ABSTRACT. The use of ethics in everyday nursing practice will become increasingly important to the individual nurse, and nursing as a profession, as technology has a greater impact on health status and the provision of health care. Resource allocation is only one example of an ethical issue in which nursing must have input. Nursing can expand its contribution to society by ensuring that it plays a major role in shaping public policy and legislation. If nursing is to continue to serve the public, the involvement of nurses within the political process must be accepted as an ethical necessity.

Introduction

The notion of social responsibility suggests that one has an obligation to society, a duty to serve the public interest and the common good. Members of professional groups have this obligation since their roles, missions and ethical foundations focus not only on the individuals they serve, but on society as a whole. Professional codes of ethics direct their ethical obligations to clients, and to particular organizations and interest groups. Moreover, they address public duties, and obligations to and responsibilities for society at large. Professionals have this authority, and hence this responsibility, because of their particular body of knowledge, their skill and expertise. They are placed in a position of respect, and as a result they are granted the power and authority to engage in decision-making processes that influence and shape the direction of social policy and societal norms.

As knowledge becomes more specialized and technology and society more complex, established professions will acquire new power, and with it, a greater ethical responsibility. Our society, our world, has traditionally been dependent upon professions as custodians of our most basic values. They support and mold these values and assist in translating them into institutional forms and modes of social practice (Jennings, Callaghan, Wolfe, 1987). Professional codes of ethics, therefore, should express the moral bond uniting the profession, the individuals it serves and society as a whole.

Is the mission and code of ethics of nursing consistent with a social responsibility mandate?

Social responsibility has been explicit in the mission of nursing since Florence Nightingale (1820–1910). The interaction of society and environment is consistently viewed as central to the discipline. The nurse interacts with the client and the environment for the purpose of facilitating the client's health. We have moved from a conceptualization of health that depicts it as the absence of disease to an increasingly
dynamic one that sees health and illness as a continuum and as expressions of the life process, and that views health itself both as a process of human growth and development and as the expansion of consciousness (Newman, 1983). Health is not just an outcome of health care. Social policies also have implications for health, e.g., policies related to adequate housing, care for the elderly, organ donation, nutrition, protection from the threat of nuclear spills, smoking, clean air, clean soil, and clean water.

The Code of Ethics of the Canadian Nurses' Association affirms that a nurse must recognize his/her responsibility not only to individual patients but also to society, and must participate in activities that contribute to the community as a whole:

Many public issues include health as a major component. Involvement in civic activities may afford the nurse the opportunity to further the objectives of Nursing as well as to fulfill the duties of a citizen.

The philosophy of the Registered Nurses Association of Ontario (RNAO) is that

Nursing is a discipline concerned with the promotion of the well being of individuals in society. Nursing reflects and is influenced by the personal, professional, and ethical standards that guide the attitudes and actions of its individual practitioners. Nursing is based on a selected body of scientific knowledge and is a dynamic process which is responsive to the changing needs of society and evolves through the application of study and research in Nursing and other social and health sciences.

How does the nursing profession exercise its social responsibility?

The RNAO, through the Canadian Nurses' Association (CNA), is a member organization of the International Council of Nurses (ICN). Formed in 1899, the International Council of Nurses is the oldest international organization of professional women in the world. The RNAO, the Canadian Nurses' Association, and the International Council of Nurses and other nursing organizations around the world have a tradition of making improvements for working nurses by developing and supporting education and regulation, and by improving the social economic welfare of nurses. The International Council of Nurses acts as a leader in world health organizations and deals with a broad range of health and social policy issues. In fact each quadrenium is marked by an ICN “Watchword” (i.e., 1981–1985: Nurses as a Social Force; 1985–1989: Justice).

The RNAO has presented briefs to many government committees and task forces since its inception in 1904. Usually, lobbies were not developed around these briefs. The officers of RNAO met on a regular but infrequent basis with the Minister of Health. This changed in 1983, when the Provincial Nurse Educator Interest Group of the RNAO initiated a lobby on The Canada Health Act to voice its commitment to a fully-accessible health care system. The RNAO hired a staff member to co-ordinate this lobby. It grew, became a nation-wide lobby co-ordinated by the CNA, and resulted in amendments to The Canada Health Act.

In May 1983, RNAO became a participant in the Royal Commission of Inquiry into Certain Deaths at Toronto’s Hospital for Sick Children (commonly known as the Grange Inquiry, named after Justice Samuel Grange who headed the investigation). The Association intervened not only to represent and support the 39 nurses from the Hospital who were involved in the Inquiry, but also to represent the nursing profession and to ensure its public trust. Four years later, in May 1987, RNAO published a book, RNAO Responds: A Nursing Perspective on the Events at the Hospital for Sick Children and the Grange Inquiry. The book's purpose was to identify issues and make recommendations for action that could be applied to the entire health care system. The analysis of the system's response to the crisis at Sick Kids showed that the events and issues identified in the period from 1980 to 1985 were not confined to that particular institution, but were representative of system-wide problems occurring in other health care agencies and institutions across Canada (RNAO, 1985).

While this particular situation originated in the health care system, it eventually involved both the legal and political systems. The issues were related to the role and rights of women and of nurses, the value of the work of nursing, and the responsiveness of public systems to the public at large — all matters of importance to Canadian society. RNAO has also spoken out on such issues as de-indexation of the family allowance, federal-provincial fiscal arrangements, health care reform, extra billing, access to