
Case Report

The Effect of Ethics Education Programme on The Nurses' Level Of Ethical Decision Making: A Phenomenology Study

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Abstract:

Objective: This study was carried out to examine the effect of the ethical training program applied to the nurses on the nurses' level of capability for ethical decisions.

Methods: This study was carried out as a qualitative research methods of descriptive phenomenology and the research sample consisted of 13 nurses. The research was carried out in three stages. In the first stage, the first data were collected by the face to face individual interviews lasting approximately 90-120 minutes. In the second stage of the research, "Ethical Training Program" was applied. In the third stage of the research, data were collected by the depth interview method. Nvivo 11 package software and "Content Analysis" method were used in evaluation of the qualitative data.

Results: In the interviews with the nurses before the ethics education, 8 themes and 33 sub-themes were determined. After the ethics education, 10 main themes and 22 sub-themes were determined. After the education, the nurses could express their opinions about ethical decision making and ethical decision process which they couldn't express before the education. **Conclusions:** In conclusion, after the "Ethical Training Program", there was a positive change in the nurses' "Ethical Basic Knowledge" and "Level of Capability of Ethical Decision".

Keywords: Nurse, Ethics, Training, Ethical Decision

Introduction

The developments in science and technology have caused the increase of the ethical issues and ethical dilemmas in the field of health care and the healthcare professionals that were in touch with the individuals directly have become faced with problems¹. All those reasons and the complexity of today's health care have also caused changes in nursing care and caused the nurses frequently to face with ethical issues. It was stated that the nurses frequently had ethical dilemma about the issues, such as the nurses' differences of opinions with the other members of the team or with the institution about the patient care and treatment, protecting the patient rights, care of the patient in terminal stage, taking the consent of the patient, sharing the limited resources, the colleagues' having unethical attitudes, demanding the doctor, diagnosis for the patient and his/her family, not giving information about the treatment and prognosis, the uncertainty of the nurses' duties, authorities, and responsibilities, misadministration to the patient, not giving importance to the patient's freedom, and carrying out research on the patient without permission². In this sense, the

nurses who are liable for the protection of the individuals' physical and mental integrity should realize the ethical issues and should have the ethical sensitivity in order to prevent the individuals being damaged. Thus, the nurses should make the most correct ethical decision for the ethical issues about many issues in the scope of application. Making an ethical decision is important in terms of being aware of the ethical issues emerging in the healthcare field and of showing a professional approach to ethical issues. Making an ethical decision in terms of nursing profession expresses the nurse's making a judgement by using her cognitive abilities against any situation including ethical problem and reflecting the action that judgement requires^{3,4}.

Ethics education makes the systematic approach easier by providing a facilitative effect in performing the contemporary nursing practices by developing the nurses' abilities of ethical decision making and by developing their mentality of analytical thinking. In order to make the best ethical decision, the nurses should know the theory of ethics, ethical principles, ethical codes, and the ethical approaches in practice. In this

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sense, the nurses should get the necessary information about the ethics in their initial vocational education¹. Thus, knowing the ethical principles and codes very well provides developing attitude and behaviour accordingly and giving effective and virtuous care by the nurses having critical thinking and ethical sensitivity^{1,5}.

When the researches about the ethics education were reviewed; it was concluded that, in the study carried out by Görgülü and Dinç (2007), ethics education had been given by the nursing instructors incompetent in that field in the nursing schools in Turkey, the content of ethics lesson had been mostly integrated into other theoretical nursing lessons and had been mostly unsuitable for the literature¹. When the literature was reviewed, it was seen that the nurses' situation of ethical decision making had been considered in different aspects, but there had been no research result examining the effect of an ethics education programme given to nurses. However, being able to make ethical decision in nursing profession is the necessity of giving quality care service and being a professional job. For these reasons, it was needed to carry out the study. The aim of this research is to examine the effect of the ethics programme applied to the nurses on the nurses' level of ethical decision making.

Material and Methods**Design and Setting**

This study was carried out as a qualitative research methods of descriptive phenomenology was used. The research was carried out in a university hospital in the west of Turkey between the dates of 15th of October 2015 and 29th of February 2016.

Participants

In order to determine the participant nurses, first of all, an announcement was made by the hospital's "Probel Information System" about the research and the "Ethics Education Programme" that would be given and about the contact information for the voluntary participants to reach the researcher for 2 days. In addition, detailed information was also verbally given by the researcher by face to face meeting method in all units of the hospital. The number of the participants consisted of 13 nurses.

Data Collection**Instruments**

For data collection of the research, "Nurse Self-Description Form", "Semi-Structured Interview Form I", "Semi-Structured Interview Form II". Nurse Self Description Form consisted of 12 questions prepared as open-ended and close-ended to determine the nurses' socio-demographical and vocational characteristics and opinions about the ethics education. Semi-Structured Interview Form I was prepared by reviewing the related literature by the researcher and it included the questions about the nurses' knowledge, opinions, and experiences about ethics, principle, concepts of value, occupational ethics, and ethical decision making. Expert

opinion was taken for the applicability of form, a pilot study was carried out to provide the validity and reliability of the interview form and it was controlled that if the questions were understood or not. The form included 6 questions and subquestions belonging to those questions based on the basic information and opinions about ethics and nursing ethics concepts. Semi-Structured Interview Form II included 4 cases based on different issues prepared by benefiting from the literature and by taking the expert's opinion and based on the violation of ethical principles and values. That form aims to determine the nurses' ability of ethical decision making by the cases it included and questions about those cases. Expert opinion was taken for the applicability of form, a pilot study was carried out to provide the validity and reliability of the interview form and it was controlled that if the questions were understood or not.

Data Collection Procedure

The application of the study was carried out in three stages. In the first stage, the first data were collected by using "Semi-Structured Interview Form I" and "Semi-Structured Interview Form II" and by face to face individual interviews lasting averagely 90-120 minutes. In the second stage of the research, "Ethics Education Programme" of which the content was determined by the researcher in accordance with the related literature and opinions of expert was applied. "Ethics Education Programme" was carried out in 8 sessions, as a session for a week and as each session averagely 90 minutes long. "Ethics Education Program" were included 8 fundamental titles related to the subject that would develop the participants' ability to make ethical decisions. The subject headings were conveyed to the participants with subtitles in detail and in this sense, PowerPoint presentations for each subject were prepared. The third stage of the research was carried out after the "Ethics Education Programme" was completed. Face to face individual interviews were carried out with the participants averagely for 90-120 minutes by reusing "Semi-Structured Interview Form I" and "Semi-Structured Interview Form II" which were applied by the researcher in the first stage of the research.

The interviews carried out in the first and third stages of the research were carried out face to face by using the technique of "Depth Interview". A pre-interview was made before the interviews and interviews were started by giving the information about the workplace of the researcher, the aim of the research, ethics, and that the interviews would be recorded by a recorder. A general conversation was held before the interview and it was provided that the interviewee warmed towards the researcher and an environment of trust was created. The researcher sat face to face with the interviewee. The researcher tried to make the interview continue in a sympathetic atmosphere during the interview. That kind of approach provided the interviewees to be sincere and openhearted. It wasn't monitored that the interviewees were uncomfortable during the interviews. Semi-structured interview was also recorded by a recorder. The observations about the individuals were also noted after the interviews.

Data Analysis

Quantitative data were evaluated by statistical packaged software of Statistical Package for Social Sciences (SPSS) for Windows 21.0 in computer environment. Number and percentage were used for the evaluation of the quantitative data. Nvivo packaged software and "Content Analysis" method were used for the evaluation of the qualitative data. Concept maps were created according to Nvivo software. Themes and sub-themes were determined according to "Content Analysis" method. "Content Analysis" is a method allowing the depth analysis of the data collected and finding out the themes and dimensions which were unspecified before.

Ethical Considerations

The study was approved by the appropriate ethics and governance committees. Researchers took permission from the hospital administration and from the nurses who agreed to participate in the research. All participants were given verbal information about the study. Written, informed consent was taken from all participants.

Study Limitations

The results of the study are limited with the 13 nurses working at the hospital in which the research was carried out. In the research, application of an 8-week education programme caused the number of participants to be less than predicted. Thus, the nurses either couldn't participate in education programme because of their busy working conditions or they had to leave the programme without completing after they participated. In addition, the ability of ethical decision making of the nurses in the scope of the sample is limited with the data collected by the data collection tools of the research.

Results

61.5% of the nurses had bachelor's degree and the average of their working period in their occupations is 107.53 ± 87.64 months. The nurses' average of weekly working hours is 47.85 ± 5.2 . 53.8% of the nurses had education about ethics, 38.5% of them stated that ethics education should take place in "Undergraduate Education", 30.7% of them stated that they want the weekly course hours of ethics lesson to be increased, 15.4% of them stated that "Ethics education is necessary for all health care staff", and 15.4% of them stated that it was important "to include the ethics education in postgraduate in-service training program".

In the interviews with the nurses about their opinions related to basic knowledge of ethics before the ethics education, 8 themes were determined as "Ethical Perception", "Moral Perception", "Value Perception", "Professional Value Perception", "Value Perception in Nursing Care", "Value Conflict Perception", "Ethical Principle Perception", "Perception Related to the Formation of Ethical Issues", and 33 sub-themes belonged to those themes were determined. The sub-themes for Ethical Perception are "Empathy", "Rules of Social Behavior", and "Concept of Profession". The sub-themes for the Moral Perception are "Conscience" and "Social Rules". The sub-themes for the Value Perception are "Being

Honest", "Respect", "Friendship", and "Family". The sub-themes for Professional Value Perception are "Honesty", "Privacy", "Respect for Human", "Justice", "Equality", and "Secrecy". The sub-themes for the Value Perception of Active Care Giving in Nursing are "Moral Values", "Active Education", "Family Discipline", "Conscience", and "Professional Ethics". The sub-theme for Value Conflict is "Being Incapable of Doing What You Want". The sub-themes for Ethical Principle Perception are "Equality", "Privacy", "Doing No Harm", "Justice", "Benefit", and "Honesty". The sub-themes for Perception Related to the Formation of Ethical Issues are "Individual him/herself", "Technical Deficiencies", "Administrative Deficiencies", "Inequality", and "Paying No Attention to Patient's Opinions". In the interviews with the nurses about their opinions related to basic knowledge of ethics after the ethics education, 10 main themes were determined as "Ethics Perception", "Moral Perception", "Value Perception", "Professional Value Perception", "Value Perception in Nursing Care", "Value Conflict Perception", "Ethics Principle Perception", "Perception Related to the Formation of Ethical Issues", "Perception of Ethical Decision", and "Perception of Ethical Decision Process" and 22 sub-themes belonged to those themes were determined (**Table 1**).

After the education, the nurses could express their opinions about ethical decision making (in accordance with models, theories, and principles) and ethical decision process about which they couldn't express their opinions before the education. The sub-themes for Ethical Perception are "The Professional Systematics of the Rules", "The Basis of Professional Behavior", "Set of Professional Values", and "The Rules Regulating the Behaviors". The sub-themes for Moral Perception are "Social Judgement", and "Conversion of Ethics into Behavior". The sub-themes for Value Perception are "Body of Beliefs", "Social Reasons", and "Systematics of Rules". The sub-themes for Professional Value Perception are "Altruism", "Justice", and "Human Dignity". The sub-theme of the theme of Value Perception of Effective Care Giving in Nursing is "Patient's Priority". The sub-theme for Value Conflict is "Conflict of Autonomy". The sub-themes for Ethical Principle Perception are "Equality" and "Justice". The sub-themes for Perception Related to the Formation of Ethical Issues are "Ethical Uncertainty", "Ethical Dilemma", and "Ethical Dead End". The sub-theme for the Perception of Ethical Decision Making is "Attributing to Theories". The sub-themes for Perception of Ethical Decision Making Process are "Determining the Problem" and "Determining the Suitable Solutions for the Problem" (**Table 2**).

TABLE 1: Themes And Sub Themes Related To Ethical Basic Knowledge Before The Ethics Education (Izmir, Turkey, 2016)

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THEMES	SUB THEMES
Perception of Ethics	Emphaty
	Rules of Social Behavior
	Ethical Values
	Concept of Learned Profession
Perception of Morality	Conscience
	Social Rules
Perception of Value	Being Honest
	Respect
	Friendship
	Family
Perception of Professional Value	Honesty
	Privacy
	Respect for Human
	Justice
	Equality
Perception of Value in Giving Effective Care in Nursing	Secrecy
	Moral Values
	Effective Education
	Family Discipline
	Conscience
Perception of Value Conflict	Professional Ethics
	Not being able to do what he/she wants
Perception of Ethical Principle	Equality
	Privacy
	Doing no Harm
	Justice
	Providing Benefit
	Honesty
Perception related to the Formation of Ethical Problems	Person himself/herself
	Technical Deficiencies
	Administrative Deficiencies
	Inequality
	Disregarding the Patient's Opinions

TABLE 2: Themes and sub themes related to ethical basic knowledge after the ethics education (Izmir, Turkey, 2016)

THEMES	SUB THEMES
Perception of Ethics	Professional Systematics of the Rules
	Basis of Professional Behavior
	Set of Professional Values
	Rules Regulating the Behaviors
Perception of Morality	Social Judgement
	Changing of Ethics into Behavior
Perception of Value	Body of Beliefs
	Social Reasons
	Systematics of Rules
Perception of Professional Value	Altruism
	Justice
	Human Dignity
Perception of Value in Giving Effective Care in Nursing	Patient's Priority
Perception of Value Conflict	Conflict of Autonomy
Perception of Ethical Principle	Equality
	Justice
Perception related to the Formation of Ethical Problems	Ethical Uncertainty
	Ethical Dilemma
	Ethical Dead End
Perception of Ethical Decision Making	Attributing to Theories
Perception of Ethical Decision Making Process	Determining the Problem
	Determining the Suitable Solutions for the Problem

Discussion

In 1977, according to the recommendation related to the employment, working and life conditions of the nursing personnel, it was stated by the International Labor Organisation (ILO) that 'normal daily hours of work should not exceed 8 hours, weekly hours of work should not exceed 40 hours'⁷⁻¹¹. In our study, the average of the nurses' weekly

hours of work was found as 47.85±5.2 hours. The nurses cannot perform the nursing practices actively because they work in stressful and busy environment and because of the long hours of work. In this sense, deficiencies can occur in meeting the requirements of the patients' care. In line with those, communication problems and value conflicts between nurse and doctor, nurse and patient, and nurse and patient's family frequently confront us. All those experiences cause some ethical issues by being aware or not. The nurses' education levels affect their taking or not taking lesson/lessons about occupational ethics during their education, describing the ethical issues, and their abilities of ethical decision making. Our study results also support that thought. When the results were examined, it was seen that there were differences between the nurses' education levels and this case affected the results of our research. Avcı (2007) determined that the more the education level increased the less the rate of the nurses who expressed opinion out of the ethical issues about the cases decreased¹². It was seen in our research that half of the nurses had the education of occupational ethics during their education. Schluter et al (2008) stated that 70% of the nurses had no education about the ethics¹³. The answers including ethical approach couldn't be given by the nurses also including the nurses who had ethics education for almost all the questions in the interviews carried out in the first stage of our study. The important point in question is that there are deficiencies in nursing education as well as gaps for incapability of giving the ethics education. This is because, in the research carried out by Görgülü and Dinç (2007), it was concluded that ethics education has been given by the nursing instructors who was not specialist in the nursing schools in Turkey and the lesson content of ethics has been mostly integrated into other theoretical nursing lessons¹. Milton (2004), in his study including the opinions of the ethics experts, stated that ethics education should be different in each level of nursing education and ethics education should be extended to the curriculum rather than giving it as a different lesson¹⁴. In addition to all these, the ethics education's not being included in in-service training programmes after graduation is seen as an important deficiency in ethics education. Having an ethical point of view is not possible by having an ethical education just belonged to a particular period and based on a particular subject basis. It is required that the information should be permanently updated, it should be supported by the in-service training programmes, and the applicable ability of ethical decision making should be developed by attributing to the clinical ethics concept. In last 10 years in our country, ethical nursing has been included in education programmes. In addition, efforts of Turkey for the membership of the European Union and for the alignment with the acquis necessitated the inclusion of the subject of ethics in nursing education¹. In this sense, it is obligatory for the nurses to have the sufficient knowledge about ethics. However, it is seen that curriculum deficiencies in ethical education come into question in nursing education. This is because, in our study, the level of ethical basic knowledge of the nurses who had ethics education during their education was insufficient. It was seen that the nurses generally couldn't describe the ethical issues related to the cases before the education, they couldn't determine the value conflicts and primary ethical principles, and they couldn't show the ability of ethical decision making. The nurses formed their decisions and approaches in accordance with their personal values and professional knowledge. In Avcı's (2007) study, it was determined that 44% of the nurses evaluated and offered

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solution for ethical problem by their professional experiences and personal values¹². Aslan et al (2003), in their study, stated that surgical nurses showed the approaches of "Professional Experiences" (6.78%) and "Asking the Advice of Team Members" (18.79%) in their approaches to ethical issues and only 28.19% of them considered "Ethical Principles". Most of the nurses (76%) couldn't determine the ethical problem in a sample case that Aslan et al (2003) based on the ethical problem¹⁵. Avcı (2007) stated that 32% of the nurses expressed opinions and approaches out of ethical problem related to a sample case including ethical problem¹². In the study of Çobanoğlu and Alger (2004), 14% of the nurses responded as "I would ignore" for an ethical issue given and they stated that they didn't want to take responsibility¹⁶. In our study, it was determined that the nurses didn't use the ethical models and theories while they were making ethical decisions against the ethical issues. Similar results with our study confronted us when the literature was reviewed. However, while the nurses are making an ethical decision, they should know the professional ethical codes, professional practice standards, related legislative regulations, human and patient rights, preferences and values of the patients and their relatives. It was seen that the nurses could describe the ethical issues related to the cases after the education, they could realize the value conflicts, they could show the ability of ethical decision making, and they could attribute the decisions to ethical principles, models and theories. This case showed that the ethics education programme given in our study positively affected the nurses' abilities of ethical decision making. It was thought that the results of our study were positively affected because our education program was attributed to making ethical analysis by the method of case analysis in the cases and to making ethical decisions by the suitable approaches as well as the education of basic concepts related to ethics. This is because case analysis method is a problem solving method used in analysing various ethical issues and it makes the individual apply what he/she learned on a real script and find solutions from the possible choices¹⁷. In the study that the cases including ethical dilemma were presented to the nurses and the nurses' actions related to ethical decision making were evaluated, it was determined that 59% of the nurses supported to revive a newborn baby with anomaly, 47% of them stated that a medicine shouldn't be given forcefully, 48% of them stated that the patient's request should be respected, and 87% of them stated that a misadministration should be reported¹⁸. It is quite important to support the ethics education that will be given for increasing the nurses' abilities of ethical decision making and to build the skills of determining the suitable ethical actions. Aslan et al (2003), as a result of their study, emphasized that the approaches of ethical problem solving should be taught to the nurses in addition to the basic ethical concepts during the basic nursing education in order to increase the surgery nurses' abilities of ethical decision making¹⁵. Before the ethics education, themes and sub-themes couldn't be formed because any meaningful replies couldn't be received from the nurses about the ethical basic knowledge. Our results correspond to the literature data. The studies carried out showed that the nurses were not effective on describing the ethical issues, approaching the issues in an ethical way, making ethical decision and on carrying out this decision in accordance with ethical principles, theories, and models^{18,19}. The nurses could express their opinions about their ethical decision making (in accordance with models, theories, principles) and their perceptions of ethical decision making

processes related to the ethical basic knowledge after the ethics education. In the interviews before the education, the nurses described "Ethical Perception" theme and the sub-themes of this theme such as empathy, rules of social behaviour, moral values, and the concept of learned profession. The nurses matched the definition of ethics with those concepts. In the study carried out by Yıldırım (2008), 54.4% of the healthcare professionals described the concept of ethics as moral rule and 18.1% of them described it as rules of conduct¹⁹. After the ethics education, the nurses described the ethics with the themes of professional systematic of the rules, the basis of the professional behaviour, set of professional values, and the rules regulating the behaviors. As well as the ethics has different definitions in the literature, ethics aims to constitute the principles, rules, and duties that will form the ethical attitude and decision making and it is described as a set of values suggesting what people should do or not²⁰. It was seen that the nurses' ethical concepts correspond to the literature after the education. When the nurses' opinions related to concept of morals were asked before the education, they estimated the concept of morality as conscience and social rules. In a study carried out, 27.1% of the healthcare professionals described morality as social value. The results showed similarity with our study¹⁷. After the education, the nurses described the concept of morality as social judgments and the conversion of ethics to behavior. The biggest difference after the education was that the nurses determined the difference between the concepts of ethics and morality with the sub-theme of conversion of ethics to behavior. This is because the application of ethics in practical life was defined as morality while it was defined as theory array of correct or incorrect behaviour²⁰. Before the ethics education, it was seen that the nurses based their perceptions of value concept on the values such as being honest, respect, friendship, and family. Those values are in the scope of personal, cultural, and moral values. It can be said that the nurses have awareness about this. After the education, it was seen that the nurses described the value concept as beliefs, social reasons, and systematic of rules. Value is a behaviour norm preferred according to the way of explanation of life individually and socially or a permanent belief in the form of life purpose or the ideals, traditions, behaviour modes, qualities, or objectives awarded or preferred by the individuals, groups, or society^{21,22}. In this sense, the nurses' value concept corresponds to the literature after the education. The nurses' opinions about their professional ethical value concepts were determined as honesty, privacy, respect for human, justice, equality, and secrecy. Those results showed that the nurses generally had opinions about ethical values. However, it was seen that the nurses rather perceived ethical principles as value. After the education, the nurses could determine the values of altruism, justice, and human dignity. The seven values in nursing that were determined as a result of the studies about nursing ethics are sacrifice (altruism), esthetics, equality, freedom, human dignity, justice, and reality²¹. The results showed that the nurses had awareness about the ethical values for nursing and they could make the conceptual distinction (with ethical principle) even they couldn't reach the sufficient level of knowledge after the education. In the interviews with the nurses before the education, the nurses corresponded giving effective care to the themes of moral values, effective education, family discipline, conscience, and professional ethics. After the education, the nurses related effective care giving to the theme of patient priority. The literature corresponds giving effective nursing care to nurses' having the

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undersanding of professional care. Professional care characteristics were determined as compassion, mercy, sufficiency, trust, conscience, competence, and commitment^{23,24}. In the study Can and Acaroğlu (2015) carried out in order to examine the relationship between the nurses' professional value perceptions and individualized care perceptions, it was found out that the nurses' had high value perceptions of autonomy and safety, the nurses' care behaviours towards supporting the individual's individuality were insufficient in matters such as their jobs and hospital experiences as well as the ill individuals' habits, activities, preferences, and family bonds reflecting their beliefs and values²⁵. It was thought that it was necessary to form the nurses' perceptions of care in accordance with the ethical values and principles as well as our study results showed similarity with the literature. In the interviews carried out before the education, the nurses stated that they perceived the value conflict perception as not being able to do what they wanted. The nurses perceived the personal conflicts between the patient/his family or healthcare team as value conflicts and stated that with a nonprofessional point of view. However, value conflict is accepted as the conflict of professional ethical values in giving a professional health service when it is handled with the ethical approach. After the education the nurses expressed the concept of value conflict as the conflict of autonomy. Autonomy expresses the autonomy of the members of the profession in the matters of decision making, inspection, and administration²⁶. However, coming across with the principle of autonomy between the nurse and patient/his family frequently in the processes of ethical issues and ethical decision making comes into question. It was seen that the nurses stated their perceptions of ethical principles in accordance with the suitable ethical principles such as equality, privacy, doing no harm, justice, and honesty before the education. They determined the principles of equality and justice after the education. It was seen that they could define the concepts they expressed more correctly after the education although there was difference in the approach to the ethical principles before and after the education. The ethical principles in nursing are the principles of "autonomy-respect for individual", "doing no harm-beneficialness", "justice-equality", and "privacy-secrecy"^{21,27}. In this sense, when our study results were evaluated, it was seen that the principles such as beneficence, autonomy, and secrecy were not expressed. The nurses expressed the ethical issues perceptions they experienced with the themes such as person himself, technical incompetences, administrative incompetences, inequality, disregarding the patient's opinions. When the literature was reviewed, it was seen that the new ethical issues such as life support systems occurring by development of the technology and interfering the human genome and the awareness increasing about the human and patient rights caused the nurse's role to extend and caused the nurse to face to ethical issues frequently¹. After the education, they expressed 3 sub themes belonged to the theme of ethical issues perception as ethical problem, ethical dead end, and ethical uncertainty. Ethical issues were handled under those three titles in the literature. The theme of ethical decision making perception was determined by the nurses after the education and the sub theme of it was expressed as considering the ethical principles. It was seen that the nurses had the perceptions about the ethical decision making after the education while they didn't express their opinions about the ethical decision making before the education. In the study carried out by Aslan et al (2003), it was determined that the

nurses frequently approached the ethical issues with the ethical principles of loyalty, doing no harm, and respect for individual¹⁵. Kennedy Schwarz (2000), in her study, determined that the nurses had solution approach for the cases including ethical issues by using the principles of respect for individual, autonomy, beneficialness, and doing no harm²⁸. As a result of the interviews carried out, after the education, 2 sub themes were determined by the nurses as determining the theme of ethical decision making perception and the problem belonged to this theme and determining the suitable solutions for this problem. The nurses, for approaching an ethical problem, stated that the necessity of primarily defining the problem, determining the type of ethical problem, collecting the detailed data about the problem and determining the suitable solutions for the problem in accordance with ethical theories, principles, and values were the procedures to follow. The nurses' suggestions about the process of ethical decision making corresponded to the literature. It was determined that, before the education, the nurses' approaches and evaluations about the ethical cases and their attitudes of being able to make decisions about the cases were generally under the influence of the nurses' personal and cultural values and they made decisions about the cases using the social norms as base. In addition, it was seen that the nurses couldn't define the ethical issues particular to the cases and they couldn't determine the violation of ethical values and principles. Avcı (2007), in her study, determined that 44% of the nurses evaluated the problem with their professional experiences and personal values for the solution of ethical problems they faced and they offered solution¹². In the study Uyer et al (1999) carried out, it was determined that 45.1% of the nurses considered their colleagues' opinions for the situations requiring ethical decision and for the solution of ethical problems²⁹. In the study of Çobanoğlu and Algier (2004), it was determined that the nurses solved the ethical problems by asking the doctor's advice and they showed paternal approach¹⁶. Penticuff and Walden (2000) determined that 94% of the nurses discussed the matter with their colleagues in case of an ethical problem and 25% of them carried the matter to the ethical committee³⁰. In the study carried out by Avcı (2007) in order to examine the ethical approaches about the sample cases given, it was determined that the nurses were not at the level of determining the ethical problem correctly in accordance with the satisfactory ethical principles and suggesting the correct approach¹². When the nurses' approaches and evaluations about the ethical cases and their attitudes of being able to make decision belonged to the cases were examined after the ethical education, it was determined that the nurses could define the ethical problem particular to the cases, the ethical value and principle violations and they showed solution approaches for the cases in accordance with the ethical values, principles, codes, and theories. These results could be based on our ethical education that we gave to the nurses in terms of case sampling and developing their abilities of making analysis on the sample events and situations as well as the basic ethical knowledge. It was stated in the literature that the ethical education based on case analysis helped keeping up with the ethical problems, being able to the ideal behaviour, and developing awareness for the ethical values about the patient care^{13,31}. In addition, it was stated that the nurses who had ethical education behaved more discreetly and responsibly to their patients³². The aim of ethics education is generally to analyze a case including an ethical problem in terms of ethics, to know the ethical problems, to learn the related values, principles and ethical

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approaches in use, to examine the attitudes adopted for dilemma and the thesis underlying these attitudes, to decide what the correct and good act is, to know the realities of this decision and to defend those against the opposing views³³. CONCLUSION It was seen that the nurses' level of conceptual knowledge increased and they could show the suitable ethical approach related to the sample cases means of the education programme based on case analysis approach while it was determined that the nurses' level of basic ethical knowledge and the number of nurses who could correctly determine the ethical problem in accordance with the ethical values and principles in the sample cases given and who could offer the correct solution and who could make ethical decision were not satisfactory. This situation shows the effectiveness of our ethics education programme that was prepared suitable with its purpose.

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