

## Original Paper

# Professional Ethics Relationship with Patient's Rights Charter Observance among Nurses and Midwives



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## ABSTRACT

**Introduction:** Respect for patients' rights and observance of professional ethics standards improves medical services that will have an essential role in promoting patients' health.

**Objective:** This study aimed to determine the relationship between awareness of patient's rights charter and professional ethics with patient's rights charter observance.

**Materials and Methods:** This analytical correlational study was performed on 285 staff members (196 nurses and 85 midwives) working in 2 hospitals affiliated to Alborz University of Medical Sciences, Iran, and 2 social security hospitals. They were selected using a stratified random sampling method. The study data were collected using the social odemographic characteristics questionnaire, awareness and observance of the patient's rights, and professional ethics charter questionnaires. Descriptive statistics and inferential statistics, including the independent t-test, Pearson correlation, Chi-square tests, and multivariate linear regression, were used for data analysis.

**Results:** The Mean±SD ages of nurses and midwives were 36.2±8.3 and 37.5±7.9 years, respectively. The results also showed an association of professional ethics and awareness of patient's rights charter with patient's rights charter observance in both nurses (P=0.0001) and midwives (P=0.0001). Based on multivariate linear regression analysis, there were relationships between gender (B=-0.3, 95%CI; -2.0, 2.0; P=0.000), work experience (B=-0.6, 95%CI; -4.0, 3.0; P=0.000), marital and employment status (B=-3.2, 95%CI; -6.0, -0.0; P=0.045), in nurses and between job position (B=9.5, 95%CI; 5.4, 13.5; P=0.000), interest to work (B=-7.9, 95%CI; -11.5, -4.3; P=0.000), and income status (B=6.3, 95%CI; 3.3, 9.2; P=0.000), in midwives with Observance of the Charter of Patient Rights.

**Conclusion:** It is possible to improve compliance with the charter of patient's rights and its dimensions by strengthening the knowledge of nurses and midwives in this area and their professional ethics, which results in patient satisfaction in this area.

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## Highlights

- Respect for patients' rights is one of the most important goals of group therapy activities that will have an essential role in promoting patients' health.
- Professional ethics is a process of rational thinking to preserve and disseminate professional values and provide the optimum situation for realizing the rights of stakeholders in the light of desirable social relations.
- One of the principles of professional ethics is to pay attention to and protect patients' rights and eventually make ethical decisions in favor of patients' rights.

## Plain Language Summary

On the importance of ethics and using ethical charter in organizations, we can state that ethics is considered as the regulator of human relations and management of the organization. In this study, we assessed the relationship between the charter of patient's rights and professional ethics with respect to the charter of patient's rights among 285 nurses and midwives. The results showed a relationship between professional ethics and awareness of the charter of patient's rights in nurses and midwives. Based on the results, we suggest that the knowledge and professional ethics of nurses and midwives be promoted through proper planning, which will lead to patient satisfaction.

## Introduction

Respecting patients' rights is the country's top priority in the field of medical ethics [1]. Disrespecting the patients' rights will slow down the recovery process, increase the number of days of hospitalization and the cost of patient care [2]. Respect for patients' rights is one of the most important goals of a health system that will have an essential role in promoting patients' health [3]. The critical point is that patients' rights are among the key pillars in defining standards for the governance of clinical services [4]. Consequently, ethical codes, in addition to enhancing the quality of care and increasing public confidence in the profession, will be used to achieve better performance. Any interference in this area may overshadow the scientific results and best care [5].

The role of ethics in actions and behaviors, in decisions and choices, in attitudes and communications is essential and decisive, and a manager cannot succeed without a moral system [6]. Professional ethics is a process of logical thinking to preserve and disseminate professional values to provide the optimal situation for realizing the rights of stakeholders by desirable social relations [7] and is one of the basic elements of professional education. It obliges the nursing and midwifery staff to observe the principles of ethics so that the patient receives care with more confidence and trust. One of the principles of professional ethics is attention to the patients' rights and protecting them. So that appropri-

ate ethical decision are made to protect the patients' rights. In fact, in addition to maintaining and promoting patients' health, their rights should be considered and strived for its observance [8]. However, the results of various studies have shown that in Iran, awareness of patient's rights charter and compliance with them by medical staff is not in good condition [9, 10]. Fazeli et al. showed that the status of observing the charter of patient's rights in the educational-therapeutic centers is favorable [11]. Another study showed that midwives' awareness of ethical codes and awareness of patients' rights is also effective in respecting the rights of pregnant women [12].

Considering that studies show that awareness of the patients about their rights has increased, health care providers will not be able to face the challenges without knowledge of ethical concepts and related topics, including "patient's rights". Therefore attention to these concepts is of particular importance for providing quality care [13]. Knowing the code of ethics and the charter of patients' rights by nursing and midwifery staff will lead to better communication with and support for the patients and greater patient satisfaction. On the other hand, this knowledge reduces medical costs and errors and, in the end, professional independence and improvement of patients' services. This study aimed to determine the relationship between awareness of patient's rights charter and professional ethics with patients' rights charter observance in Alborz Nursing and Midwifery staff.

### Materials and Methods

This research is an analytical-correlational study performed in some hospitals with a high referral from October 2019 to July 2020. The hospitals were affiliated with Alborz University of Medical Sciences and Social Security Organization. The inclusion criteria were having a university degree in midwifery or nursing, having at least one year of experience in midwifery or nursing in the current ward, and being interested in participating in the study and working at different work shifts.

The sample size was calculated as 265 using the Cochran formula with a 5% error coefficient, and p and q as 50%. Considering the possibility of dropout, 5% was added to the number of samples, and finally, 281 cases (196 nurses and 85 midwives) participated in this study.

The study population consisted of 855 nursing and midwifery staff working in 4 hospitals. The eligible samples from each hospital, proportional to the total number of nursing and midwifery staff, were entered into the study by simple random method and by lottery (Figure 1). Data collection tools comprised three questionnaires: demographic questionnaire (age, gender, marital status, education, type of job, place of work, position, field of interest, work experience, and income situation for nursing and midwifery personnel), the professional ethics questionnaire, and the two-part questionnaire on the level of awareness and observance of the charter of patients' rights.

#### Questionnaires related to nurses

The researcher-made nurses' rights charter awareness questionnaire consisted of 22 questions in 5 domains:

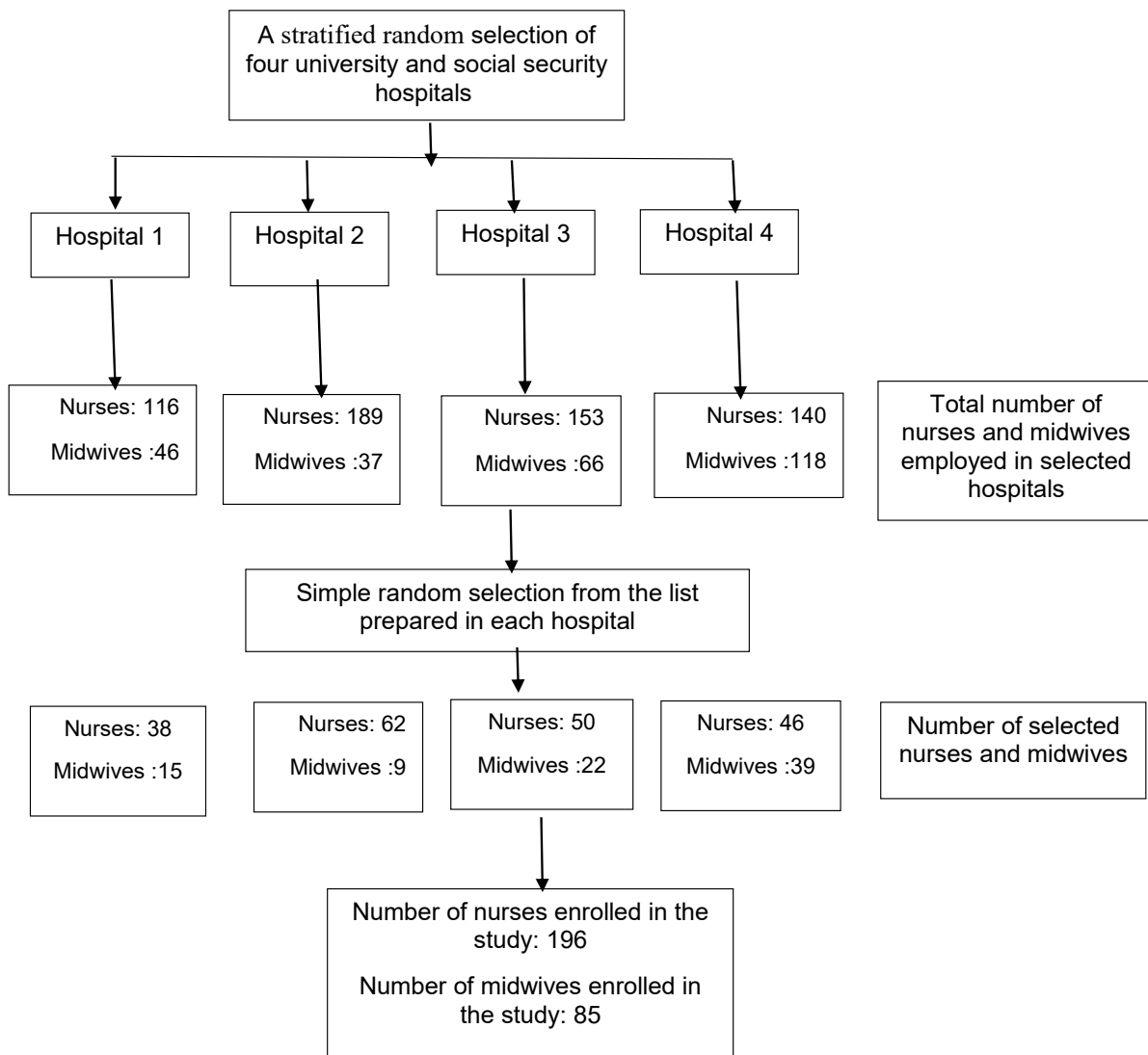


Figure 1. Chart of sampling and selection of individuals

get optimal health services (6 items), patient's access to information (8 items), the right to freely choose and make decisions (5 items), respect for patient privacy (2 items), and access to an efficient complaint handling system (1 item). They were scored on a 3-point scale from 0 to 3, with a total score between 0 and 66.

Another questionnaire was the patient's rights charter observance designed based on the patient's charter in health care standards issued by the Ministry of Health and Medical Education of Iran [14, 15]. It consisted of 22 questions in five domains of the patient rights charter: respect for patient privacy (4 items), patient access to information about their illness (7 items), the right to choose and make decisions freely (7 items), get optimal health services (2 items) and an efficient complaints handling system (2 items). The total score ranges between 0 and 66.

Another researcher-made questionnaire was prepared for assessing nurses' professional ethics criteria derived from seven dimensions of nursing professional ethics according to the Iranian Nursing Ethics Code of 2011, prepared by the Ministry of health and medical education of Iran. It included items such as confidentiality, authority, charity, justice, respect for human life, no harm to one's self, and honesty [15]. This questionnaire was designed by Dehghani and his colleagues [16] and consisted of 31 questions that assessed nurses' perceptions of professional ethics in three dimensions of responsibility (11 questions), improving the quality of patient care (8 questions), and respect for the patient (12 questions). The total score of this tool ranges from 0 to 124.

### Questionnaires related to midwives

The researcher-designed pregnant women's charter awareness questionnaire contains 23 questions in 5 domains based on the pregnant women's charter. These domains are the right to proper care and treatment (8 items), the right to respect and informed consent (5 items), the right to protect privacy and secrecy (3 items), right to choose and participate in decisions (2 items), and the right to respectful conduct (5 items). The total score ranges from 23 to 115. To equalize the scores of each factor, they were balanced based on 100. That is, the score for the whole instrument is a score between 0 and 100.

Another questionnaire was the researcher-designed pregnancy rights observance. It was developed using the pregnancy rights charter prepared by the World Health Organization [17] and contains 24 questions related to the research objectives. It is scored on a 5-point

Likert-type scale. It has 5 domains of the right to receive midwifery care (4 items), the right to privacy, and the principle of maternal privacy (4 items), the right to respectful behavior (5 items), the right to choose and participate in free mother's decisions (4 items), and the right to respect and informed consent (7 items). In the end, the total score is between 24 and 124.

The researcher-designed questionnaire for assessing professional ethics in midwifery was based on ethical codes of the midwifery profession in the Islamic Republic of Iran. It has been approved by the Department of Midwifery of the Ministry of Health and Medical Education in Iran [18-20]. It included professional commitment (6 questions), providing services to the client and their associates (7 questions), professional communication with colleagues (5 questions), observance of their rights (3 questions), education, and research (4 questions), and management (6 questions). To equalize the scores of each factor, they were balanced based on 100. That is, the score for the whole instrument is a score between 0 and 100.

In this study, the content and face validities of the questionnaires were examined by the opinions of 15 faculty members of the Nursing and Midwifery Schools, and the required corrections were made. The test-retest method was applied for determining the reliability of the questionnaires by 30 participants in the two-week interval. Also, the Intraclass Correlation Coefficient (ICC) and internal consistency (the Cronbach  $\alpha$ ) were calculated for the questionnaires. The obtained values were as follows: ICC=0.79 and the Cronbach  $\alpha$ =0.84 for the rights charter awareness questionnaire, ICC=0.81 and the Cronbach  $\alpha$ =0.92 for the patient's rights charter observance, ICC=0.79 and the Cronbach  $\alpha$ =0.94 for professional ethics in nurses, ICC=0.84 and the Cronbach  $\alpha$ =0.79 for the pregnant women's charter awareness, ICC= 0.81 and the Cronbach  $\alpha$ =0.83 for the pregnancy rights observance, and ICC=0.78 and the Cronbach  $\alpha$ =0.82 for the professional ethics in midwives.

In the gathering data step, the researcher first stated the study objectives and explained how to complete the questionnaires for the subjects. After obtaining their written consent, the researcher provided the questionnaires to the eligible personnel. They also offered clarifications to answer the questions and were asked to complete the questionnaires in 30 minutes. Descriptive statistics and inferential statistics, including the independent t-test, Pearson correlation, Chi-square tests, and multivariate linear regression analysis, were used for data analysis.

## Results

The Mean±SD ages of nurses and midwives were 36.2±8.3 and 37.5±7.9 years, respectively. The majority of nurses (51.5%) and midwives (41.2%) were single. The Mean±SD working years for nurses was 13.5±8.3 and for midwives 14.1±8.5 (Table 1). The Mean±SD score of nurses' observing the patient's rights charter was 49.4±9.0 (range: 0-66). The Mean±SD of nurses' professional ethics score was 86.7±18.4 (range: 0-124). The Mean±SD of the score of awareness of the patient's rights charter by nurses was 56.2±10.6 (range: 0-66). There was a significant positive correlation between professional ethics and awareness of patient's rights charter with respect to patient charter among nurses ( $r=0.422$ ,  $P=0.0001$  and  $r=0.529$ ,  $P=0.0001$ , respectively) (Table 2).

In the midwives group, the Mean±SD score of observing the patient's rights charter was 102.8±9.0 (range: 24-124). The Mean±SD score of professional ethics was 84.4±8.0 (range: 0-100). The Mean±SD score of awareness of the patient's rights charter was 83.3±7.7 (range: 0-100). There was a significant positive correlation between professional ethics and awareness of patient's rights charter with respect to patient's rights charter among midwives ( $r=0.839$ ,  $P=0.0001$ , and  $r=0.747$ ,  $P=0.0001$ , respectively) (Table 3).

To determine demographic predictors of compliance with the patient's rights charter, between variables such as age, income, gender, working age, employment status, and marital status in nurses and midwives with respect to the patient's rights charter, which was correlated with  $P$  value  $<0.2$  were entered separately for nurses and midwives by multivariate linear regression model with backward strategy. Gender ( $B=-0.3$ , 95%CI: -2.0, 2.0;  $P=0.0001$ ), work experience ( $B=-0.6$ , 95%CI: -4.0, 3.0;  $P=0.0001$ ), marital status of divorced or deceased spouse against single ( $B=-3.2$ , 95%CI: -6.0, -0.001;  $P=0.045$ ) and employment status ( $B=-3.0$ , 95%CI: -0.7, 1.0;  $P=0.0001$ ) remained in the model and could predict 5.8% of the variance in the compliance with the patient's rights charter in nurses. In midwives, the variables of job position ( $B=9.5$ , 95%CI: 5.4, 13.5;  $P=0.0001$ ), interest in job ( $B=-7.9$ , 95%CI: -11.5, -4.3;  $P=0.0001$ ), and income status ( $B=6.3$ , 95%CI: 3.3, 9.2;  $P=0.000$ ) remained in the model and could predict 63.7% of the variance in the compliance with the patient's rights charter (Table 4).

## Discussion

One of the results of the present study indicates that nurses' awareness of patients' rights was moderate and of the midwives was high. This result is similar to a study result by Hassan et al., which showed that

Table 1. Samples' demographic characteristics

Variables	No. (%)		P*	Variables	No. (%)		P*
	Nurses (n=196)	Midwives (n=85)			Nurses (n=196)	Midwives (n=85)	
Gender	Female	99(50.5)	-	Job interest	Yes	159(81.1)	0.294
	Male	97(49.5)			No	37(18.9)	
Marital status	Single	101(51.5)	0.373	Income status	Unfavorable	58(29.6)	0.969
	Married	52(26.5)			Somewhat favorable	87(44.4)	
	Divorced or deceased spouse	43(21.9)			Favorable	51(26.0)	
Job position	Personnel	144(73.5)	0.166	Employment status	Official	97(49.5)	0.061
	The department responsible	33(16.8)			Plan or contract	42(21.4)	
	Supervisor	19(9.7)			Contractual	57(29.1)	
The effectiveness of university educational content	Yes	101(51.5)	0.353	Level of education	Technician or expert	137(69.9)	0.059
	No	95(48.5)			Senior	59(30.1)	

\* Chi-square test.

**Table 2.** Relationship between professional ethics and patient’s rights charter awareness with patient’s rights charter in nurses (n=196)

Variables	Mean±SD	Correlation with	
		Professional Ethics, r (P*)	Patient’s Rights Charter Awareness, r (P*)
Observing the <b>patient’s rights charter</b> (0-66)	49.4±9.0	0.529 (0.0001)	0.422 (0.0001)
Get optimal health services	4.8±1.4	0.372 (0.0001)	0.420 (0.0001)
Patient’s access to information	16.0±0.3	0.349 (0.0001)	0.277 (0.0001)
The right to choose and make decisions freely	11.3±2.8	0.473 (0.0001)	0.491 (0.0001)
Respect for patient’s privacy	9.8±3.5	0.434 (0.0001)	0.272 (0.0001)
An efficient complaints handling system	3.1±2.0	0.292 (0.0001)	0.288 (0.0001)
<b>Professional ethics</b> (0-124)	86.7±18.4	-	-
Responsibility	28.1±5.6	-	-
Respect the patient	37.0±9.0	-	-
Improving the quality of patient care	21.9±7.7	-	-
<b>Awareness of patient’s rights charter</b> (0-66)	56.2±10.6	-	-
Patient’s access to information	20.4±3.8	-	-
Get optimal health services	16.8±7.4	-	-
The right to freely choose and make decisions	12.8±6.1	-	-
Respect for patient privacy	4.7±1.5	-	-
Access to an efficient complaint handling system	1.0±0.4	-	-

\* Pearson correlation

nurses’ awareness of patients’ rights is moderate [21]. But it is inconsistent with the study of Mortazavi et al. that showed that nurses’ and physicians’ awareness of patients’ rights is low [22]. Regarding the observance of the charter of patients’ rights, the present study showed that the charter of patients’ rights was moderate among nurses and high among midwives. A study in Iran showed that compliance with health services by hospital providers was not satisfactory [23]. This finding is different from the results of our study. Obviously, commitment to professional ethics and awareness of the charter of patients’ rights can affect the professional behavior of nurses. Commitment to professional ethics and respect for patients’ rights in providing nursing care can probably guarantee a better quality of care.

In the present study, the lowest score in terms of awareness and observance of patients’ charter of rights by midwives belonged to the dimension of choice in decision making. Since patient’s participation in decision-

making and providing sufficient information to patients can increase the efficiency of treatment by increasing the knowledge of both parties, it is clear that midwives less time spent to talk with patients about their condition and attention to their concerns and as a result, the patient’s opinion is not considered in choosing the methods and steps of treatment. Therefore, to observe this principle, education and creating a culture in this field are necessary [24]. Regarding nurses, the lowest score regarding awareness and observance of the charter of patients’ rights belonged to the complaints handling system. As it is clear, knowledge of the laws is usually a precondition for its implementation. To effect the laws, an executive guarantee is required, and one way of guaranteeing is the awareness of the rightful owners of their rights [25]. In providing midwifery services, attention is paid to the quality of services in the care of mother and fetus/newborn. Awareness of the charter of patients’ rights, observance of the provisions of this charter, and providing services based on ethics can

**Table 3.** Relationship between professional ethics and patient's rights charter awareness with patient's rights charter in midwives (n=85)

Variables	Mean±SD	Correlation with	
		Professional ethics, r (P <sup>*</sup> )	Patient's rights charter awareness, r (P <sup>*</sup> )
<b>Observing the patient's rights charter (24-124)</b>	102.8±0.9	0.747 (0.0001)	0.839 (0.0001)
The right to care	17.9±1.8	0.774 (0.0001)	0.894 (0.0001)
Right to respect and satisfaction	29.9±3.6	0.535 (0.0001)	0.757 (0.0001)
Right to privacy	17.4±1.8	0.489 (0.0001)	0.667 (0.0001)
The right to confidentiality	21.0±2.5	0.721 (0.0001)	0.835 (0.0001)
The right to make decisions	16.5±2.0	0.409 (0.0001)	0.499 (0.0001)
Professional ethics (0-100)	84.4±8.0	-	-
Professional commitments	26.1±2.5	-	-
Providing customer service	29.3±3.2	-	-
<b>Professional communication with a colleague</b>	13.6±0.9	-	-
The right to self-respect	16.6±6.1	-	-
Education and research	16.0±2.1	-	-
Management	24.2±3.0	-	-
<b>Awareness of patient's rights Charter (0-100)</b>	83.3±7.7	-	-
The right to care	35.5±2.8	-	-
Right to respect and satisfaction	19.2±2.4	-	-
Right to privacy	21.9±2.0	-	-
The right to confidentiality	20.4±2.9	-	-
The right to make decisions	8.3±1.3	-	-

\* Pearson correlation.

lead to better health services for mothers and children. Another result of this study was the high score of professional ethics among nurses and midwives. Another study aimed to assess awareness and compliance about professional ethics as perceived by nursing personal and patients. The results showed that nursing personnel had a moderate awareness level about professional ethics. There was a statistically significant relationship between nursing personnel awareness and their compliance regarding professional ethics, which is consistent with the present study result [26]. A study in Iran to evaluate the attitude of nursing and midwifery students towards professional ethics showed that the majority of them had a positive attitude towards professional ethics [27]. This result is consistent with the present study. Of course, this

study was performed among midwifery and nursing students, while the present study was conducted on working nurses and midwives. But a study by Gonzalez-de Paz et al. showed that nurses' professional ethics are low in practice, which differs from the present study [28].

Also, according to the results, there is a relationship between awareness of patient's rights charter and observance of patient's rights charter. Thus, in nurses and midwives who are more aware of the charter of patients' rights, its observance is better. A study in Iran showed that the awareness of patients' rights is an essential component in its compliance by nurses, and there is a significant relationship between them [29]. Our results are consistent with their study results too.

**Table 4.** Individual-social predictors of patient rights charter based on multivariate regression model by nurses (n=196) and midwives

Variables	Regression Coefficient		t	P	SE	95%CI Lower to upper	
	Non-Standard	Standard					
Nurses (n=196)							
Gender (Reference: female)	Male	-0.3	-0.01	-0.2	0.0001	1.3	(-2.0 to 2.0)
Working years (Reference: 1-10 years)	11-20	-0.6	-0.03	-0.3	0.0001	2.2	(-4.0 to 3.0)
	21-30	3.7	0.18	2.0	0.037	1.7	(0.0 to 7.0)
Marital status (Reference: Single)	Married	-2.9	-0.13	-1.7	0.092	1.7	(-0.6 to 0.01)
	Divorced or deceased spouse	-3.2	-0.15	-2.0	0.045	1.5	(-0.6 to -0.01)
Employment status (Reference: Official)	Plan or contract	-2.9	-0.14	-1.6	0.0001	1.8	(-0.6 to 0.01)
	Contractual	-3.0	-0.13	-1.4	0.0001	2.1	(-0.7 to 1.0)
Adjusted R <sup>2</sup> =5.8%							
Midwives (n=85)							
Job position (Reference: Personnel)	The department responsible	9.5	0.32	4.7	0.0001	2.0	(5.4 to 13.5)
	Supervisor	7.1	0.21	3.2	0.002	2.2	(2.7 to 11.6)
Job interested (Reference: Yes)	No	-7.9	-0.31	-4.4	0.0001	1.8	(-11.5 to -4.3)
Income status (Reference: Somewhat favorable)	Unfavorable	-4.0	-0.19	-2.6	0.012	1.6	(-7.1 to -0.9)
	Favorable	6.3	0.31	4.3	0.0001	1.5	(3.3 to 9.2)
Adjusted R <sup>2</sup> =63.7%							

In a study to assess patient’s rights awareness and compliance by nurses, Kim et al. showed that awareness of patient’s rights is an essential component in nursing compliance, and there is a significant relationship between these two variables [30]. Our result agrees with their study result.

Several studies have shown a relationship between professional ethics and competence in clinical practice, meaning that professional ethics leads to the provision of appropriate services and care for the patients [31-35]. It seems that midwifery and nursing education in Iran has caused the students’ high awareness of the charter of patients’ rights and commitment to ethical care.

Another result of our study was the relationship between gender, work experience, marital status, and employment status with nurses’ compliance with the patient’s rights charter. There was also a relationship between variables such as job title, job interest, and income status with observance of the patient’s rights

charter in midwives. These results were in line with several studies’ results [36-39].

One of the limitations of the present study is the nature of the study, so the relationships obtained from this study cannot be regarded as causal. Also, due to time constraints, it was impossible to evaluate the studied variables among clinical faculty groups that also teach students. On the other hand, due to limited access to midwives, it was impossible to compare these variables between these two occupational groups.

In the results of our study, there was a relationship between professional ethics and awareness of patient’s rights charter with respect to patient’s rights charter in both nurses and midwives. Gender, work experience, marital status, and employment status were also related to compliance with the patient’s rights charter in nurses and job position, job interest, and income status with respect to the patient’s rights charter in midwives. Therefore, it is possible to improve compliance with the



charter of patient rights and its dimensions by planning to improve the awareness of nurses and midwives in this area and their professional ethics. This training will result in patient satisfaction in this domain.

## Ethical Considerations

### Compliance with ethical guidelines

The study data were collected after obtaining the approval from Research Deputy of the Faculty of Nursing and Midwifery of Karaj Azad University (Code: IR.IAU.SRB.REC.2017.80). All participating patients signed the informed consent form.

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### Author's contributions

Conceptualization and methodology: Marzieh Bagherinia and Leila Mohamadkhani Shahri; Data collection: Mansooreh Tajvidi and Leila Mohamadkhani Shahri; Data analysis and writing – original draft: Samaneh Sabet Birjandi and Leila Mohamadkhani Shahri; Reviewing the final edition: All authors.

### Conflict of interest

The authors declared no conflict of interest.

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