursing curricula (Garity, 2009; Grob et al., 2012; Park, Kjervik, Crandell, and Oermann, 2012).

**Cultural Diversity Education**

Culturally competent care, cultural diversity, culturally congruent care, and transcultural care are all hot topics in nursing. Culture and its relation to care did not emerge in nursing until Leininger published her first book in 1970 (Dudas, 2012). Now the AACN (2008) and Institute of Medicine emphasize the need to teach nursing students how to care for diverse populations to help reduce health disparities (Sanner, Baldwin, Cannella, Charles, & Parker, 2010; Shattell, Nemitz, Crosson, Zackeru, Starr, Hu, & Gonzales, 2013). Currently, nursing programs have integrated this content throughout the curriculum, through one or two classes (especially in community health), or through specific cultural classes or forums (Sanner et al., 2010; Sutherland, 2010). Regardless of how the content is integrated in nursing curricula, both students and faculty suggest that more learning experiences in cultural care are needed (Sanner et al., 2010; Shattell et al., 2013).

 The current way to teach cultural diversity in nursing is rooted in the Western Eurocentric paradigm (Browne et al., 2009; Harding, 2013). Defining culture as a set of beliefs, values, and thought reduce cultural care into learning about health practices, end-of-life customs, and eating habits (Browne et al., 2009). This way of thinking perpetuates the hegemonic practices that contribute to continued health disparities (Browne et al., 2009; Harding, 2013). An alternative definition of culture – “culture as a dynamic, power laden process created by people in relation to one another, their environments, and sociopolitical and historical contexts” (Browne et al., 2009, p. 173) – can encourage critical discourse about addressing cultural diversity and health disparities.

**Relationship between Ethics and Diversity**

Ethics and diversity are closely related. Ethical dilemmas and moral distress can occur when the values and beliefs of the nurse differs from the values and beliefs of the patient (Grob et al., 2012). Also giving care without regard to the patient’s assumptions, values, and beliefs constitutes unethical behavior (Harding, 2013). Both concepts of ethics and diversity are essential to the work of an excellent nurse and must be taught to improve nursing practice.

**Orienting Conceptual Framework**

 When educating nursing students and researching about ethics and diversity, social justice emerges frequently. Nursing literature reflects the inadequacies of current nursing education, especially with regards to social justice (Vickers, 2008). The current educational system in nursing uses indoctrinated philosophies of subordination to teach students how to pass standardized national examinations (Vickers, 2008). This system seems to be failing as evidence by the theory-practice gap (Benner et al., 2010). Critical pedagogy can transform current nursing educational practices into a more effective way to prepare students to become nurses.

**Defining Critical Pedagogy**

Critical Pedagogy, first theorized by Freire in 1970, emphasizes the emancipatory education (Freire, 2007). Rooted in Critical Social Theory, Critical Pedagogy identifies institutions of power that alter truth in order to oppress a marginalized group (Burbules & Berk, 1999; Freire, 2007). To be able to identify these imbalances of power and how it affects one’s society frees students to transform their knowledge and worldview (Freire, 2007; Vickers, 2008). This liberation allows students to promote social change and to view the world in a different context (Burbules & Berk, 1999; Freire, 2007; Vickers, 2008). Vickers (2008) also argues that this pedagogy will help students bridge that theory versus practice gap present in nursing education.

**Application of Critical Pedagogy**

 In nursing education, teaching ethics and cultural diversity with critical pedagogy reveals to students a deeper understanding of their world and society. With this pedagogy, students will use praxis – the melding of reflection and action (Freire, 2007) – to enhance their nursing practice (Kagan, Smith, Cowling, & Chinn, 2009). Also with an emancipatory worldview, the nursing student becomes empowered to transform current hegemonic practices in healthcare (Vickers, 2008). Education then will focus more on the process than the content driven curricula that currently exists (Vickers, 2008). To use Critical Pedagogy, nursing educators need to expose students to varying viewpoints and give them opportunities to critically sift through influences of power from the dominant society and to reflect on their own beliefs, values, and assumptions (Freire, 2007; Kagan et al., 2009; Vickers, 2008). This paradigm permits students to reflect on oppressive hegemonic practices and to act to change those practices and power imbalances, thus, ultimately improving healthcare and the nursing profession (Vickers, 2008).

**Justification for the Curricula Content Instructional Practices**

**Content**

 **Ethics.**

In healthcare settings and in nursing education, Beauchamp and Childress’ (2009) four principles of bioethics (beneficence, autonomy, non-maleficience, and justice) dominate ethical decisions (Cooper, 2012; Harding, 2013; O’Connor, 2010). However, to prepare students, nursing educators need to show students to a variety of moral philosophies (Garity, 2009). Moral philosophies, such as teleology, consequentialism, deontonlogy, virtue-based ethics, and care-based ethics should be included with the currently taught bioethics content (Garity, 2009). This exposure to a variety of thought on ethics enables students to become better-rounded nurses that are able to rationally argue solutions to ethical dilemmas (Garity, 2009).

 Furthermore, an in-depth look at American Nurses Association’s (ANA, 2001) *Code of Ethics for Nurses* can help students understand the values and ethics of the nursing profession (Garity, 2009; Numminen et al., 2008; Shaw & Degazon, 2008). The *Code of Ethics for Nurses* emphasizes concepts of non-maleficience, beneficience, social justice, veracity, fidelity, and patient autonomy (ANA, 2001). Learning about this professional ethical code serves to socialize students to the nursing role and to advance the nursing profession (Garity, 2009; Shaw & Degazon, 2008). Comprehensive knowledge and application of this code can also guide nurses in their ethical decision-making and inform the public of what the nursing profession’s principles and values are (Numminen et al., 2008).

**Diversity.**

 Currently, most nursing programs and nursing literature focuses on Leininger’s culturally competent care (Peery, Julian, Avery, & Henry, 2013). Leininger and McFarland (2002) argue that care is universal but expressed in different ways due to culture. Although culturally competent care is relevant to nursing practice and education, nursing students need to learn alternative ways of viewing culture, such as in the Critical Social Theory (Browne et al., 2009; Vickers, 2008). Revealing this alternative paradigm will promote the critical pedagogy and will reveal power imbalances that contribute to culturally incompetent care and to health disparities (Browne et al., 2009; Harding, 2013; Vickers, 2008).

 In addition to introducing cultural theory, this course will acquaint nursing students to the American Association of Colleges of Nursing’s (AACN, 1998) core professional nursing values. A more thorough look at the concepts of altruism, autonomy, human dignity, integrity, and social justice will help an increasingly diversifying student population to have a common culture of nursing (Shaw & Degazon, 2008). Applying the concepts of altruism, autonomy, and integrity will assist students to integrate ethical knowledge in their practice (Shaw & Degazon, 2008). Similarly, nursing students that use values of human dignity and social justice are able to assimilate knowledge of cultural diversity into their practice.

**Methods**

 **Readings and PowerPoint presentations.**

Nursing students must be introduced to the content of moral philosophy and cultural diversity. To achieve this introduction, readings, PowerPoint presentations, and links to related websites will be posted online. This method gives information to the students quickly and easily (Garity, 2009). Despite the fact that this method is traditionally used in both face-to-face and virtual classrooms and denotes passive student learning (Mikol, 2005), it will be integrated with the active learning strategies of debate, ethical decision-making models, case studies, service-learning, and reflective journaling.

 **Debate.**

Debate, the formal process of arguing, helps build students’ understanding of difficult nursing issues (Vandall-Walker, Park, & Munich, 2012). Argumentation contributes to students’ reasoning skills and gives them a platform to collaboratively learn and create new knowledge (Andriessen, 2006). Debate also pushes students to view different perspectives and use alternate solutions (Andriessen, 2006; Garity, 2009). Moreover, using an online, asynchronous format gives the students time to reflectively think on their argument as opposed to having to formulate a quick response in face-to-face dialogue (Vandall-Walker et al., 2012). In this online course, this method will hone nursing students’ debate skills and ethical knowledge needed to argue solutions to difficult ethical dilemmas in nursing.

 **Ethical decision-making models.**

Although the research on the use of ethical decision-making models is scarce (Numminen & Leino-Kilpi, 2007), this teaching strategy can facilitate the novice student in making ethical decisions in a logical manner (Cooper, 2012; Grob et al., 2012). While Garity (2009) emphasized three specific ethical decision-making models, Cooper (2012) synthesized four core steps from nine different models. Using Cooper’s (2012) four simplistic core steps in the online course will reduce confusion and anxiety in nursing students. These four stages are identify and assess ethical problems, think about all the people and structures involved in the decision, create all possible solutions to the problem, and implement the final decision (Cooper, 2012). This method is also congruent with critical pedagogy, because it gives the students an opportunity to view different perspectives and power imbalances.

**Case studies.**

Case studies are the description of a simulated situation of a clinical experience that permits students to explore nursing assessment and interventions (Delpier, 2006; Ohman, 2010). Case studies have shown to increase critical thinking and promote collaborative discussion (Delpier, 2006; Garity, 2009). Case studies can also help identify areas of misunderstanding in the student’s learning (Ohman, 2010). For this portion of the online class, integrating both cultural context and ethical dilemmas into case studies will help nursing students integrate and synthesize their knowledge to deepen their understanding. These case studies will also provide nursing students a safe place to explore their knowledge and to apply it to their own practice.

**Service-learning.**

Service-learning, a “form of experiential education in which students engage in activities that address human and community needs together with structured opportunities intentionally designed to promote student learning and development” (Jacoby, 1996, p. 5), facilitates the immersion of students in a different culture than their own (Amerson, 2010; Gupta, 2006; Groh, Stallwood, & Daniels, 2011). This teaching method has shown to improve cultural awareness, to develop civic duty, and to generate social justice in nursing students (Groh et al., 2011). This type of learning can be used locally or abroad and is often used in community health courses in nursing programs (Amerson, 2010; Groh et al., 2011). For this online course, students will be required to do a service-learning project with a group of people who are different from themselves. The students will work collaboratively with the faculty to create the project in a meaningful way. The aim of this activity is to produce empathy, to enhance cultural awareness, and to immerse the student in a different environment.

**Reflective journaling.**

In Freire’s (2007) praxis, reflection and action are intertwined and necessary to perpetuate continuing critical pedagogy. Reflective journaling solidifies this abstract concept of praxis and permits the students to reach a deeper level of understanding (Kennison, 2012; Su & Osisek, 2011). This teaching strategy will also help students identify their own values, beliefs, worldviews, and biases and strengthen their nursing practice (Kennison, 2012). Asselin (2011) recommends using guided reflection to achieve deeper contemplation in students who has never used reflective journaling before. For this online course, students will be completing a guided reflection journal for all modules and content of ethics and diversity. This compilation develops the students’ cognitive and affective skills and improves their understanding of these difficult nursing concepts.

**Benefits of Using Technology in Education**

**For Students**

Online courses allow students the flexibility and convenience of incorporating education into their professional and personal lives (Bromley, 2010). Students also enjoy the autonomy, collaboration, and building of past knowledge and experience often integrated into online courses (Warelow, Wells, & Irwin, 2011). Other benefits of online learning include more student participation, the emerging voice of the “quiet” student, and deeper understanding of the content (Bromley, 2010; Hsu & Hsieh, 2011; Revere & Kovach, 2011). Students today tend to be more technologically savvy and expect technology to be incorporated into their educational experiences (Bristol, 2010). All these benefits of online learning will provide a more meaningful, learning experience for students.

**For Teachers**

Just as students benefit from online courses, so do the educators who design and implement them. With online teaching, educators can create courses that appeal to students with various learning styles (Bromley, 2010; Revere & Kovach, 2011). Virtual classrooms also provide a convenient platform for more active learning strategies (Revere & Kovach, 2011), such as those contained in this course. Other advantages to teaching online includes less paper and travel costs, the flexibility of teaching at home, and more academic freedom through increased peer collaboration and accountability (Bromley, 2010; Paulus, Myers, Mixer, Wyatt, Lee, & Lee, 2010).

**Conclusion**

Ethics and diversity are essential concepts to teach students to prepare them for the nursing role. Using Critical Pedagogy to teach these concepts will expose students to varying viewpoints and will help deepen their understanding of these difficult issues. Blending this teaching paradigm with the various learner-centered teaching strategies will enhance the students’ learning and will help them develop higher critical thinking skills. Moreover, centering this approach to ethics and diversity in an online class will assist students to achieve the best educational experience possible and educators to create better prepared nurses.

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