
Conscientious objection – does it also apply to nursing students?

**Beata Dobrowolska (1), Roslyn Kane (2),
Paul Linsley (2), Anna Pilewska-Kozak (1)**

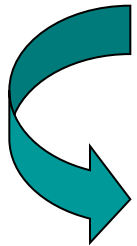
(1) Medical University of Lublin, Poland

(2) University of Lincoln, England



Introduction

- **Why this topic was chosen for this conference?**



In the process of mentoring – clinical mentors as well as nursing students may face many ethical and moral dilemmas.



Every kind of clinical activity has a moral meaning. Ethical considerations are one of the most important in the process of nurse education and nursing practice.

The conscientious clause: what is it?

- **The conscientious clause** in nursing can be defined as a kind of special ethical and legal regulation which gives nurses the right to object to actively perform certain medical procedures which are against their personal system of values.
- Often these values are associated with the individual religious beliefs of nurses.

The conscientious clause: what is it?

- The scope of this regulation differs throughout the world.
- Medical procedures to which nurses hold conscientious objection are often within reproductive health services.
- There are reports on the use of this right e.g. in end-of-life care and in the process of the implementation of medical experiments.

Aim

- The aim of this presentation is to discuss the status of nursing students in relation to their participation in medical procedures to which they hold a conscientious objection.

Methods

- Ethical, legal and professional guidance documents have been analyzed from a number of countries across Europe.
- Due to time limitations, examples will be presented from Poland and England.
- Further empirical research is being planned and will be introduced.

Where is the problem with the practising conscientious objection?

- The main issue underlined in the discussion regarding practising conscientious objection in the clinical setting is **the collision of two human rights**: the right to conscientious objection of medical personnel and the right of patients to specific medical procedures which are legal in their country.
- If a procedure is legally available in a country it means that patients can expect to receive it. On the other hand, all citizens, including health care workers, have the right to object to the implementation of a procedure to which they have a specific objection.

Where is the problem with the practising conscientious objection?

- A question arises: What is the best way to establish a good ethical and legal balance between these two competing rights?

Conscientious objection:

Poland and England

- In **Poland** nurses have the right to conscientious objection on the basis of the Act on nursing (2011) and Code of ethics (2003).
- Nurses can object to actively perform these medical procedures which are against her ethical values. She has to give in written form the reason of this refusal to her supervisor. She is also obliged to immediately inform about this fact patient or her representative.
- Moreover, she has to inform the patient about real possibilities of obtaining this medical service with another nurse or in another medical institution.
- This fact has to be recorded in medical documentation.
- Conscientious objection does not include procedures in which refusal could result in a sudden increase in health and life risks.

Conscientious objection:

Poland and England

- In **England** nurses have the right to conscientiously object in two key areas (NMC, 2013):

- to refuse to participate in the process of treatment where termination of pregnancy is the object (the Abortion Act 1967)

to refuse to participate in technological procedures to achieve conception and pregnancy (the Human and Fertilization and Embryology Act, 2008).

- The NMC and the RCN expect all nurses to be non-judgmental when providing care and to provide service users with full, unbiased information. Nurses and midwives are expected to facilitate patient access to relevant services, including where termination of pregnancy may result, regardless of whether they have a conscientious objection.
- Nurses and midwives do not have the right to refuse to take part in any emergency treatment in any circumstances.
- It is emphasized that while nurses have the right to refuse to participate in abortion procedures, they may not refuse to care for the woman both before and after the procedure.

- Nurses and midwives
- Standards and guidance
- Standards and guidance in development
- Midwifery regulation
- Regulation in practice
 - Medicines management and prescribing
 - Regulation in Practice Topics
 - Safeguarding
 - Specialist Community Public Health Nursing (SCPHN)
- Raising concerns
- Information for those whose conduct is under investigation
- Health visitor recruitment
- Other sources of information
- Have you signed up for the NMC newsletter?

Home > Nurses and midwives > Regulation in practice > Regulation in Practice Topics > Conscientious objection by nurses and midwives

Conscientious objection by nurses and midwives

There may be occasions when nurses and midwives have a conscientious objection to a particular aspect of patient care. Whilst the NMC expects nurses and midwives to at all times adhere to the principles contained within The code: Standards of conduct, performance and ethics for nurses and midwives (2008), in law they do have the right to conscientiously object in two areas only:

Article 4(1) of the Abortion Act 1967 (Scotland, England and Wales)

This provision gives nurses and midwives with a conscientious objection a qualified right to refuse to participate in the process of treatment where termination of pregnancy is the object.

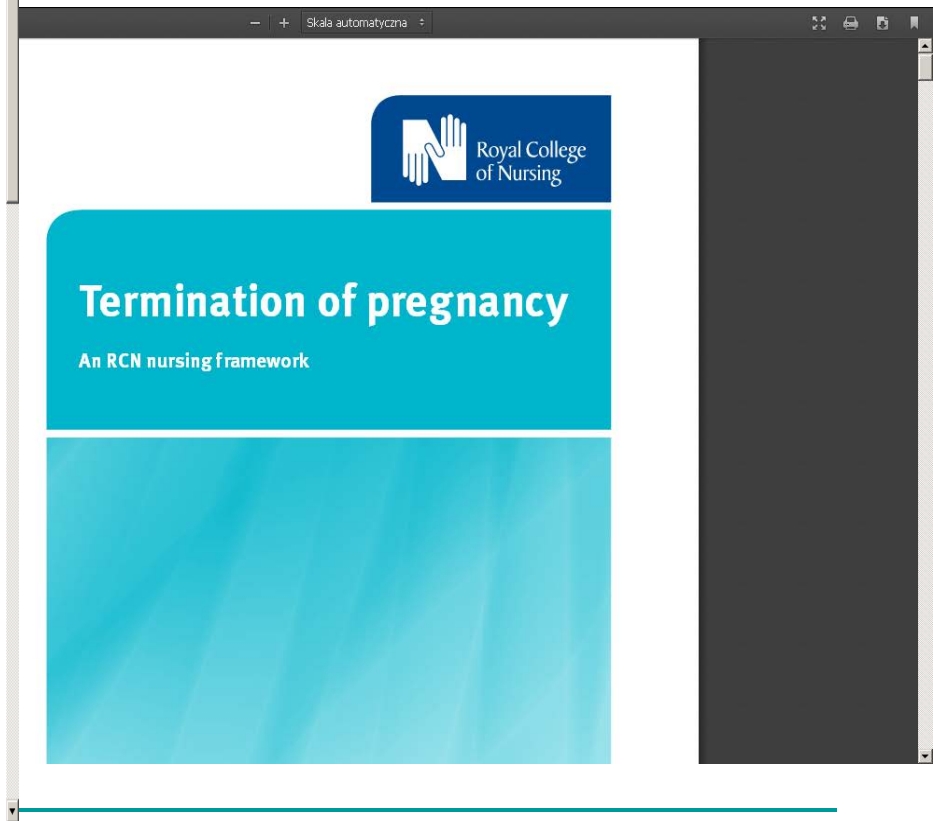
Under section 4(1) no person who has a conscientious objection to participating in any activity governed by this Act shall be under any duty, however arising, to do so.

This right to conscientious objection is qualified by section 4 (2) of the act where it is made clear that nothing in subsection (1) shall affect any duty to participate in treatment which is necessary to save the life or prevent grave permanent injury to the physical or mental health of a pregnant woman.

In any legal proceedings the burden of proof of conscientious objection shall rest on the person claiming to rely on it.

Article 30(2) of the Human and Fertilisation and Embryology Act (2008)

This act gives nurses and midwives the right to refuse to participate in technological procedures to achieve conception and pregnancy.



Conscientious objection – reports from empirical research

- There is a dearth of empirical data on the use of the conscientious clause in nursing practice. In Poland (Jarmoluk et al, 2009) reported that 84% of 51 surveyed nurses have never used this regulation in their practice. However, 1/3 of nurses have found themselves in the situation of realization of medical procedures which were against their system of values.
- Abortion was the procedure that nurses most frequent cited when asked about possibility of using the conscientious clause.

Conscientious objection – reports from empirical research

- **Double loyalty:** loyalty toward patient and loyalty toward physician.
- Research shows that nurses do not often use conscientious objection. They are afraid about losing the job, about repercussions from supervisors, about the reaction of patients and their relatives.
- In these cases they use another opportunities to avoid active participation in medical procedures which are contrary to their conscience.
- Most frequently they ask another nurse for a replacement; take the conversation with the doctor; take day off; go on sick leave; move to another ward (Catlin et al, 2008; Johnstone,2005).

Conscientious objection and nursing students

- There is a discussion about whether nursing (and medical) schools must include in training programmes on procedures which some qualified nurses may decline to perform?
- Whether students have the right of conscientious objection to training in procedures which are against their system of values and would decline to perform (Dickens & Cook, 2000; Strickland, 2012)?

Conscientious objection and nursing students

- Nursing students should be treated as future medical personnel.
- Rules in ethical, law and professional documents regarding conscientious objection apply also to them.



http://www.mercatornet.com/articles/view/respect_for_conscience_must_be_a_social_value

Conscientious objection and nursing students

- On the other hand – health care system needs highly qualified personnel who can perform these medical procedures which are permissible by law.
- It means that for the patients and co-workers safety nursing graduates must have a current nursing knowledge and skills also in the scope of these procedures which are against their system of values.



Conscientious objection in nursing education

- Timmons (2011) showed that British nursing students underlined respectful attitudes of university personnel to their beliefs.
- One student stated: *„I had to say to them ‘I’m sorry but I can’t be involved in doing abortions, because my religion doesn’t really permit me, or let me feel comfortable about doing that’, and they were fine about it, absolutely fine”.*

Conscientious objection in nursing education

- Practising the right to conscientious objection in clinical settings is not easy. It is a challenge for nurses themselves, co-workers, nursing managers and (of course) patients.
- That is why we cannot avoid discussion this issue during nurse education.

Conscientious objection in nursing education

- Nursing students should be aware that this is one of nurses' rights.



- But this right is not absolute and cannot be used in cases of danger to life or serious damage to the health of the patient.

Conscientious objection in nursing education



In practicing the conscientious clause discrimination towards the patient on the basis of attitudes towards their lifestyle is forbidden.



In these cases, attitudes of mentor toward students should be supportive and not abusive. Students' moral concerns cannot be ignored and should be considered in a delicate way.

Conclusions

- The right to conscientious objection for medical personnel is one of the fundamental principles of the system of human rights protection in the world.
- Nursing students have the right to object to actively perform medical procedures which are against their conscience but they cannot object to being educated about these procedures.

Conclusions

- Open and supportive conversations regarding conscientious objection of nursing students will help them in the future to choose this field of nursing where there is less probability of experience burden for their conscience conflicts of values.
- There is a need for further research to explore the extent to which both nurses and mentors feel adequately equipped to deal with the issue of conscientious objection.

References

- *Termination of pregnancy. An RCN nursing framework.* Royal College of Nursing, London 2013.
http://www.rcn.org.uk/_data/assets/pdf_file/0004/529654/Termination_of_pregnancy_WEB.pdf - date of access: 29.07.2013.
- Catlin A, Armigo Ch, Volat D, Valle E, Hadley MA, Gong W, Bassir R, Anderson K, *Conscientious Objection: A potential Neonatal Nursing Response to Care Orders that Cause Suffering at the End of Life? Study of the Concept.* "Neonatal Network" 2008, 2(27):101-106
- Conscientious objection by nurses and midwives. NMC 2013 - <http://www.nmc-uk.org/Nurses-and-midwives/Regulation-in-practice/Regulation-in-Practice-Topics/Conscientious-objection-by-nurses-and-midwives/> - date of access: 16.09.2013.
- Dickens BM, Cook RJ, *The Scope and Limits of Conscientious Objection,* "International Journal of Gynecology and Obstetrics" 2000, 71:71-77.
- Durak K, Tetych J, Jarmoluk P, Ikwanty K, *Sumienie jako kategoria etyczno-prawna w pracy pielęgniarki,* „Pielęgniarstwo XXI wieku” 2009, 4:13-19.
- Jarmoluk P, Ikwanty K, Durak K, Tetych J, *Klauzula sumienia w praktyce pielęgniarki,* w: Lubelski Kongres Studenckich Kół Naukowych Tygiel 2009 - czyli jak rozwijać naukę? Lublin, 23-24 09.2009, ed. Jacek Caban i Mirosław Szala, Wydawnictwo Politechniki Lubelskiej, Lublin 2009, pp. 116-120;

References

- Johnstone M, *Taking a Stand: Conscientious Objection, Clinical Ethics Committees and Whistleblowing*, In: *Bioethics – A Nursing Perspective*, 4th edn. London: Churchill-Livingstone, 2005, pp. 324-358
 - Kodeks Etyki Zawodowej Pielęgniarki i Położnej Rzeczypospolitej Polskiej, zał nr 1 do Uchwały nr 9 IV Krajowego Zjazdu Pielęgniarek i Położnych z dnia 9 grudnia 2003 roku w sprawie uchwalenia „Kodeksu etyki zawodowej dla pielęgniarki i położnej Rzeczypospolitej Polskiej”. <http://nipip.pl/index.php/uchwaly/krajowych-zjazdow/iv-krajowego-zjazdu-pielegniarek-i-poloznnych/uchwaly/896-9-04-2003> - date of access: 02.08.2013.
 - Strickland SLM, *Conscientious Objection in Medical Students: a Questionnaire Survey*, “*Journal of Medical Ethics*” 2012, 38: 22-25.
 - Timmons S, Narayanasamy A, *How do religious people navigate a secular organisation? Religious nursing students in the British National Health Service*. *Journal of Contemporary Religion* 2011, 26(3): 451-465.
-

**Thank you very much for
your attention!**
