

SALUTE TO NURSES



Navigating Ethical Dilemmas

Nurses interact with people during some of their most vulnerable moments and in highly personal ways.

It's why they often find themselves confronted with challenging ethical dilemmas that require careful consideration and decisive action.

The American Nurses Association developed a Code of Ethics for Nurses in the 1950s. It has been revised over the years to respond to technological advances and changes in society and the nursing field.

Gallup takes a poll every year asks how the public ranks various professions for having high honesty and ethics. For 22 straight years, nurses come in as the most respected in terms of honesty and ethics. In 2024, 78% of the poll takers perceived them as honest.

Common ethical issues that nurses grapple with are patient autonomy, confidentiality, resource allocation and end-of-life care, nurses must navigate complex situations while upholding ethical standards and providing compassionate care.

PATIENT AUTONOMY

One of the fundamental principles in health care ethics is respect for patient autonomy, which emphasizes the right of individuals to make informed decisions about their care. Nurses are expected to provide adequate information to allow



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patients to make their own decisions based on their beliefs and values, even if they aren't the ones that the nurse would make.

However, nurses may encounter situations where patients' autonomy conflicts with their well-being or poses risks to themselves or others. For example, a patient refusing life-saving treatment due to religious beliefs presents a moral dilemma for nurses torn between honoring the patient's autonomy and their duty to promote health and prevent harm.

CONFIDENTIALITY AND PRIVACY

Maintaining patient confidentiality is paramount in nursing practice to build trust and safeguard sensitive information. Yet, nurses may face ethical dilemmas when balancing confidentiality with the duty to protect others from harm, such as in cases of suspected child abuse or threats to public safety.

Striking the right balance between respecting patients' privacy rights and fulfilling legal obligations requires careful judgment and adherence

to professional standards.

RESOURCE ALLOCATION

In resource-limited health care settings, nurses often confront ethical dilemmas related to resource allocation, where competing needs and priorities must be weighed against available resources. For instance, deciding how to allocate scarce medical supplies during a public health crisis or prioritizing care for patients with life-threatening conditions can be morally challenging.

Nurses must advocate for

equitable distribution while considering the broader effect on patient outcomes and community well-being.

END-OF-LIFE CARE

Navigating end-of-life care presents complex ethical dilemmas for nurses, involving decisions about pain management, withdrawal of life-sustaining treatment and advance care planning. Balancing the principles of beneficence and nonmaleficence, nurses strive to provide compassionate care while respecting patients' wishes and upholding their dignity.

Engaging in open and honest communication with patients and their families, exploring treatment options, and ensuring access to palliative care resources are essential in navigating end-of-life dilemmas.

ETHICAL DECISION-MAKING

When faced with ethical dilemmas, nurses can employ ethical decision-making frameworks to guide their actions and resolve conflicts. These frameworks typically involve identifying the ethical issue, gathering relevant information, considering alternative courses of action, evaluating potential outcomes and consulting with interdisciplinary teams or ethics committees.

Engaging in reflective practice and seeking mentorship from experienced colleagues can also enhance nurses' ethical reasoning skills and confidence in decision-making.

Elizabeth Kenny: Advocate

Elizabeth Kenny, an Australian nurse and pioneering physical therapist, stands as a trailblazer in the field of health care for her revolutionary treatments for polio patients.

Born on Sept. 20, 1880, in New South Wales, Australia, Kenny's groundbreaking methods challenged conventional medical practices and transformed the care of individuals affected by poliomyelitis, commonly known as polio.

EARLY LIFE AND CAREER

Kenny began her nursing career in rural Australia, where she gained first-hand experience caring for patients with various medical conditions. While she was an avid reader, she did not have a formal education. A surgeon who treated her broken wrist encouraged her to study medicine and she started to volunteer at a hospital where she learned nursing skills.

In the early 20th century, polio outbreaks swept across the globe, leaving many children and adults paralyzed or with debilitating muscle weakness. Frustrated by the lack of effective treatments for polio, Kenny sought innovative approaches to rehabilitate patients and improve their quality of life.

INNOVATIVE TREATMENT METHODS

Kenny's approach to treating polio patients diverged from traditional medical practices of the time, which often involved immobilization and bed rest. Kenny began developing her own series of treatments, starting with dry



NEW YORK WORLD-TELEGRAM AND THE SUN STAFF PHOTOGRAPHER/WIKIMEDIA COMMONS

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Drawing on her nursing experience and keen observation skills, Kenny developed a series of exercises and techniques aimed at restoring mobility, strengthening muscles and preventing deformities in polio-affected

limbs. Her methods focused on active movement, muscle re-education and personalized rehabilitation plans tailored to each patient's needs.

Despite facing skepticism and resistance from the medical establishment, Kenny persevered in advocating for

her treatment methods, demonstrating remarkable results in improving the condition of polio patients. Her insistence on active therapy and early intervention challenged prevailing orthodoxy and paved the way for a paradigm shift in the management of polio and other neuromuscular disorders.

CONTINUED SERVICE

She founded a hospital in Australia where her polio therapy methods were used. She ran the hospital for two years and then sold it so that she could travel to England and join the Australian Army Nursing Service. They accepted her despite her not being a registered nurse. Throughout World War I she served as a staff nurse on troopships and was given the title "sister" (head nurse).

While many medical professionals continued to criticize her techniques for treating polio, she eventually went to Minneapolis in the U.S. where her method received wide acclaim. She became widely respected in the U.S.

RECOGNITION AND LEGACY

Kenny's pioneering work gained international recognition, leading to widespread adoption of her methods and the establishment of Kenny treatment centers worldwide. Her innovative approach revolutionized the field of physical therapy and set new standards for rehabilitation medicine. Kenny's legacy endures in the countless lives she touched and the lasting impact of her contributions to health care.

Today, the principles of early intervention, active therapy and personalized rehabilitation plans espoused by Kenny continue to inform modern physical therapy practices, benefiting individuals with a wide range of neuromuscular conditions.

Margaret Sanger: Activist

Margaret Higgins Sanger, an American nurse and birth control activist, stands as a towering figure in the history of women's reproductive rights and health care reform.

Born on Sept. 14, 1879, in Corning, New York, Sanger dedicated her life to advocating for women's autonomy over their bodies, challenging societal taboos and revolutionizing access to reproductive health services.

EARLY LIFE AND CAREER

Growing up in a working-class Irish Catholic family, Sanger witnessed firsthand the struggles of women in impoverished communities, particularly the health risks associated with multiple pregnancies and unsafe abortions. She was born sixth of 11 children and her mother also had seven miscarriages.

She attended Claverack College in New York where she became interested in women's suffrage. Afterward she taught immigrant children in first grade until her mother contracted tuberculosis and Sanger had to return home to care for her. It was then she started reading medical books about her mother's condition and became interested in the medical field.

In 1900 she started taking nursing courses. As a nurse in training, she often had pregnant women begging her for information on how to prevent future pregnancies. It led her to write a series in a newspaper called "What Every Girl Should Know" about the female reproductive system. She was eventually charged with violating the Comstock Act, which forbid "obscene or sexually explicit language" from



LOS ANGELES TIMES/WIKIMEDIA COMMONS

being sent through the mail. She was told that discussing sexually transmitted diseases was obscene.

She served as a nurse, often in the poorest part of New York City, delivering infants. She watched women die or become seriously ill from attempts to end their pregnancies — they drank turpentine or inserted instruments into their wombs.

Inspired by her experiences as a nurse, Sanger embarked on a lifelong

mission to empower women with knowledge and access to contraception, thereby enabling them to control their fertility and reproductive destinies. When she could not learn about contraceptive methods in the U.S., she went to France where it was not illegal to talk about it.

PLANNED PARENTHOOD

In 1916, Sanger opened the first birth control clinic in the United States in

Brooklyn, New York, risking arrest and imprisonment to provide women with contraceptive information and services.

Despite facing legal challenges and opposition, Sanger remained steadfast in her commitment to reproductive rights, advocating for the legalization of birth control and challenging societal norms surrounding sexuality and family planning.

In 1921, Sanger founded the American Birth Control League, which later evolved into Planned Parenthood Federation of America. Through Planned Parenthood, Sanger established clinics nationwide, offering birth control counseling, contraceptives and reproductive health care services to women of all backgrounds.

CAMPAIGN FOR REPRODUCTIVE RIGHTS

Sanger's activism extended beyond the clinic walls, as she campaigned for women's reproductive rights and the legalization of birth control. She lobbied lawmakers, delivered impassioned speeches and wrote extensively on the importance of reproductive autonomy and family planning education.

Sanger's advocacy efforts culminated in landmark legal victories, including the 1965 Supreme Court ruling in *Griswold v. Connecticut*, which legalized contraception for married couples. The rule came one year before her death in Tucson on Sept. 6, 1966.

LEGACY

Margaret Sanger's legacy is indelibly linked to the advancement of women's reproductive rights and health care reform. Her pioneering work laid the foundation for modern contraceptive methods, reshaped public discourse on sexuality and reproductive health and empowered generations of women to take control of their bodies and futures.

Mental Health Awareness

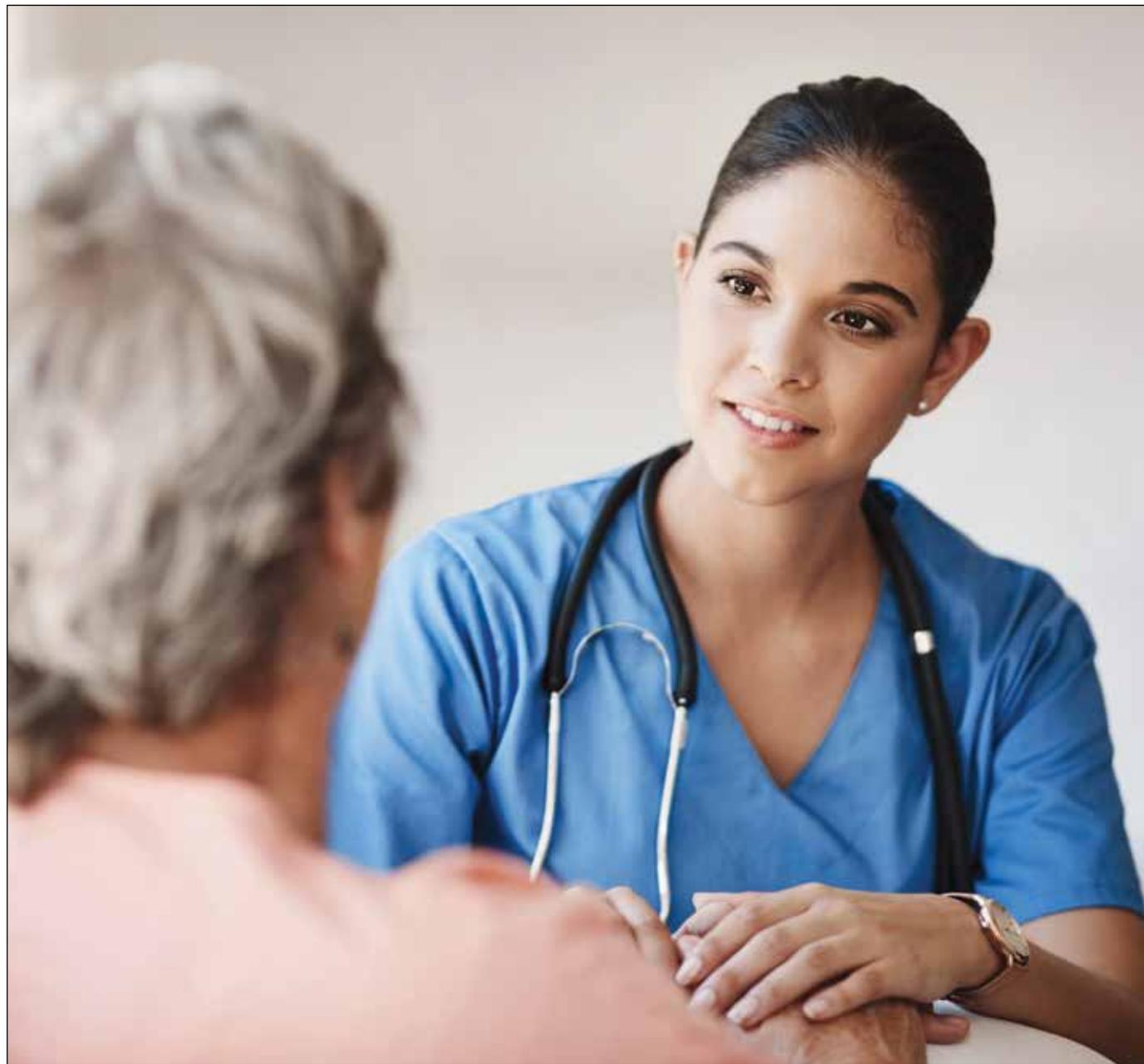
In the demanding and emotionally charged field of nursing, practitioners have to engage in mental self-care before they can provide optimal care to patients.

Nurses face unique stressors, including long shifts, high patient volumes and emotionally challenging situations, making it essential to develop coping strategies and access support resources.

While the COVID-19 pandemic introduced new and unique stressors to the nursing field, there is evidence that there has been minimal recovery, even with the industry talking about the importance of mental health care for nurses.

In a survey by Trusted Health, it was found that since the COVID-19 pandemic began, 75% of nurses experienced burnout, 68% have had compassion fatigue toward their patients, 64% have experienced depression, 64% have had declining physical health and 50% have experienced feelings of trauma, extreme stress or PTSD.

Acknowledging and validating one's emotions is a fundamental step in promoting mental health awareness among nurses. It's normal to experience stress, compassion fatigue and burnout in this profession, and suppressing these feelings can exacerbate



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their effect. Nurses should feel empowered to express their emotions openly, whether through peer support groups, counseling services or reflective journaling.

Fostering a culture of self-care within nursing environments is essential for promoting mental well-being. Nurses often prioritize the needs of others over their own, leading to neglect of their physical and

emotional health. Encouraging regular breaks, mindfulness exercises and relaxation techniques can help nurses recharge and prevent burnout. Additionally, promoting healthy lifestyle habits such as exercise, nutrition and adequate sleep can enhance resilience and coping abilities.

Developing strong support networks is another vital aspect of mental health aware-

ness for nurses. Building connections with colleagues, mentors and professional networks provides opportunities for mutual support, sharing experiences and seeking guidance during challenging times. Peer support programs, mentorship initiatives and online forums can facilitate these connections and create a sense of camaraderie among nurses.

Moreover, access to compre-

hensive mental health support resources make a difference for nurses facing significant stressors or mental health challenges. Health care organizations should prioritize providing confidential counseling services, employee assistance programs and access to mental health professionals trained in addressing the unique needs of nurses.

Nurse Journal maintains a list of mental health resources for nurses including hotlines, courses and organizations that provide support. The list can be found at <https://nursejournal.org/resources/nurse-mental-health-resources/>

Education and training on stress management, resilience-building and self-care techniques can be integrated into nursing curricula and professional development programs.

Recognizing the importance of mental health awareness, many health care institutions are implementing initiatives to support nurses' well-being. These initiatives may include regular mental health screenings, wellness workshops and dedicated spaces for relaxation and reflection. By investing in the mental health of their nursing staff, organizations can improve job satisfaction, retention rates and ultimately, patient outcomes.

Together, health care organizations, educators and nursing professionals must continue to advocate for mental health awareness and support within the nursing profession.

Nursing and Public Health

Nurses play a pivotal role in promoting public health and advancing community well-being through their expertise, compassion and commitment to patient care.

Beyond clinical settings, nurses actively engage in public health initiatives and community outreach efforts, addressing a wide range of health challenges and advocating for preventive measures, education and health promotion strategies.

HEALTH EDUCATION AND PROMOTION

Nurses serve as educators and advocates for health promotion, disease prevention and healthy lifestyle behaviors within communities. They develop and implement educational programs, workshops and outreach events to raise awareness about common health issues, such as nutrition, exercise, immunizations and chronic disease management.

By empowering individuals and families with knowledge and skills to make informed health decisions, nurses contribute to reducing health disparities and improving overall community health outcomes.

DISEASE PREVENTION AND CONTROL

In collaboration with public



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health agencies and community organizations, nurses play a critical role in disease surveillance, monitoring and control efforts. They conduct screenings, immunizations and health assessments to identify and mitigate health risks within populations.

During public health emergencies, such as infectious disease outbreaks or natural disasters, nurses are at the forefront of response efforts, providing emergency care,

conducting contact tracing and implementing infection control measures to prevent the spread of illness and protect public health.

COMMUNITY HEALTH ASSESSMENTS

Nurses conduct comprehensive community health assessments to identify prevalent health issues, social determinants of health and gaps in health care services within specific populations. Through data

collection, analysis and collaboration with community stakeholders, nurses develop targeted interventions and initiatives to address priority health needs and promote health equity.

By engaging with diverse communities and understanding their unique cultural, socioeconomic and environmental contexts, nurses can tailor interventions and resources to meet the needs of underserved and vulnerable populations.

HEALTH POLICY ADVOCACY

Nurses advocate for evidence-based health policies, legislation and regulatory measures that promote public health, improve access to health care services and address social determinants of health.

Through professional organizations, grassroots campaigns and policy forums, nurses contribute their expertise and voices to shaping health care policy agendas and advancing health equity initiatives. By advocating for equitable access to health care resources, funding for public health programs and support for vulnerable populations, nurses champion policies that promote the health and well-being of communities.

COLLABORATIVE PARTNERSHIPS

Nurses collaborate with multidisciplinary teams, including health care providers, public health professionals, community leaders and policymakers, to address complex health issues and achieve collective impact.

By fostering partnerships and building coalitions, nurses leverage collective expertise, resources and networks to develop innovative solutions, implement evidence-based interventions and drive sustainable change. Through effective communication, collaboration and shared leadership, nurses strengthen the capacity of communities to address health challenges and improve population health outcomes.

Spotlight on Nurse Educators

Nurse educators play a crucial role in shaping the next generation of health care professionals, imparting knowledge, skills and values that are essential for providing high-quality patient care.

With a focus on teaching, mentoring and inspiring future nurses, nurse educators contribute significantly to the advancement of nursing practice and the improvement of health care outcomes.

TEACHING

One of the primary responsibilities of nurse educators is to develop and deliver comprehensive educational programs that prepare students for the challenges of modern health care settings. Whether in academic institutions, hospitals or clinical settings, nurse educators design curriculum, create learning materials and facilitate interactive learning experiences that foster critical thinking, clinical reasoning and evidence-based practice.

In addition to classroom instruction, nurse educators engage in clinical supervision and mentorship, guiding students through hands-on patient care experiences and helping them apply theoretical knowledge to real-world scenarios. By providing construc-



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tive feedback, encouragement and support, nurse educators help students develop confidence, competence and professional identity as they transition from students to practicing nurses.

The U.S. Bureau of Labor Statistics reported in 2022 that there were 69,190 nursing instructors and teachers in post-secondary settings. The National League for Nursing offers certifications for those pursuing nurse educator careers. They include certified nurse educator, certified aca-

demic clinical nurse educator and certified novice nurse educator.

RESEARCHING AND ADVOCACY

Nurse educators contribute to the advancement of nursing knowledge through scholarly research, publishing academic papers and presenting at conferences. By conducting research on nursing education, health care policy and clinical practice, nurse educators contribute to evidence-based practice and

drive innovation in nursing education and health care delivery.

Moreover, nurse educators serve as role models and advocates for the nursing profession, promoting ethical practice, cultural competence and social responsibility among students and colleagues. Through their commitment to lifelong learning and professional development, nurse educators inspire others to pursue excellence in nursing and make a positive effect on the health and well-being of

individuals, families and communities.

ROLE OF NURSE EDUCATORS

Daily Nurse reports that another form of nurse educators are those who educate patients. Often called a patient education coordinator, they explain medical procedures, medications and diseases to patients and their families. They often work in clinics, hospitals and home health care agencies.

As the demand for nursing professionals continues to grow, nurse educators play a vital role in addressing workforce shortages, promoting diversity and inclusivity and preparing nurses to meet the evolving needs of diverse patient populations. By fostering a culture of learning, collaboration and continuous improvement, nurse educators empower students to become competent, compassionate and confident leaders in health care.

Nurse educators shape the future of the nursing profession and contribute to the delivery of safe, effective and patient-centered care. Through their dedication, expertise and passion for teaching, nurse educators inspire and empower the next generation of nurses to make a difference in the lives of others and drive positive change in health care. Their influence extends far beyond the classroom, leaving a lasting legacy that shapes the future of nursing for years to come.

Telehealth and Virtual Nursing

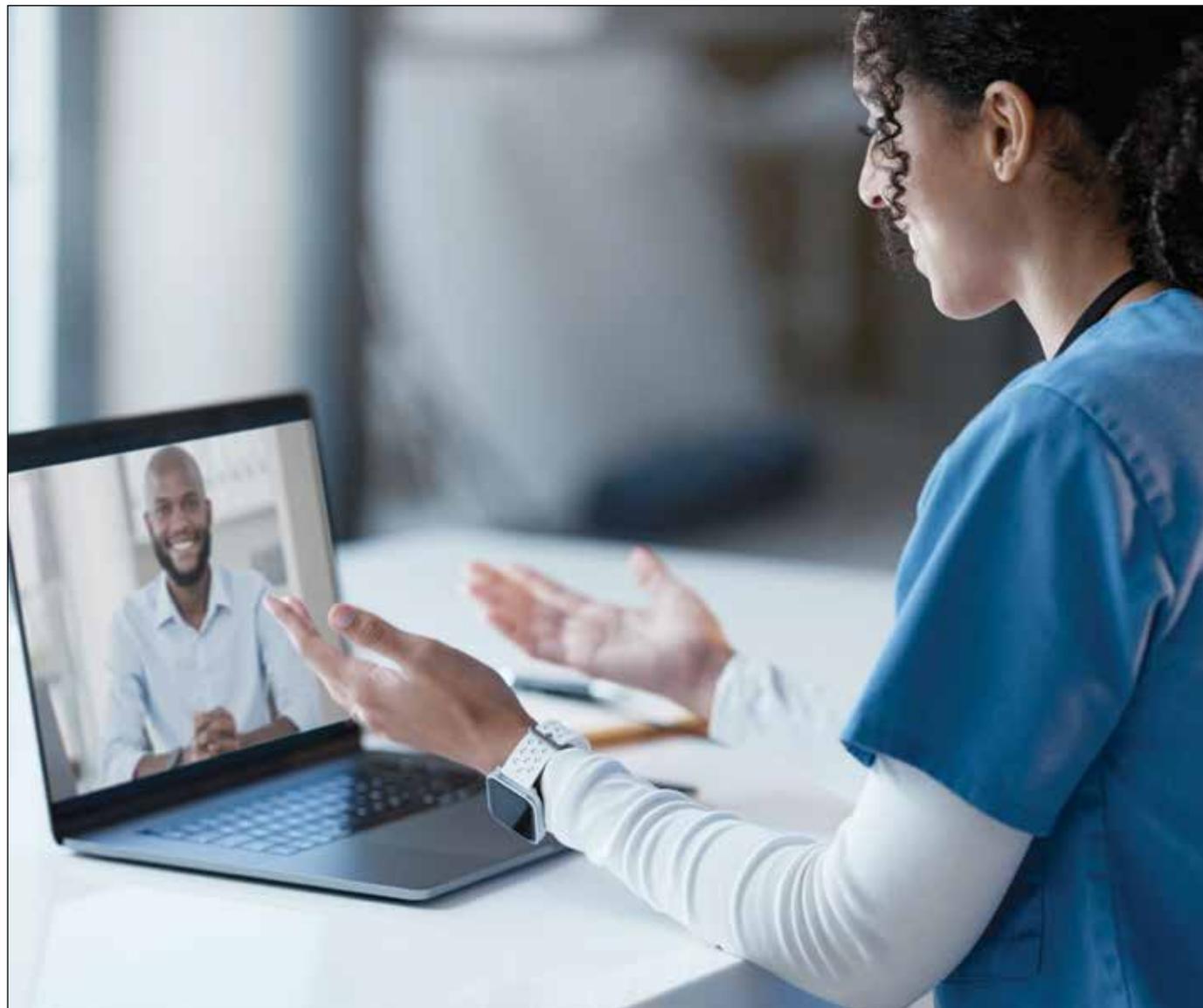
Telehealth and virtual nursing have emerged as innovative approaches to health care delivery, leveraging technology to provide remote medical services, consultation and support to patients.

With the widespread adoption of digital communication tools and the increasing demand for convenient and accessible health care services, telehealth and virtual nursing offer numerous advantages while also presenting unique challenges.

ADVANTAGES

Telehealth and virtual nursing overcome geographical barriers, allowing patients to access health care services regardless of their location. Patients in rural or underserved areas, as well as those with mobility limitations or transportation issues, can receive timely medical assistance and follow-up care from home.

Telehealth appointments offer convenience and flexibility for patients, who can schedule virtual consultations at their preferred time without the need to travel to a health care facility. Virtual nursing services enable patients to receive medication management, chronic disease monitoring and health education remotely, saving time



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and reducing disruptions to their daily routines.

By reducing the need for in-person visits, telehealth and virtual nursing can lower health care costs for patients and providers alike. Virtual consultations eliminate expenses associated with transportation, parking and facility fees, making health care more affordable and accessible for individuals and families.

Telehealth platforms and virtual nursing services facilitate enhanced communication between patients and provid-

ers, fostering greater engagement, collaboration and shared decision-making. Patients appreciate the convenience of virtual interactions and report higher levels of satisfaction with telehealth experiences compared to traditional health care delivery.

Telehealth and virtual nursing support continuity of care by enabling seamless communication and information exchange between health care providers, patients and caregivers. Virtual consultations allow for timely follow-up appoint-

ments, medication adjustments and care coordination, ensuring that patients receive consistent and comprehensive health care services.

CHALLENGES

Access to telehealth services may be limited by technological barriers, including lack of internet connectivity, digital literacy and access to compatible devices. Patients from underserved communities or older populations may face challenges in navigating virtual platforms and using telehealth

tools effectively.

Telehealth and virtual nursing raise concerns about patient privacy and data security, particularly regarding the storage and transmission of sensitive medical information. Health care organizations must implement robust cybersecurity measures and compliance protocols to safeguard patient confidentiality and protect against data breaches.

Telehealth regulations and reimbursement policies vary by state and payer, creating complexity and uncertainty for health care providers and patients. Regulatory barriers, licensure requirements and reimbursement disparities may hinder the widespread adoption and sustainability of telehealth and virtual nursing initiatives.

Disparities in access to technology and digital infrastructure contribute to a “digital divide,” exacerbating inequities in health care access and outcomes. Vulnerable populations, including low-income individuals, racial and ethnic minorities and rural communities, may face greater challenges in accessing telehealth services and receiving quality care.

While telehealth and virtual nursing offer many benefits, certain aspects of patient care may be limited by the lack of in-person interaction and physical examination. Health care providers must exercise clinical judgment and adapt their approach to virtual consultations to ensure accurate diagnosis, treatment and patient safety.