Current issues in maternal new-born nursing

Ethical issues

- Abortion
- Substance abuse
- Foetal therapy
- Informed consent
- Refusal of medical treatment
- Confidentiality
- Selective reduction
- Intrauterine treatment of fetal conditions
- Mandated contraception
- Fetal injury
- Infertility treatment

Current issues in maternal newborn nursing

- **Abortion**- It has become a hotly debated political issue that separates people into two camps: prochoice and pro-life. The pro-choice group supports the right of any woman to make decisions about her reproductive functions based on her own moral and ethical beliefs.The prolife group feels strongly that abortion is murder and deprives the fetus of the basic right to life.

Current issues in maternal newborn nursing

- **Substance abuse** -courts have issued jail sentences to pregnant women who caused harm to their fetuses. Many state laws require reporting evidence of prenatal drug exposure, which may lead to charges of negligence and child endangerment against the pregnant woman.

Current issues in maternal newborn nursing

- **Foetal therapy-**Some argue that medical technology should not interfere with nature, and thus this intervention should not take place. [Others would argue that the surgical intervention improves the child’s quality of life.

Current issues in maternal newborn nursing

Informed consent- It occurs prior to initiation of the procedure or specific care and addresses the legal and ethical requirement of informing the client about the procedure. The physician or advanced practice nurse is responsible for informing the client about the procedure and obtaining consent by providing a detailed description of the procedure or treatment, its potential risks and benefits, and alternative methods available. If the client is a child, typically this information is provided to the parents or legal guardian. Applying restraints to children now requires consent. Two witnesses must also be listening simultaneously and must sign the consent form, indicating that consent was received via telephone. Health care providers can provide emergency treatment to a child without consent if they have made reasonable attempts to contact the child's parent or legal guardian.

Current issues in maternal newborn nursing

- **Refusal of medical treatment** -All clients have the right to refuse medical treatment. Ideally, medical care without informed consent should be used only when the life of a client is in danger. Refusal of treatment may occur when the treatment conflicts with religious or cultural beliefs. If providing medical treatment may save a child’s life, health care providers and the judicial system strive to advocate for the child. The state has an overriding interest in the health and welfare of the child and can order that medical treatment proceed without a signed informed consent.This is referred to as parens patriae. If the parents refuse treatment but the health care team feels the treatment is reasonable and warranted, the case should be referred to the institution’s ethics committee. If the issue remains unresolved, then the judicial system becomes involved.

Current issues in maternal newborn nursing

- **Confidentiality**- In maternal and child health care, information is shared only with the client, legal partner, parents, legal guardians, or individuals as established in writing by the client or the child's parents. Client information should always be kept confidential in the context of the state law, as well as the institution's policies. Exceptions to confidentiality exist. There must be a balance between confidentiality and required disclosure. If health care information must be disclosed by law, the client must be informed that this will occur.

Current issues in maternal newborn nursing

- **Selective reduction** -Induced ovulation and invitro fertilization sometimes results in multifetal pregnancies. If the number of exceeds the woman's ability to carry them to the point where they can survive outside the uterus, physician may recommend selectively terminating one or more foetuses. In these situations, the ethical dilemmas are much the same as

Current issues in maternal newborn nursing

- **Intrauterine treatment of foetal conditions** -Development in intrauterine fetal surgery aimed at improving foetal outcomes. These new treatments raised ethical and legal questions about maternal vs fetal rights. Who has the right to give consent? Can a court of law overides the mother's wish if she says ''no''? Similar ethical dilemma arise during labour if a mother refuses ceasarian section although it is clearly (in the judgement of the health care provider) in the best interest of her foetus.

Current issues in maternal newborn nursing

- **Mandated contraception** - Some people believe that mandated contraception is a reasonable way to prevent additional births to women who are considered unsuitable parents and decrease government expenses for dependent children. Such a practice interferes with a woman’s constitutional rights to privacy, reproduction, refusal of medical treatment, and freedom from cruel and unusual punishment.

Current issues in maternal newborn nursing

- **Foetal injury** -If a mother's actions cause injury to her foetus, the question of whether she should be restrained or prosecuted has legal and ethical implications. In other cases, women have been forced to undergo cesarean births against their will when physicians have testified that such a procedure was necessary to prevent injury to the foetus.However, forcing a woman to behave in a certain way because she is pregnant violates the principles of autonomy, self-determination of competent adults, bodily integrity, and personal freedom

Current issues in maternal newborn nursing

- **Infertility treatment** -Many techniques are more successful, but ethical concerns include the high cost and overall low success of some infertility treatments. Despite treatment, many couples never give birth, regardless of the costs or invasiveness of therapy. Successful treatment may lead to multiple gestations, usually twins, and complications related to maternal age. Other ethical concerns focus on the fate of unused embryos. Should they be frozen for later use by the woman or someone else or used in genetic research? What if the parents divorce or die? Who should make these decisions? In multiple pregnancies with more fetuses than can be expected to survive intact, reduction surgery may be used to destroy one or more fetuses for the benefit of those remaining.[

Care of the family in a culturally diverse society

Important cultural considerations in caring for a family

- **Men are household leaders** in various cultures, and some Ob/Gyn patients defer to their partner for medical decisions.
- Some patients **request a male or female doctor** due to cultural or personal preferences.
- Certain medical procedures associated with pregnancy, such as **circumcision and blood transfusions** in emergency situations, are not acceptable by all religions.
- Some cultures also have guidelines or traditions around **co-sleeping, baptism, and baby-naming.**
- Additionally, **food is largely related to religious** and cultural beliefs.
- Some patients and doctors still adhere to a **paternalistic model of health** care in which “doctor knows best.” Patients might be hesitant to ask questions out of fear of judgment.