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Title: Building Integrity into Nursing Curriculum and Culture

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Academic dishonesty is on the rise nationwide due to advances in technology. This creates a dilemma in nursing education. In the nursing profession, integrity is not an option; it can determine the outcome in a life or death situation (Bavier, 2009). Studies reveal that there is a connection between poor integrity in nursing school and poor integrity in the professional nursing role. The purpose of this project is to reveal the issue of cheating among nursing students and determine ways to diminish its existence, maintain the integrity of the nursing profession and, ultimately, improve patient outcomes.

A review of articles published between 2004-2015 was conducted using Ebsco databases and the keywords academic dishonesty, academic misconduct, nursing students, plagiarism, and cheating. The focus was on the definition of academic dishonesty, students' views, faculty views, and methods to decrease cheating. The definition varies among students and faculty and suggests that societal norms have shifted so that cheating in some forms is not seen as unethical. For example, students have plagiarized, looked at other students' papers during an exam, used another student's paper as their own, used technology to photograph an exam and pass it on, falsified patient information in the clinical setting, and falsely stated illness to be absent from clinical (Laduke, 2013). And yet few of these instances were defined as "cheating."

In reviewing the literature, it was noted that the mentality which promotes dishonesty in the academic arena continues into the professional arena (Laduke, 2013). Arhin and Jones (2009) found that evolving technology has aided in academic demise. Students find it easier to cut and paste parts of documents from electronic sources. Additionally, internet services are offered that, for a fee, an essay can be written for the student. Johanson (2010) states academic rigor, competitive environments, larger class sizes, inadequate faculty, and lack of faculty support as reasons given by students for dishonesty.

The rationale for becoming a nursing student has changed over the years. Students joining the nursing profession are doing so for solid career paths, financial security, and prestige (Laduke, 2013). This suggests that not all students are students with high standards of morals and integrity. Nursing is among the top most trusted profession and action must be taken to ensure it remains as such (Laduke, 2013).

Changes are needed in nursing education to ensure the integrity of the students that are successful in the nursing programs. The use of screening tools during the admission process can

focus on the ethical and moral standards of the incoming student. Institution policy definitions and revisions with clearly stated consequences for academic dishonesty are needed. Administrator support of faculty at the front lines of the fraudulent behavior is imperative. Developing and utilizing student leaders as mentors can help model and develop integrity in other students. Further recommendations may be provided.

In conclusion, the literature clearly demonstrates the parallel of dishonesty in nursing programs and declining integrity of nurses at the bedside. If we want nurses to remain the most trusted profession because of intact ethical and moral principles, then we as educators must ensure that those qualities are present in the student throughout the program. It is our ethical duty as educators to make moral and ethical decision making opportunities fundamental in every aspect of our nursing programs (Bavier, 2009). Building integrity into all nursing programs will safeguard the highest quality of nurse that society receives and that can be trusted with patient lives.

References:

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