

# Ethical Conflict in Clinical Education of Nursing Students: A Conceptual Analysis

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## Abstract

**Background:** Ethical conflict is a complex concept referring to the inability to perform an ethical act or the failure to recognize the correct ethical course of action. Nursing students, similar to other healthcare team members, encounter numerous ethical conflicts during their clinical training. These conflicts encompass various aspects that underscore the significance of examining and analyzing this concept. Accordingly, the present study aimed to analyze the concept of ethical conflict in the clinical education of nursing students.

**Methods:** This review study was conducted using a conceptual analysis approach based on the 8-step method proposed by Walker and Avant in 2023 to clarify the dimensions and characteristics of ethical conflict. A systematic search was conducted in PubMed, SID, Scopus, Embase, Web of Science, Google Scholar, and ProQuest databases using a combination of keywords including 'nursing', 'concept analysis', 'clinical education', 'dilemma', 'conflict', 'nursing student', 'concept', 'clinical practice', 'moral', and 'ethical' without time limits. After reviewing 3023 articles, 23 relevant articles were selected and included in the results section of the study. This approach facilitated the identification of the characteristics, premises, and consequences of the concept.

**Results:** The conflict between student rights and patient rights in education represents a notable concern. One of the prominent factors contributing to moral conflicts and low-quality clinical education is the inadequate development of students' moral competence within an inappropriate learning setting.

**Conclusion:** By clarifying the educational rights of students and the rights of patients, educational and medical administrators would be able to manage ethical conflicts. Thus, it is recommended to explore the strategies for managing ethical conflicts by analyzing the relevant experiences through both qualitative and quantitative studies.

**Keywords:** Ethics, Conflict, Nursing students, Conceptual analysis, Clinical education

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## Introduction

Universities, higher education institutions, and teaching hospitals are considered the most important establishments to institutionalize ethical principles and values in the training of nurses, forming the foundation for proper nursing care in the contemporary era. Therefore, to effectively internalize professional, ethical, and social values, nurses must acquire the necessary skills during their academic studies (1). In the nursing education system, students receive over two-thirds of their education in hospital settings under the supervision of instructors. The clinical environment hinges on the interaction among patients, students, and instructors, all working

collaboratively towards the shared objectives of patient recovery and student education (2). The need to pay more attention to ethical considerations in both patient care and clinical education to enhance students' scientific knowledge and skills is more critical than ever (3). Compliance with ethical principles in universities not only helps educators standardize teaching practices but also plays a role in establishing effective relationships among people and ensuring the efficacy of the teaching-learning processes (4). Ethical values and regulations related to education help students receive the best education they deserve (5). In other words, the ideal ethical performance can be obtained by recognizing ethical issues in clinical



situations, analyzing clinical situations and measuring possible outcomes, making the best decisions, taking appropriate actions, accepting responsibility for one's actions, and being able to comply with ethical issues when dealing with patients (6,7). Nursing students, as future healthcare professionals and members of the treatment team (8), often find themselves in situations rife with ethical challenges for various reasons, including lack of self-confidence, fear of the clinical instructor, and concerns about academic grades (9).

Given that educational and clinical settings necessitate establishing numerous interactions for their organizational growth, conflicts often arise as a natural and unavoidable result of human interactions (3). Conflict results from a lack of internal or external consensus on decisions (10). Ethical conflicts occur when ethical decision-making is challenged in complex conditions that cannot be easily resolved, requiring a choice between complying with ethical principles and the conditions of the patient (11).

In recent years, ethical decision-making in hospitals has become increasingly complex due to advancements in medical sciences, changes in treatment methods, rising costs, and the influence of personal and organizational interests, hence leading to an increase in ethical challenges. Various studies have reported the presence of moderate to severe ethical conflicts in the clinical education of nursing students (6,12).

Garity noted that ethical challenges faced by nursing students were for the first time reported by Cameron Shafer and Park in 2001. Nursing students observed ethical conflicts in the clinical practices and professional behavior of the staff and issues related to quality of life, end-of-life care, and lack of justice in patient treatment (13). If nursing students perform poorly in ethical issues besides their clinical performance, it will lead to negative feelings. These adverse emotional responses caused by unresolved challenges can manifest as physical and mental problems, dissatisfaction, disappointment, lack of motivation, job burnout, and ultimately, withdrawal from educational programs. Additionally, these conflicts affect their clinical experiences, leading to complications in their learning process. Finally, this issue will subject students to ethical distress and significant ethical challenges in making clinical decisions in their future practice (12,14-16).

Research shows that nursing students may lack proper reasoning when confronted with ethical dilemmas, and despite receiving theoretical training and being familiar with ethical issues, they may struggle to provide appropriate responses in such situations (7,17). One of the possible explanations for this is their incomplete understanding and knowledge of the various dimensions of the concept of ethical conflict to effectively identify and address the conflicts they encounter. Therefore, the present study aims to analyze the concept of ethical conflict and its different dimensions among nursing students using the

method proposed by Walker and Avant (18).

## Methods

This review study was conducted in 2023 using the 8-step conceptual analysis approach proposed by Walker and Avant to clarify the dimensions and characteristics of the concept of ethical conflict in the clinical education of nursing students. This approach involves eight distinct steps: 1) Choosing a concept; 2) Determining the purpose of analysis; 3) Identifying potential uses of the concept; 4) Defining attributes; 5) Identifying model cases; 6) Identifying borderline, related, contrary, invented, and illegitimate cases; 7) Identifying antecedents and consequences; and 8) Defining empirical referents. Walker and Avant recommended specifying as many applications as possible for the concept since neglecting the physical aspects of a concept can deprive the reader of its valuable aspects (19).

The main author (MN), assisted by an expert in medical library and information science, reviewed all available sources from both domestic and foreign websites up to June 7, 2023. A systematic search was conducted in PubMed, SID, Scopus, Embase, Web of Science, and ProQuest databases to identify relevant publications within a specific period. Moreover, Google Scholar was used as a comprehensive and scientific search engine for manual searching and retrieval of related articles not found in other databases, thereby enhancing the electronic search process.

In this study, after selecting the concept of ethical conflict in the clinical education of nursing students, articles were searched for using a combination of keywords such as 'dilemma', 'conflict', 'nursing student', 'clinical practice', 'moral', and 'ethical' and by checking MeSH terms in the title or abstract via Boolean operators (AND/OR/NOT). All articles with full-text access were extracted from English and Persian databases without any time limit.

The inclusion criteria were studies selecting nursing students as the target group, having full-text access, and addressing ethical conflicts in clinical education in the results section. Letters to the editor, book chapters, conference abstracts, theses, and studies not relevant to ethical conflicts faced by nursing students were excluded from the review.

Two reviewers (MN, MM) critically evaluated titles and abstracts and eliminated duplicates and irrelevant articles. Then, they evaluated the full texts of the selected articles. The JBI Critical Appraisal checklist was used following the approval of 23 articles (20). The search strategy is illustrated in Figure 1.

The articles were summarized and imported into MAXQDA software (version 20) for analysis.

## Results

### Choosing the concept

In the field of nursing, ethical care is so important that it

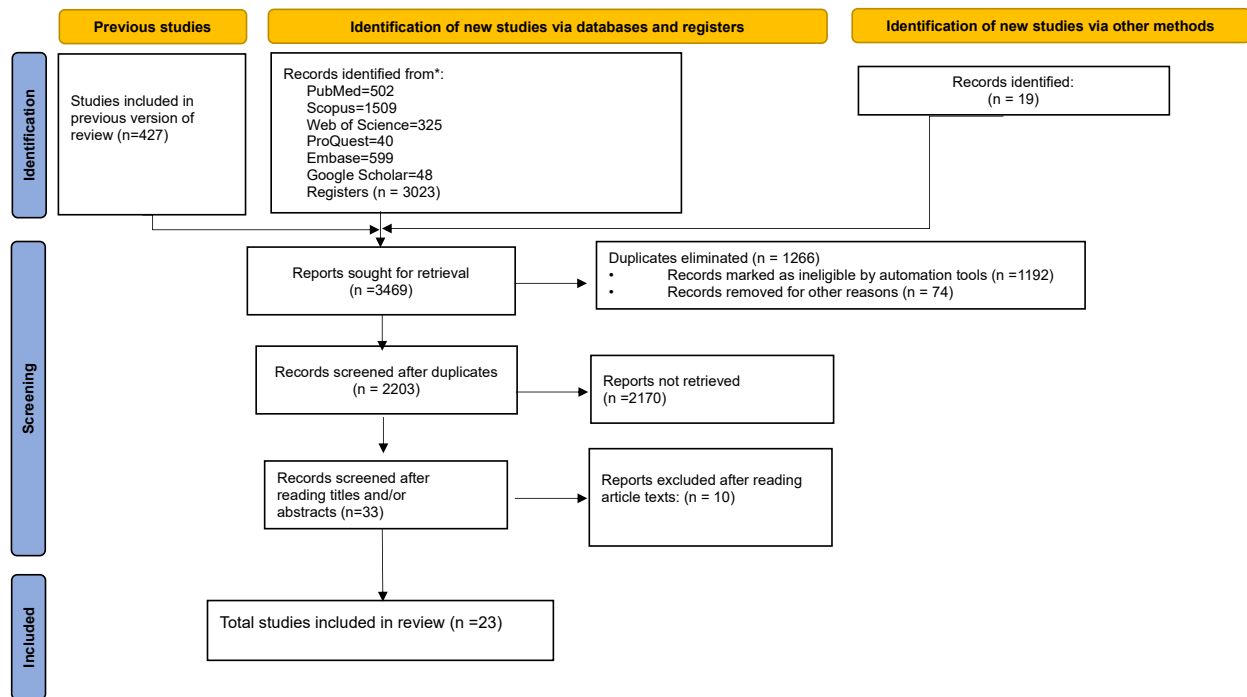


Figure 1. Article selection steps based on the PRISMA checklist (20)

is sometimes preferred over the clinical aspects of nursing, making ethical concepts in nursing highly valuable (21). Ethical conflict is considered one of the most controversial and challenging concepts in the contemporary era (22). Ethical conflicts are prevalent in various disciplines and are of paramount importance in the healthcare system, particularly among nurses and nursing students. Furthermore, the negative impacts of conflicts on job satisfaction and the risk of job burnout have underscored the need for increased attention to this issue (10,23). The need to address ethical conflicts in clinical education is more pressing than ever, posing significant challenges for nursing professors, students, and managers when facing ethical conflicts in the clinical setting. Understanding and analyzing this concept will help manage and resolve ethical conflicts in clinical education across all levels and situations in nursing education.

The review of the literature also indicated the absence of an appropriate definition for the concept of ethical conflict in the clinical education of nursing students. Ethical conflict refers to a situation in which an individual is confronted with two ethical obligations but is unable to fulfill both simultaneously. Another aspect of ethical conflict involves being trapped in a dilemma regarding the action to take when one option is right and the other is wrong and the individual does not have the necessary competence to discern the right choice (22). Definitions of ethical conflict vary across disciplines depending on the context, and the lack of a clear boundary in defining ethical conflict in each field has caused the term to be used interchangeably with concepts such as ethical problems and ethical dilemmas. Thus, by delineating its various

aspects, it is possible to clarify this concept and devise appropriate strategies for its management.

#### *Determining the purpose of analysis*

Ethical development is a dynamic process that unfolds gradually over a long period. The notion of ethical action plays a crucial role as a solution to address ethical conflicts (24). Nursing students are expected to acquire the ability to apply ethical knowledge at the bedside during their clinical training. They are supposed not to consider this task separate from their professional duties so that they can play an active role in resolving ethical conflicts in patient care in the future (25). Failure to address these conflicts among nursing students can lead to a decrease in ethical sensitivity and a negative impact on the quality of patient care (7). The purpose of the analysis in this study was to investigate the dimensions and characteristics of the concept of ethical conflict in clinical education using Walker and Avant's approach. By incorporating this concept into clinical education, a deeper comprehension of ethical conflicts can be achieved, leading to more effective utilization of this concept which enhances the quality of clinical education.

#### *Identifying all potential uses of the concept in nursing education*

Ethical conflict is a broad concept with different dimensions applying to various contexts. Ethical conflicts commonly arise in nursing education settings due to extensive interactions among students, instructors, and patients (26). The lack of justice in educational policies and laws is sometimes considered a bottleneck

between ethics and laws (27). Moreover, inadequate education in the field of ethics also confuses students. Studies have highlighted several factors contributing to ethical conflicts in nursing clinical education, including discrepancies between theory and practice, insufficient implementation of ethical teachings in clinical settings, the lack of proper and reliable communication between students and patients, limited opportunities for students to provide appropriate care, and challenges in ensuring timely provision of adequate care (28-31).

### Defining the attributes of the concept of ethical conflict in nursing education

Walker and Avant define attribute as a set of recurring instances of a concept (19). The terms Moral Conflict (MC) and Moral Dilemma (MD) in the English language are specifically used in ethical contexts to denote the unique concept of ethical conflict. It should be noted that this definition emphasized the two levels of recognizing and acting upon ethical duties. In certain disciplines, such as psychology, conflict is associated with motivations and goals, while sociology is referred to as the conflict of roles and norms (22). In clinical ethics, an ethical dilemma arises when values and binding duties compete, and professionals do not know how to act (32). Choices between two actions may be ethically acceptable, and an individual may even be aware of appropriate actions. However, they may be unable to perform these actions due to internal or external factors (33).

The attribute needs to be repeated many times in a concept to help researchers distinguish it from similar concepts. Each concept is characterized by more than one defining attribute. Nevertheless, it is essential to determine which attribute is the more appropriate to describe the concept. This definition includes all variables

that researchers focus on to determine outcomes and validate concepts (34). The attributes of the concept of ethical challenge are presented in Table 1 according to the reviewed articles (9,12,26,31-33,35-47).

### Model case

The model case describes an authentic case that encompasses all attributes of the concept (19).

*"A 64-year-old male patient needed urine catheterization by a physician due to urethral stenosis. Given the rarity of this case in clinical training, the instructor called the treatment team to observe the procedure. The patient experienced feelings of anxiety and restlessness. He asked the nurse if everyone needed to be present there. In response, the nurse pointed out that the hospital was educational and compromised the patient's right to choose and consent. The student raised this issue with the instructor, citing it as a violation of the patient's rights. This led to a conflict between his values and the perception of professional obligations."*

### Borderline case

Borderline case refers to a case that encompasses most or some attributes of the concept (19).

*"Ms. M.N., a professor of undergraduate nursing students, took a group of students to the bedside of a cardiac arrest patient for cardiac resuscitation. However, the resuscitation was not successful, and the patient died. The resuscitation team allowed the students to practice intubation on the deceased patient, but the instructor told the students that they needed to obtain the family's informed consent. The students said that the family members would not grant permission, and they regretted that this educational scenario might not be repeated. This situation raised ethical conflict for both students*

**Table 1.** Defining the attributes of the concept of ethical conflict in the clinical education of nursing students

Main category	Subcategories	Primary codes
Protecting the rights of students and patients in clinical education	Ignoring the patients' rights charter in the education process	<ul style="list-style-type: none"> <li>• Neglect of patient interests</li> <li>• Violation of patient rights</li> <li>• Injustice and discrimination in care</li> <li>• Failure to protect patient privacy</li> <li>• Failure to protect patient confidentiality</li> <li>• Inadequate provision of care for terminally ill patients</li> <li>• Failure to obtain informed consent from patients for training</li> <li>• Unprofessional conduct</li> <li>• Physical mistreatment of patients</li> <li>• Psychological mistreatment of patients</li> <li>• Inappropriate communication with patients</li> <li>• Failure to provide information and knowledge to patients</li> <li>• Patient refusal of treatment</li> </ul>
	Distance between ethics in education and patient care	<ul style="list-style-type: none"> <li>• Students observing unethical behavior of the staff</li> <li>• Considering the patient as the victim of student education</li> <li>• Students' educational needs against patient satisfaction</li> <li>• Contradiction between the correct action and the description of assigned duties</li> <li>• Conflict between personal and professional values</li> <li>• Disparities between students' and instructors' understanding of ethical issues</li> <li>• Inappropriate interprofessional communication</li> <li>• Differences in values and mentalities</li> <li>• Asking students to provide healthcare in a non-specialized field</li> </ul>

and the instructor to decide whether to obtain consent or carry out educational activities.”

Ethical conflict encompasses a wide range of attitudes and may be synonymous with terms such as moral uncertainty, moral ambiguity, moral bottleneck, and moral tension (47). Moral uncertainty arises when the individual encounters a situation where the morally correct course of action is unclear (48). Besides, in such a situation, there is a lack of recognition of the correct moral act or a lack of proper recognition between two moral acts (10). Ethical ambiguity occurs when there are conflicting and diverse interpretations and concepts and the effectiveness of their results is doubtful (49). An ethical dilemma takes place when the nurse is forced to choose between two options, she doubts the correctness of both. Indeed, she needs to choose between two undesirable options, and the option that causes the least harm to the patient should be selected (50). In ethical tension, the nurse knows what is the right action and the right choice, but due to the existing conditions and limitations caused by the organization or the patient, it is impossible to choose the right option. In this situation, nurses must try to control their emotions, often experiencing unpleasant feelings, and as a result, ethical tension (48).

### Contrary Case

The contrary case describes the situation when there is no definition for the main concept or it is not known as the main concept (19). Ethical compatibility does not imply that people do not face conflicts; rather, it means that they resolve conflicts fundamentally and reach compatibility and balance (51).

“Ms. M.N. took a group of nursing students to the

bedside of a patient, and after introducing herself and the students, provided the necessary explanations to the patient. To ensure cooperation and protect patient privacy, she supervised the students and guided them during the venipuncture. Through effective communication with the patient, the student clearly explained to the patient the reason for performing this procedure and secured a suitable intravenous line for the patient by following all the steps of the protocol.”

Richmond Campbell and Victor Kumar’s theory is based on moral consistency reasoning (MCR) as a foundational ethical model. This theory suggests that the empirical opinions of people who have encountered similar ethical situations should be utilized, aligning very closely with Rawls’s theory of reflective equilibrium (52). Therefore, by applying similar strategies for conflict management in similar situations, students can be guided toward moral adjustment.

### Antecedents and consequences

Antecedents refer to what needs to be prepared before the occurrence of the concept, while consequences are the outcomes resulting after the occurrence of the concept (19). The factors that play a role in creating moral conflict are shown in Tables 2 and 3 based on a review of the literature.

### Empirical referents

The empirical representation shows how the concept is measured and how much the definition can be useful in measuring the concept and validating it (19). In 2013, the ethical conflict questionnaire was designed and psychometrically evaluated by Falcó-Pegueroles et al.

**Table 2.** Antecedents of the concept of ethical conflict in the clinical education of nursing students

Main category	Subcategories	Primary codes
Development of students’ ethical norms in an appropriate context	Lack of moral maturity in the student	<ul style="list-style-type: none"> <li>• Failure to understand the importance of ethics</li> <li>• Silence to avoid conflicts in the team</li> <li>• Inability to resolve the conflict</li> <li>• Fear of mistakes and negative consequences</li> </ul>
	Student’s characteristics	<ul style="list-style-type: none"> <li>• Resistance to change</li> <li>• Low self-confidence</li> <li>• Shyness and insufficient courage</li> <li>• Inexperience</li> </ul>
	Inadequate educational background	<ul style="list-style-type: none"> <li>• Neglecting the patient’s history</li> <li>• Ignoring the student in clinical care</li> <li>• Inability to report</li> <li>• Inability to do the right thing</li> <li>• Lack of independence in decision-making</li> </ul>
	Lack of a suitable ethical context	<ul style="list-style-type: none"> <li>• Ignoring students’ opinions</li> <li>• Lack of a position for the student in the clinical hierarchy</li> <li>• Ambiguity in ethical practices</li> <li>• Different ideals in health</li> <li>• Conflicting values and ideals</li> <li>• Inappropriate communication with the patient</li> <li>• Absence of moral norms at the bedside</li> <li>• Not having a moral role model</li> <li>• Failure to supervise the activities of the students</li> <li>• Insufficient financial and human resources</li> <li>• Lack of support and guidance</li> </ul>



**Table 3.** Consequences of the concept of ethical conflict in the clinical education of nursing students

Main category	Subcategories	Primary codes
Poor quality nursing clinical education	Physical and mental harm experienced by the student	Feeling helpless and hopeless Anxiety and stress Emotional health disorder Confusion Frustration and lack of motivation Feeling guilty Anger Physical problems
	Professional and ethical anonymity	Loss of identity Failure to apply ethical knowledge Impaired clinical learning and professional development
	Professional injury	Burnout Changing future careers Resignation
	Improper care	Mental injuries of the patient Quality care Influencing clinical decision-making

This tool has 18 scenarios that depict situations leading to ethical conflict in intensive care, such as issues related to confidentiality, patient interests, treatment and research procedures, resource and equipment shortages, and time management. The items are scored using a 5-point Likert scale, ranging from high ethical conflict to no ethical conflict with a total score range of 18 to 90. The questionnaire demonstrated good internal consistency with a Cronbach's alpha coefficient of 0.882 in the original study (53), and 0.88 in Jahandar and colleagues' study (54). This questionnaire specifically focuses on the ethical conflicts experienced by nurses working in special care units.

In a study conducted in Thailand, the ethical commitment of undergraduate nursing students was investigated across six domains and 81 items. The domains included protecting patient privacy and confidentiality (22 items), respecting patients (25 items), providing equal care to all patients (9 items), not harming patients (12 items), doing good for patients (8 items), and telling the truth to patients and the healthcare team (5 items). The study findings indicated strong internal consistency reliability with alpha coefficients ranging from 0.84 to 0.95 for each factor and 0.98 for the overall scale (55). In this tool, students' ethical commitment is taken into consideration, and ethical conflicts, while sharing similarities with non-commitment in some components, do not cover all cases. Despite various studies on ethical conflicts in the clinical education of nursing students, a universally accepted criterion for measuring the extent of ethical conflicts in clinical settings is yet to be established.

## Discussion

The results of this study showed that ethical conflict is a dynamic concept. In this study, the lack of ethical maturity in students, the individual characteristics of the students, the inadequate educational background, and the absence of a solid ethical foundation were identified as the

factors contributing to the emergence of ethical conflicts. The most important attributes of ethical conflict were ignoring patient rights in the educational process and the distance between ethics in theoretical education and their application in clinical practice at the patient's bedside. The study highlighted that ethical conflicts can lead to physical and psychological harm to students, the loss of professional and ethical identity, professional impairment, and a decline in the quality of care provided.

Recently, new scenarios have been proposed in nursing clinical education, with a significant emphasis placed on ensuring that patients are not the victims of education. These skills are usually not fully acquired during the formal educational course. Therefore, the ethical dimension in the nursing profession and other healthcare disciplines requires profound humanistic education at the patient's bedside (42). Following the core mission of clinical education, student education is prioritized over patient needs (29). On the other hand, nursing students have always been instructed to provide patient-centered care by focusing on patient needs and respecting their decisions. Consequently, certain conflicting ideals and expectations might confuse students (39). Education that aims to benefit the patient while enhancing the student's skills necessitates proper communication among the patient, the student, the medical staff, and the clinical instructor. Improper interprofessional communication between nurses and patients can undermine students' ethical decision-making. In an educational setting, where the patient is the center of attention, other members of the healthcare team are placed hierarchically from the patient. In this regard, Eckardt et al. stated that within the communication chain in the clinical setting, students are ignored and excluded from patient treatment procedures, hence leading to conflicts. If the students are not neglected and the patients, their families, and members of the healthcare team trust them, they will be more inclined to introduce themselves as students (37). Sanagoo et al

also concluded in their qualitative study that in clinical communication, not introducing the students to their real title and lack of self-confidence in communication may stem from the students' lack of clinical competence and their efforts to establish themselves as professionals, with the primary issue being the patient's trust in the care provided by students (27).

The deficiency in students' clinical competence, attributed to inadequate clinical skills and insufficient supervision by clinical instructors, along with the disparity between theoretical education and clinical practice, contributes to patient dissatisfaction with the care delivered by students. Additionally, clinical conflicts between professors and students can violate the patient's privacy. Research shows that patients are dissatisfied with the large number of students entering the room without permission, not obtaining informed consent for examinations, and their unwillingness to cooperate in educational activities (27).

Ethical maturity plays a crucial role in shaping the ability of graduate nurses to make independent and effective decisions in ambiguous and complicated clinical situations so that as professional thinkers, relying on ethical principles, they can reach the best solution in any situation (56). Although Zeynali et al. showed no significant difference in ethical reasoning between students and clinical nurses (57), Gibson et al. revealed that students often experience ethical discomfort, suggesting a lack of ethical maturity among students that might persist into their nursing careers. It was also pointed out that factors such as ethical courage, age, education level, and supervision can contribute to the ethical development of students (58). Compared to professional nurses, nursing students are inexperienced and do not have enough talent and courage to face and manage ethical dilemmas in clinical settings, exhibiting stress due to insufficient support and guidance in clinical care (34).

It should be noted that cultural differences between patients as well as the treatment setting create different ethical contexts for students and instructors (59). Clinical educators also experience more ethical conflicts as they have to juggle the dual responsibilities of being an instructor and a healthcare provider (60). Accordingly, failure on the part of educators and nurses to adhere to ethical principles may result in providing an inappropriate educational platform, leading students to confront ethical conflicts by observing unethical situations and comparing them with what they have learned (28).

When nursing students lack appropriate guidance and positive role models, adherence to ethical principles in clinical settings may be compromised. The nursing profession is not only tasked with providing ethical education for nursing students but also with training nurses who serve as effective role models (30). To students, a nurse is a mirror of the reality of the profession and serves

as a source of motivation or demotivation, influencing their future (45). As students often lack decision-making authority in clinical settings, they inevitably serve as observers of the patient's treatment process. In many instances, they may witness suboptimal care provided by the treatment team, leading to ethical conflicts (59). Therefore, the role of healthcare professionals and educators as ethical role models is considerably important in educating students (61).

Nursing students experience stressful ethical conflicts in nursing clinical practice. If ethical conflicts are not resolved properly, stress levels increase among students. Facing these problems in clinical environments can endanger the emotional and physical health of students, thus affecting their clinical learning and professional growth (34). Therefore, effective management of ethical conflicts in hospital settings improves the professional behavior of students and equips them with the necessary skills for their future nursing practice (62), enabling them to deal with ethical conflicts in the future (28).

## Conclusion

According to the studies reviewed, nursing students commonly encounter ethical conflicts concerning protecting the rights of students against the rights of patients in clinical education, which might be due to the lack of established ethical standards for students in complicated situations. These conflicts, stemming from intrapersonal, interpersonal, and organizational sources, have the potential to compromise the quality of clinical education if left unaddressed or improperly managed. Managing ethical issues in nursing practice is a challenging task, highlighting the need for enhancing ethical education and raising awareness among students to identify and address conflicts. Moreover, limited time for students and instructors to discuss the needs and improve ethical practices in healthcare settings also exacerbates the issue. Therefore, recognizing ethical conflicts, understanding their various aspects, and differentiating them from related concepts such as ethical uncertainty, ethical ambiguity, ethical bottleneck, and ethical tension are crucial steps toward resolving ethical conflicts and promoting ethical compatibility. Accordingly, it is recommended to explore the strategies for managing ethical conflicts by investigating the relevant experiences through both qualitative and quantitative studies.

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### Competing Interests

The authors declare that they have no conflict of interest.

### Ethical Approval

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### References

- Dadashi N, Pazokian M, Motamedzadeh M. The experiences of nursing internship students during the COVID-19 pandemic in Iran. *J Qual Res Health Sci*. 2023;12(2):60-7. doi: [10.34172/jqr.2023.10](#).
- Mangolian Shahrabaki P, Nouhi E. Explaining professionalism and professional socialization process in nursing students. *J Qual Res Health Sci*. 2023;12(1):1-8. doi: [10.34172/jqr.2023.01](#).
- Boozaripour M, Abbaszadeh A, Shahriari M, Borhani F. Ethical values in nurse education perceived by students and educators. *Nurs Ethics*. 2017;25(2):253-63. doi: [10.1177/0969733017707009](#).
- Sabet Sarvestani R, Khani Jeihooni A, Fereidouni Z, Moradi Z, Amirkhani M, Karimi S. The effect of teaching ethical principles through role playing on nursing students internship skills. *Journal of Medicine Spiritual Cultivation*. 2017;26(3):159-70. [Persian].
- Farahbakhsh F, Nouhi E, Zolali F. The importance of ethics in education and the level of complying with it from the perspective of nursing students of Kerman University of Medical Sciences. *J Educ Ethics Nurs*. 2016;5(1):1-7. doi: [10.52547/ethicnurs.5.1.1](#). [Persian].
- Escolar-Chua RL. Moral sensitivity, moral distress, and moral courage among baccalaureate Filipino nursing students. *Nurs Ethics*. 2016;25(4):458-69. doi: [10.1177/0969733016654317](#).
- Ghadermazi M, Shamsaei F, Tapak L, Sadeghian E. Investigation of ethical reasoning and related factors in nursing students of Hamadan University of Medical Sciences in 2020. *J Nurs Educ*. 2021;10(2):33-41. [Persian].
- Goli R, Jasemi M, Esmaili R, Khalkhali H. Nursing codes of ethics education based on lecture on moral performance of nursing students: a quasi-experimental study. *Nurs Midwifery J*. 2020;18(5):369-78. [Persian].
- Baghdadi N, Alsomali Z, Alanazi ME, Alasmari M, Alfaqi R, Alsafyan R, et al. Moral distress among nursing students during clinical training. *Novelty Journals*. 2020;7(3):269-76.
- Piryanı RM, Piryanı S. Conflict management in healthcare. *J Nepal Health Res Counc*. 2019;16(41):481-2.
- Jia Y, Chen O, Xiao Z, Xiao J, Bian J, Jia H. Nurses' ethical challenges caring for people with COVID-19: a qualitative study. *Nurs Ethics*. 2020;28(1):33-45. doi: [10.1177/0969733020944453](#).
- Mehdipour Rabori R, Dehghan M, Nematollahi M. Nursing students' ethical challenges in the clinical settings: a mixed-methods study. *Nurs Ethics*. 2018;26(7-8):1983-91. doi: [10.1177/0969733018810766](#).
- Garity J. Fostering nursing students' use of ethical theory and decision-making models: teaching strategies. *Learn Health Soc Care*. 2009;8(2):114-22. doi: [10.1111/j.1473-6861.2009.00223.x](#).
- Hassanzadeh Naeini M, Nasiriani KH, Fazljoo SE. Moral courage of the nursing students of Yazd University of Medical Sciences, Iran. *Iran Journal of Nursing*. 2020;33(127):35-44. doi: [10.29252/ijn.33.127.35](#). [Persian].
- Shayestehfard M, Torabizadeh C, Gholamzadeh S, Ebadi A. Ethical sensitivity in nursing students: developing a context-based education. *Electron J Gen Med*. 2020;17(2):em195. doi: [10.29333/ejgm/7812](#).
- Obeid S, Man M. Strengthening perceptions of ethical competence among nursing students and graduates. *SAGE Open Nurs*. 2020;6:2377960820924170. doi: [10.1177/2377960820924170](#).
- Azadian M, Momennasab M. Nursing students' perception of professional challenges: a qualitative study. *J Med Educ Dev*. 2015;10(1):12-25. [Persian].
- Habibi H, Bigdeli S, Sohrabi Z, Ebadi A. Professionalism among academic educational leaders: a concept analysis. *J Adv Med Educ Prof*. 2022;10(4):259-66. doi: [10.30476/jamp.2022.93131.1517](#).
- Walker L, Avant K. *Strategies for Theory Construction in Nursing*. Boston, MA: Prentice Hall; 2011.
- PRISMA statement. 2023. Available from: <https://www.prisma-statement.org/>.
- Davoudi M, Afrazandeh SS, Yazdanparast E, Ghorbani SH, Sadeghian AH, Jebreili K. The effects of professional ethics workshop on nursing students' perspective of caring behaviors. *J Med Ethics*. 2020;14(45):88-99. [Persian].
- Bahrami M, Faramarz Gharamaleki A. Conceptual analysis of moral dilemmas. *Iran J Med Ethics Hist Med*. 2012;5(2):32-44. [Persian].
- Usberg G, Uibu E, Urban R, Kangasniemi M. Ethical conflicts in nursing: an interview study. *Nurs Ethics*. 2020;28(2):230-41. doi: [10.1177/0969733020945751](#).
- Mahmoudi H, Nezamzadeh M. Presenting the view of virtue-based ethical theory in resolving ethical conflicts in nursing education: review study. *Journal of Medicine Spiritual Cultivation*. 2023;31(4):260-71. [Persian].
- Araghian Mojarad F, Hosseini Karnami SH, Malekzadeh R, Assadi T, Khazaei-Pool M, Abedi G, et al. Nurses' experiences of moral conflicts in the educational and medical centers of Mazandaran University of Medical Sciences in 2019. *Journal of Religion and Health*. 2021;9(1):24-36. [Persian].
- Jahanshahi R, Rajabpur Arefi M, Chorli F, Sanagoo A, Jouybari L, Rezapour Esfahani M. Ethical challenges in the clinical and educational environment of the university: experiences of nursing and midwifery students. *Educ Ethics Nurs*. 2018;7(1-2):383-90. doi: [10.52547/ethicnurs.7.1.2.383](#). [Persian].
- Sanagoo A, Kalantari S, Taheri T, Jouybari I. The nursing students' perspective and experiences of patients' interest in receiving care by trainees. *Daneshvar Medicine*. 2016;23(123):51-60. [Persian].
- Park HA, Cameron ME, Han SS, Ahn SH, Oh HS, Kim KU. Korean nursing students' ethical problems and ethical decision making. *Nurs Ethics*. 2003;10(6):638-53. doi: [10.1191/0969733003ne653oa](#).
- Bremer A, Holmberg M. Ethical conflicts in patient relationships: experiences of ambulance nursing students. *Nurs Ethics*. 2020;27(4):946-59. doi: [10.1177/0969733020911077](#).
- Cameron ME, Schaffer M, Park HA. Nursing students'



- experience of ethical problems and use of ethical decision-making models. *Nurs Ethics*. 2001;8(5):432-47. doi: [10.1177/096973300100800507](https://doi.org/10.1177/096973300100800507).
31. Schneider DG, Ramos FR, Saioron I, Bruggmann MS, da Silva F, de Pádua Lorençoni B. Ethical problems in hospital clinical experiences of nursing students and professionals. *Rev Enferm Ref*. 2022;6(1):e21111. doi: [10.12707/rv21111](https://doi.org/10.12707/rv21111).
  32. Çevik Durmaz Y. Ethical dilemma in nursing students: a case study. *Int J Caring Sci*. 2022;15(1):77-86.
  33. Sierra M, Cianelli R. Health literacy in relation to health outcomes: a concept analysis. *Nurs Sci Q*. 2019;32(4):299-305. doi: [10.1177/0894318419864328](https://doi.org/10.1177/0894318419864328).
  34. Albert JS, Younas A, Sana S. Nursing students' ethical dilemmas regarding patient care: an integrative review. *Nurse Educ Today*. 2020;88:104389. doi: [10.1016/j.nedt.2020.104389](https://doi.org/10.1016/j.nedt.2020.104389).
  35. Caldwell ES, Hongyan L, Harding T. Encompassing multiple moral paradigms: a challenge for nursing educators. *Nurs Ethics*. 2010;17(2):189-99. doi: [10.1177/0969733009355539](https://doi.org/10.1177/0969733009355539).
  36. Palacios-Ceña D, Velarde-García JF, Espejo MM, González-Hervías R, Álvarez-Embarba B, Rodríguez-García M, et al. Ethical challenges during the COVID-19 pandemic: perspectives of nursing students. *Nurs Ethics*. 2021;29(2):264-79. doi: [10.1177/09697330211030676](https://doi.org/10.1177/09697330211030676).
  37. Eckardt M, Lindfelt M. An analysis of nursing students' ethical conflicts in a hospital. *Nurs Ethics*. 2018;26(7-8):2413-26. doi: [10.1177/0969733018784730](https://doi.org/10.1177/0969733018784730).
  38. Erdil F, Korkmaz F. Ethical problems observed by student nurses. *Nurs Ethics*. 2009;16(5):589-98. doi: [10.1177/0969733009106651](https://doi.org/10.1177/0969733009106651).
  39. Escolar Chua RL, Magpantay JC. Moral distress of undergraduate nursing students in community health nursing. *Nurs Ethics*. 2018;26(7-8):2340-50. doi: [10.1177/0969733018819130](https://doi.org/10.1177/0969733018819130).
  40. Feeg VD, Mancino DJ, Rushton CH, Waligora Mendez KJ, Baierlein J. Ethical dilemmas for nursing students and faculty: in their own voices. *Nurs Educ Perspect*. 2021;42(1):29-35. doi: [10.1097/01.Nep.0000000000000730](https://doi.org/10.1097/01.Nep.0000000000000730).
  41. Lindseth G. Practicing invasive procedures on students and patients: an ethical dilemma in nursing education. *Nurs Forum*. 1994;29(1):18-24. doi: [10.1111/j.1744-6198.1994.tb00147.x](https://doi.org/10.1111/j.1744-6198.1994.tb00147.x).
  42. Macpherson I, Roqué MV, Segarra I. Moral dilemmas involving anthropological and ethical dimensions in healthcare curriculum. *Nurs Ethics*. 2020;27(5):1238-49. doi: [10.1177/0969733020914382](https://doi.org/10.1177/0969733020914382).
  43. Ramos FR, de Farias Brehmer LC, Vargas MA, Trombetta AP, Silveira LR, Drago L. Ethical conflicts and the process of reflection in undergraduate nursing students in Brazil. *Nurs Ethics*. 2015;22(4):428-39. doi: [10.1177/0969733014538890](https://doi.org/10.1177/0969733014538890).
  44. Sadeghi R, Ashktorab T. Ethical problems observed by nursing students: a qualitative approach. *J Med Ethics*. 2011;5(15):43-62.
  45. Snopek P, Popovičová M, Plisková B. Moral dilemma in clinical practice of nursing students. In: 2nd International Conference on Health and Health Psychology (ICH&HPSY). Porto: Future Academy; 2016. doi: [10.15405/epsbs.2016.07.02.18](https://doi.org/10.15405/epsbs.2016.07.02.18).
  46. Solum LL, Schaffer MA. Ethical problems experienced by school nurses. *J Sch Nurs*. 2003;19(6):330-7. doi: [10.1177/10598405030190060501](https://doi.org/10.1177/10598405030190060501).
  47. Heydari A, Meshkinyazd A. Ethical challenges in nursing profession. *Journal of Multidisciplinary Care*. 2018;7(1):84-95. [Persian].
  48. Dehghani A, Ordoubadi N, Shamsizadeh M, Parviniyan Nasab A, Talebi M. Perspective of patients about compliance with standards of professional ethics in nursing practice. *J Nurs Educ*. 2014;3(2):76-84. [Persian].
  49. Sajadi S. Disciplines and methods of moral and value education. *Theological Philosophical Research*. 2000;3(2):144-65. [Persian].
  50. Ghurchiani F, Barati Martati A, Abolghasem Gorji H, Khatami Firoozabadi A, Haghani H, Goldoost Marandi F. Ritual observance of ethics and patient care nurses in teaching hospitals of Tehran University of Medical Sciences. *Med Ethics*. 2013;23:63-79. [Persian].
  51. Arvanitis A, Kalliris K. Consistency and moral integrity: a self-determination theory perspective. *J Moral Educ*. 2020;49(3):316-29. doi: [10.1080/03057240.2019.1695589](https://doi.org/10.1080/03057240.2019.1695589).
  52. Paulo N. Moral Consistency Reasoning Reconsidered. *Ethic Theory Moral Pract*. 2020;23(1):107-23. doi: [10.1007/s10677-019-10037-3](https://doi.org/10.1007/s10677-019-10037-3).
  53. Falcó-Pegueroles A, Lluch-Canut T, Guàrdia-Olmos J. Development process and initial validation of the ethical conflict in nursing questionnaire-critical care version. *BMC Med Ethics*. 2013;14:22. doi: [10.1186/1472-6939-14-22](https://doi.org/10.1186/1472-6939-14-22).
  54. Jahandar F, Mohtashami J, Atashzadeh-Shorideh F, Pishgooie SA. Effectiveness of the negotiating style on ICU nurses' moral conflict in selected hospitals of Guilan University of Medical Sciences. *Iran J Med Ethics Hist Med*. 2016;9(1):37-49. [Persian].
  55. Perngyai C, Chaowalit A, Nasae T, Scheider JK. Development and psychometric evaluation of the Moral Commitment Scale for Thai baccalaureate nursing students (MCS-Thai). *J Res Nurs Midwifery Health Sci*. 2020;40(1):15-29.
  56. Evans BC, Bendel R. Cognitive and ethical maturity in baccalaureate nursing students: did a class using narrative pedagogy make a difference? *Nurs Educ Perspect*. 2004;25(4):188-95.
  57. Zeynaly S, Mozafari M, Khorshidi A. Evaluating and comparing the ability of ethical reasoning for nursing students and nurses working in the teaching hospitals affiliated to Ilam University of Medical Sciences in 2017. *Int J Pharm Res*. 2019;11(1):159-65. doi: [10.31838/ijpr/2019.11.01.016](https://doi.org/10.31838/ijpr/2019.11.01.016).
  58. Gibson E, Duke G, Alfred D. Exploring the relationships among moral distress, moral courage, and moral resilience in undergraduate nursing students. *J Nurs Educ*. 2020;59(7):392-5. doi: [10.3928/01484834-20200617-07](https://doi.org/10.3928/01484834-20200617-07).
  59. Muhaimin A, Willems DL, Utarini A, Hoogsteyns M. What do students perceive as ethical problems? A comparative study of Dutch and Indonesian medical students in clinical training. *Asian Bioeth Rev*. 2019;11(4):391-408. doi: [10.1007/s41649-019-00101-6](https://doi.org/10.1007/s41649-019-00101-6).
  60. Taghadosi M, Valiee S, Aghajani M. Nursing faculty's point of view regarding noncompliance with ethics in academic environments: a qualitative study. *BMC Nurs*. 2021;20(1):15. doi: [10.1186/s12912-021-00537-y](https://doi.org/10.1186/s12912-021-00537-y).
  61. Gandossi C, De Brasi EL, Rosa D, Maffioli S, Zappa S, Villa G, et al. How do nursing students perceive moral distress? An interpretative phenomenological study. *Nurs Rep*. 2023;13(1):539-48. doi: [10.3390/nursrep13010049](https://doi.org/10.3390/nursrep13010049).
  62. Losa Iglesias ME, Becerro de Bengoa Vallejo R, Palacios Ceña D, Fuentes PS. Knowledge and positions on bioethical dilemmas in a sample of Spanish nursing students: a questionnaire study. *Contemp Nurse*. 2011;38(1-2):18-23. doi: [10.5172/conu.2011.38.1-2.18](https://doi.org/10.5172/conu.2011.38.1-2.18).