

Early Ethical Dilemmas in Psychiatric Mental Health Nursing

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Purpose: The purpose of this research was to describe the experiences of psychiatric nurses who practiced before and during the introduction of antipsychotic medications and to analyze the nurses' understanding and interpretation of the patient care they delivered.

Method: Eight nurses who were employed as psychiatric nurses before and during the introduction of antipsychotic medications were interviewed at least twice. The first hand accounts of retired psychiatric nurses were audiotaped, transcribed, and analyzed to identify the ethical principles of autonomy, beneficence, nonmaleficence, veracity, and justice.

Findings: The retired psychiatric nurses interviewed for this study expressed feelings of frustration regarding their high level of responsibility and their lack of autonomy. They were often the only nurse responsible for large numbers of patients but lacked the ability to make necessary changes. Because of their limited numbers, nurses supervised attendants who provided daily patient care. The nurses were clear about their responsibility to ensure proper care for individuals who were unable to care for themselves, and who needed assistance with meals, bathing, grooming, and behavior. Nonmaleficence, or the duty to do no harm, was clearly an issue these nurses struggled with, especially when administering special treatments, such as electroconvulsive shock therapy (EST). Forcing patients to receive treatments that were often seen by the patient as punishment instead of therapy caused nurses to question their own veracity. Nurses were hesitant to criticize the care patients received and, for the most part, justified their participation by saying, "This was all we had [to offer]," and, "We were doing the best we could."

Discussion: Although the nurses were reluctant to discuss the less salient aspects of patient care, the difficult conditions created a sense of camaraderie among nurses through which they supported each other, found acceptance, and continued to do the thankless job of caring for hundreds of mentally ill patients. More research is needed to document and analyze this previously unexplored area to better understand how psychiatric nurses made and continue to make difficult decisions. By analyzing the ethical lessons of our past we are empowered with the necessary knowledge to analyze our current knowledge, and draw implications for practice and future research.