

RESEARCH ARAŞTIRMA

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Predictors of Wound Ostomy and Incontinence Nurses' Ethical Behaviors for Protecting Patient Rights: A Descriptive and Correlational Study

Yara, Ostomi ve İnkontinans Hemşirelerinin Hasta Haklarını Korumaya Yönelik Etik Davranışlarının Belirleyicileri: Tanımlayıcı ve Korelasyonel Bir Çalışma

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ABSTRACT This quantitative, descriptive, cross-sectional study aimed to determine the ethical behaviors of wound, ostomy, and incontinence nurses in protecting patient rights and to identify the factors influencing these behaviors. A convenience sample of 110 Turkish wound, ostomy and incontinence nurses using social media accounts and WhatsApp groups of the Wound, Ostomy, and Incontinence Nurses' Society participated in this study. The data were collected using the Nurses' Ethical Behaviors for Protecting Patient Rights Scale. Multiple linear regression analysis was used to evaluate the data. The mean age of the nurses was 40.81 years (SD=6.28), 93.6% were female, and 54.5% had a bachelor's degree. The mean score of nurses' ethical behaviours for protecting patients' rights was 128.80±6.85. Nurses who received postgraduate education ($\beta=0.183$), had 21 years or more experience as wound, ostomy, and incontinence nurse ($\beta=0.245$), and received ethics training ($\beta=0.258$) had significantly higher scores ($p<0.05$). This study revealed that wound, ostomy and incontinence nurses exhibited moderate ethical behaviour for patient rights. Education level, experience working as a wound, ostomy and incontinence nurses, and ethics training were determinants of ethical behaviors for patient rights. Therefore, nurses should be supported in receiving postgraduate education, and ethics education should be included in continuing education.

ÖZET Bu nicel, tanımlayıcı, kesitsel çalışmanın amacı yara, ostomi ve inkontinans hemşirelerinin hasta haklarını korumaya yönelik etik davranışlarını ve bu davranışları etkileyen faktörleri belirlemektir. Bu çalışmaya, Yara, Ostomi ve İnkontinans Hemşireleri Derneği'nin sosyal medya hesaplarını ve WhatsApp gruplarını kullanan 110 Türk yara, ostomi ve inkontinans hemşiresi katılmıştır. Veriler, Hemşirelerin Hasta Haklarını Korumaya Yönelik Etik Davranışları Ölçeği kullanılarak toplanmıştır. Verilerin değerlendirilmesinde çoklu doğrusal regresyon analizi kullanılmıştır. Hemşirelerin yaş ortalaması 40,81 (SS=6,28), %93,6'sı kadın ve %54,5'i lisans mezunudur. Hemşirelerin hasta haklarını korumaya yönelik etik davranış puan ortalaması 128,80±6,85'dir. Lisansüstü eğitim alan ($\beta=0,183$), 21 yıl ve üzeri yara, ostomi ve inkontinans hemşireliği deneyimine sahip olan ($\beta=0,245$) ve etik eğitimi alan ($\beta=0,258$) hemşirelerin puanları anlamlı olarak daha yüksekti ($p<0,05$). Bu çalışma, yara, ostomi ve inkontinans hemşirelerinin hasta hakları konusunda orta düzeyde etik davranış sergilediklerini ortaya koymuştur. Eğitim düzeyi, yara, ostomi ve inkontinans hemşiresi olarak çalışma deneyimi ve etik eğitimi, hasta haklarına yönelik etik davranışların belirleyicileri olmuştur. Bu nedenle, hemşirelerin mezuniyet sonrası eğitim almaları desteklenmeli ve etik eğitimi sürekli eğitim kapsamına alınmalıdır.

Keywords: Ethical behaviors; patients' rights; predictors; wound; ostomy and incontinence nurses

Anahtar Kelimeler: Etik davranışlar; hasta hakları; belirleyiciler; yara; ostomi ve inkontinans hemşireleri

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Those with intestinal stomas must adapt to fulfilling a fundamental human need-intestinal emptying-outside their accustomed routine. This adjustment often entails significant lifestyle changes. Coping with a stoma may involve grappling with physical, psychological, social, and spiritual challenges as individuals acclimate to this new way of life.^{1,2} This experience can be overwhelming, exhausting, and emotionally taxing for individuals with a stoma. They require attentive nursing care and counseling before and after the procedure. Wound, ostomy, and incontinence nurses (WOCNs) play crucial roles in this process, including patient advocacy.³⁻⁵ The Ethical Codes for Nurses by International Council of Nurses and the guidelines from the Wound, Ostomy, and Incontinence Nurses Society underscore the centrality of respecting human rights in nursing.^{5,6} Nurses are tasked with creating environments that uphold and honor these rights.⁷ Additionally, the Türkiye Wound Ostomy and Incontinence Nurses Association has established the Ethical Principles of Stoma and Wound Care Nursing to delineate the ethical conduct expected of nurses in their professional care of individuals with stomas, wounds, and incontinence.⁸

Patient rights mirror the inherent human rights every individual possesses simply by virtue of being human.^{9,10} It's essential to recognize that individuals with stomas have both universal rights and rights specific to their circumstances that must be safeguarded.¹¹ The onset of the coronavirus disease-2019 pandemic marked a significant juncture in comprehending the unique rights of individuals with stomas. Challenges such as diagnostic delays, disruptions in life-saving stoma surgeries, limitations on patient visitations, reduced access to nursing care post-discharge, and supply chain issues have posed substantial difficulties for individuals with stomas throughout the pandemic.^{12,13} In response, the European Ostomy Association has adopted the slogan "The Rights of People with Stoma are Human Rights-anytime and anywhere!" for World Ostomy Day to raise awareness about stoma-related rights.¹⁴ Similarly, in the same year, the United Ostomy Associations of America issued a patient rights declaration addressing the needs of individuals with stomas.¹³ Additionally, the Wound Ostomy Incontinence

Nurses Society of Türkiye organized information seminars to highlight the challenges faced by individuals with stomas during the pandemic.¹⁴ As part of the association's World Ostomy Day Program, individuals with stomas connected through online activities.

Research indicates that individuals with stomas may encounter difficulties regarding their right to access information and participate in decision-making regarding their health.^{15,16} In Miller and Peck's study, nearly half of the participants with stomas (n=381) felt inadequately prepared to manage their care post-discharge, attributing this to insufficient information provided by healthcare providers.¹⁵ Findings from a study by Rolls et al. involving 6,500 individuals with stomas across 12 countries, revealed that 17% of patients undergoing planned surgery and 34% undergoing unplanned surgery felt unprepared to adapt to life with a stoma based on the training received during their hospitalization.¹⁶ Additionally, the study found that 36% of patients did not participate in selecting the products to be used post-discharge, with healthcare professionals solely making these decisions.

Research indicates that individuals with stomas prioritize safeguarding their privacy, and there are instances where it may be compromised.^{17,18} Akyüz et al. discovered that individuals with stomas felt uncomfortable being observed during treatment and care (48.7%, n=39/80) and discussing their stoma-related information in the presence of other patients or their families (46.0%, n=17/37).¹⁷ Similarly, in Miller and Peck's study, 16% of individuals with stomas (n=312) reported feeling marginalized, as healthcare professionals openly expressed disgust during care and insinuated blame for their medical condition.¹⁸

Rights and ethics are closely interlinked, akin to 2 facets of a coin. Every patient right is rooted in one or more ethical principles.¹⁹ Nurses, in their advocacy role, should exhibit sensitivity towards patient rights and the underlying ethical principles, taking actions aligned with these principles. In a systematic review conducted by Mpouzika et al. findings from 13 studies underscore the need to enhance nurses' awareness of patient rights to an optimal level.²⁰ Research indi-

cates that factors such as ethics training, work experience, and academic qualifications positively influence nurses' knowledge and perceptions of patient rights and ethical sensitivity. Ibrahim et al. observed a significant improvement in nurses' knowledge and perceptions after undergoing a 2-month patient rights training program consisting of weekly 2-hour sessions.²¹ Sheikhtaheri et al. discovered that nurses holding a master's degree and having over 10 years of experience exhibited notably higher levels of knowledge regarding patient rights compared to their counterparts.²² Similarly, Sharifnia et al. found that nurses who received ethics training and possessed extensive work experience demonstrated greater ethical sensitivity.²³

This study seeks to contribute to the existing literature by investigating the ethical conduct of WOCNs, which is pivotal in safeguarding the rights of individuals with stomas. It aims to explore the factors influencing these behaviors. Such research serves as a crucial endeavor to enhance the professional and ethical norms within the WOCNs domain and to foster targeted care approaches for individuals with stomas.

Research questions:

1. What is the level of ethical behaviour of WOCNs in protecting patient rights?
2. What are the determinants of WOCNs ethical behaviors for protecting patient rights?

MATERIAL AND METHODS

STUDY DESIGN

The research was conducted in a quantitative, descriptive, cross-sectional design.

SETTING AND SAMPLES

In Türkiye, the Wound, Ostomy, and Incontinence Nurses Society (YOIHD) boasts a membership of 263 WOCNs. Established in Ankara in 2008, YOIHD's primary objective is to enhance nursing care for individuals grappling with wound, ostomy, and incontinence challenges while fostering societal awareness.²⁴

In this study, we obtained a convenience sample comprising 110 nurses by leveraging social media

platforms and the WhatsApp (WhatsApp LCC, Meta Platforms Inc., Menlo Park, California, USA) group affiliated with the YOIHD.

DATA COLLECTION

Data were collected via an online survey. The researchers devised the survey using Google Forms (Google LLC, Mountain View, California, USA), a secure and encrypted online data collection platform. Following authorization from the association, the survey link was disseminated through the association's social media channels and WhatsApp groups. Respondents typically invested approximately 10-15 minutes in completing the data collection instrument.

DATA COLLECTION TOOL

The data were collected using the sociodemographic characteristics form and the Nurses' Ethical Behaviors for Protecting Patient Rights Scale developed by Eyüboğlu et al.²⁵

The sociodemographic characteristics form comprised 8 inquiries covering age, gender, education level, working experience in nursing and as a WOCN, certification status, and participation in patient rights and ethics training.^{16,20-23} The Ethical Behaviors of Nurses for Protecting Patient Rights Scale, featuring 28 items, adopted a scoring system ranging from "never" (1) to "always" (5), with a total score range of 28-140. Subscales encompassed "Respect for the right to information and decision-making" (9 items), "providing fair care" (6 items), "providing benefit-not harming" (5 items), "respect for patient values and choices" (4 items), and "attention to privacy" (4 items). The scale's internal consistency, as indicated by Cronbach's alpha, was 0.84 in previous research, while in the current study, it yielded a Cronbach's Alpha value of 0.76.²⁵

ETHICAL CONSIDERATION

Ethical clearance (date: April 4, 2024; no: 07) was secured from the Gazi University Ethics Commission, with authorization also obtained from the Wound, Ostomy, and Incontinence Nurses Society. The initial segment of the online questionnaire provided a concise yet comprehensive overview of the study's objectives. Participants were required to af-

firm their consent by ticking the designated box in the informed consent section before completing the questionnaire. This study is conducted in compliance with the Helsinki Declaration.

DATA ANALYSIS

The data were analyzed using IBM SPSS version 26 (IBM Corp., Armonk, NY, USA) for Windows. Categorical variables were reported as frequencies and percentages, while continuous variables were represented as means and SD. The normality of data distribution was assessed via the Kolmogorov-Smirnov test. Categorical variables were coded as 0-1 for regression analysis. Univariate and multiple linear regression analyses were conducted to ascertain relationships between dependent and independent variables. Variables exhibiting statistical significance in the univariate analysis underwent further scrutiny in multiple linear regression analysis using backward selection. A 2-sided significance level of $p < 0.05$ was applied to all analyses.

RESULTS

Table 1 displays the sociodemographic characteristics of the nurses. The mean age of the nurses was 40.81 years ($SD=6.28$), 93.6% were female, and 54.5% had a bachelor's degree. While 42.7% of the nurses had more than 21 years of experience in nursing, 55.5% had been working as stoma and wound care nurses for 1-5 years. 63.6% of the nurses have a stoma and wound care nursing certificate. While 53.6% of the nurses stated that they received training on patient rights, 51.8% indicated that they did not receive ethics training other than undergraduate education (Table 1).

Table 2 illustrates the mean scores of nurses' ethical behaviors for protecting patients' rights. The overall mean score was 128.80 ± 6.85 . Subscale scores were as follows: "respect for the right to information and decision-making" (40.00 ± 3.82), "providing fair care" (27.52 ± 2.14), "providing benefit-not harming" (23.98 ± 1.47), "respect for patient values and choices" (18.08 ± 1.73), and "attention to privacy" (19.21 ± 1.32).

The variables found to be significant in the univariate analysis (education level, working experience

TABLE 1: Sociodemographic characteristics of nurses (n=110).

Sociodemographic characteristics	n	%
Age mean (SD)/years	40.81 (6.28)	
Gender		
Female	103	93.6
Male	7	6.4
Education level		
Health vocational high school	9	8.2
Bachelor's degree	60	54.5
Master's degree	30	27.3
PhD	11	10.0
Work experience in nursing		
1-5	6	5.5
6-10	9	8.2
11-15	26	23.6
16-20	22	20.0
Up to 21	47	42.7
Work experience as a WOCN		
1-5	61	55.5
6-10	25	22.7
11-15	19	17.3
16-20	4	3.6
Up to 21	1	0.9
WOCN certification status		
Yes	70	63.6
No	40	36.4
Patient rights training		
Yes	59	53.6
No	51	46.4
Ethics training		
Yes	53	48.2
No	57	51.8

SD: Standard deviation; WOCN: Wound, ostomy, and incontinence nurses

TABLE 2: Distribution of the scores of nurses' ethical behaviors towards patient rights (n=110).

NEBPPR Scale	$\bar{X} \pm SD$	Minimum-maximum
Total	128.80 ± 6.85	28-140
Respect for the right to information and decision-making	40.00 ± 3.82	9-45
Providing fair care	27.52 ± 2.14	6-30
Providing benefit-not harming	23.98 ± 1.47	5-25
Respect for patient values and choices	18.08 ± 1.73	4-20
Attention to privacy	19.21 ± 1.32	4-20

NEBPPR: Nurses' Ethical Behaviors for Protecting Patient Rights; SD: Standard deviation

as a WOCN and ethics training) were included in the multiple linear regression model. Accordingly, it was determined that the model consisting of significant

TABLE 3: Predictors of nurses' ethical behaviors towards patient rights

Variables	Simple model					Multiple model				
	B	95,0% CI for B		β	p value	B	95,0% CI for B		β	p value
		Lower	Upper				Lower	Upper		
Age	0.101	-0.105	0.308	0.093	0.332					
Gender (Ref: female)	-1.322	-6.647	4.004	-0.047	0.624					
Education (Ref: bachelor's degree)	1.446	0.097	2.795	0.200	0.036*	1.318	0.048	2.588	0.183	0.042*
Work experience in nursing (Ref: 1-5 years)	430	-0.643	1.502	0.076	0.429					
Work experience as a WOCN (Ref: 1-5 years)	1.840	0.493	3.186	0.252	0.008*	1.788	0.507	3.069	0.245	0.007*
Certification (Ref: yes)	2.029	-0.649	4.706	0.143	0.136					
Patient rights training (Ref: yes)	-2.057	-4.637	0.523	-0.150	0.117					
Ethics training (Ref: yes)	-3.718	-6.224	-1.212	-0.272	0.004*	-3.516	-5.918	-1.114	-0.258	0.005*

B: Unstandardized coefficient; CI: Confidence interval; β : Standardized coefficient; Ref: Reference; WOCN: Wound, ostomy, and incontinence nurse. Adjusted $R^2=0.145$, $F=7.161$, $*p<0.05$

variables explained 14% of the variance of ethical behaviour towards patient rights (Adjusted $R^2=0.145$, $F=7.161$, $p<0.001$). Nurses who received postgraduate education ($\beta=0.183$), had 21 years or more experience as WOCN ($\beta=0.245$), and received ethics training ($\beta=0.258$) had significantly higher ethical behaviour towards patient rights scores ($p<0.05$) (Table 3).

DISCUSSION

This study was conducted in a quantitative, descriptive, cross-sectional design with 110 WOCNs to determine the ethical behaviors of nurses for protecting patient rights and reveal the determinants of these behaviors.

In this study, nurses demonstrated commendable ethical conduct in protecting patients rights (Table 2). WOCNs are pivotal in ensuring optimal care for individuals with stomas, both pre-and post-surgery. Key responsibilities include preoperative education, stoma site marking, post-operative care guidance, training for patients and families, emergency awareness, and addressing physical and emotional needs for life after surgery.¹¹ Nurses must advocate for the specific rights of individuals with stomas alongside universal rights throughout this process.^{4,7}

This study revealed that nurses exhibited ethical behaviors about providing information and respecting the values and choices of individuals with stomas above an intermediate level (Table 2). Previous re-

search by Miller and Peck highlighted a notable proportion of individuals with stomas not receiving adequate health information.¹⁵ Similarly, Rolls et al. underscored that individuals with stomas often feel unprepared to manage their condition post-discharge despite receiving education during hospitalization.¹⁶ Before stoma formation, patients require comprehensive information regarding the surgical procedure and adjustment to life with a stoma on time. Effective communication from the multidisciplinary team, coupled with appropriate preoperative education and facilitating contact with experienced individuals with stomas, positively influences patients' decision-making regarding surgery.²⁶ Nurses play a vital role in facilitating decision-making by fostering clarity and upholding patients' rights throughout this process.²⁷ During discharge preparation, involving patients in product selection decisions is crucial. However, research suggests that many individuals with stomas are not engaged in this process, with product selection often made solely by healthcare professionals.¹⁶ This underscores the importance of nurses taking a more proactive stance in safeguarding the rights of individuals with stomas, particularly concerning information provision and decision-making.

This study indicates that nurses' ethical conduct in preserving the privacy of individuals with stomas surpasses moderate (Table 2). The loss of defecation control and the necessity to manage excretion through an abdominal ostomy renders individuals with stomas particularly sensitive to privacy concerns.²⁸ Akyüz et

al. highlighted the significant discomfort individuals with stomas experience when others observe or discuss their condition during treatment and care.¹⁷ Similarly, Stavropoulou et al. found that individuals with permanent colostomies felt their privacy was compromised when needing assistance, particularly with stoma care.² Consequently, nurses bear ethical responsibilities in safeguarding the privacy of individuals unable to uphold it themselves.

The study found that nurses' ethical provision of fair care surpassed moderate (Table 2). Individuals with stomas often face intense feelings of stigma.^{18,29} Research by Miller and Peck highlights how individuals with stomas perceive marginalization due to health professionals expressing disgust and attributing blame to them. Such stigma negatively impacts the psychosocial adjustment of individuals with stomas.^{15,29} Nurses are crucial in ensuring fair treatment for individuals with stomas.

The study identified education level, working experience as a WOCN, and ethics training as significant factors influencing nurses' ethical behaviors for protecting patients rights (Table 3). Findings suggest that nurses with higher education levels, greater WOCN experience, and ethics training exhibit heightened ethical conduct in this regard. Sheikhtaheri et al. similarly observed that nurses' understanding of patient rights expanded with increased education and work experience.²² Ibrahim et al. revealed that patient rights training substantially enhanced nurses' knowledge and perceptions.²¹ Ethics education is pivotal in augmenting nurses' ethical awareness and sensitivity in their professional endeavors.³⁰ Correspondingly, Sharifnia et al. noted that nurses with ethics education and increased work experience exhibited heightened ethical sensitivity.²³ Current findings align with existing literature.

LIMITATIONS

The study has several limitations. Firstly, the sample was exclusively recruited via the YOIHD's social media platforms and WhatsApp groups, thus limiting

the generalizability of the findings to all WOCNs. Secondly, the study's scope was confined to accessible nurses during the data collection period. Thirdly, the utilized scale evaluated nurses' self-perceived ethical behavior rather than actual behavior. Additionally, reliance on self-reported data may introduce reporting biases. Lastly, the predominance of female participants hindered gender-based conclusions.

CONCLUSION

The study indicated that WOCNs demonstrated ethical behaviors above the mean level concerning patient rights, influenced by factors such as education level, WOCN experience, and ethics training. Hence, promoting postgraduate education and integrating ethics training into institutional programs for nurses is advisable. Additionally, interventional studies could enhance WOCNs' ethical conduct regarding patient rights.

Source of Finance

During this study, no financial or spiritual support was received neither from any pharmaceutical company that has a direct connection with the research subject, nor from a company that provides or produces medical instruments and materials which may negatively affect the evaluation process of this study.

Conflict of Interest

No conflicts of interest between the authors and / or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.

Authorship Contributions

Idea/Concept: Gülcan Eyüboğlu, Zehra Göçmen Baykara; **Design:** Gülcan Eyüboğlu, Zehra Göçmen Baykara; **Control/Supervision:** Gülcan Eyüboğlu, Zehra Göçmen Baykara; **Data Collection and/or Processing:** Gülcan Eyüboğlu, Zehra Göçmen Baykara; **Analysis and/or Interpretation:** Gülcan Eyüboğlu; **Literature Review:** Gülcan Eyüboğlu, Zehra Göçmen Baykara; **Writing the Article:** Gülcan Eyüboğlu, Zehra Göçmen Baykara; **Critical Review:** Gülcan Eyüboğlu, Zehra Göçmen Baykara.

REFERENCES

- Davis D, Ramamoorthy L, Pottakkat B. Impact of stoma on lifestyle and health-related quality of life in patients living with stoma: a cross-sectional study. *J Educ Health Promot*. 2020;9:328. [Crossref] [PubMed] [PMC]
- Stavropoulou A, Vlamakis D, Kaba E, Kalemikerakis I, Polikandrioti M, Fasoi G, et al. "Living with a stoma": exploring the lived experience of patients with permanent colostomy. *Int J Environ Res Public Health*. 2021;18(16):8512. [PubMed] [PMC]
- Burkhardt MA, Nathaniel AK. *Ethics & Issues in Contemporary Nursing*. EBook. Elsevier Health Sciences. [Cited: March 20, 2024]. Available from: [Link]
- United Ostomy Associations of America [Internet]. Practices for Ostomy Nurses to Utilize and Support Ostomy and Continent Diversion Patient Bill of Rights. © 2018 UOAA [Cited: March 20, 2024]. Available from: [Link]
- Lawrence KG, Bauer CA, Jacobson TM, Scardillo J, Slachta PA, Bonham PA. Wound, Ostomy, and Continence Nursing: Scope and Standards of Practice. *Journal of Wound, Ostomy and Continence Nursing*. 2018;45(4):369-87. [Link]
- International Council of Nurses. The ICN code of ethics for nurses. 2021. [Cited: March 20, 2024]. Available from: [Link]
- American Nurses Association [Internet]. Code of ethics with interpretative statements. Silver Spring, MD. [Cited: March 20, 2024]. Available from: [Link]
- Wound Ostomy and Incontinence Nurses Society [Internet]. Code of Ethics. © 2022 [Cited: March 20, 2024]. Available from: [Link]
- Beauchamp T, Childress J. Principles of biomedical ethics: marking its fortieth anniversary. *Am J Bioeth*. 2019;19(11):9-12. [PubMed]
- Karabulut SD. Sağlık ve hak kavramları. Yalın NY, Keleş Ş, editörler. Sağlık Programları Meslek Etiği. 1. Baskı. Ankara: Nobel Tıp Kitabevleri. 2019:90-95.
- Burgess-Stocks J, Gleba J, Lawrence K, Mueller S. Ostomy and continent diversion patient bill of rights: research validation of standards of care. *J Wound Ostomy Continence Nurs*. 2022;49(3):251-60. Erratum in: *J Wound Ostomy Continence Nurs*. 2022;49(5):399. [PubMed] [PMC]
- D'Antonio D, Pizza F, Tropeano FP, De Palma GD, Marvaso A, Luglio G. COVID-19 outbreak and stoma care on a minor island in Italy: physically far, virtually near. *SN Compr. Clin. Med*. 2020;2:1302-5. [Crossref]
- United Ostomy Associations of America [Internet]. The Ostomy and Continent Diversion Patient Bill of Rights. © 2005-2023, UOAA [Cited: March 20, 2024]. Available from: [Link]
- The European Ostomy Association [Internet]. World Ostomy Day 2021. © 2008-2023 by the European Ostomy Association [Cited: March 20, 2024]. Available from: [Link]
- Miller LR, Peck BM. Peoples' experiences with pouches (PEWP) study: ostomate-provider interactions. *J Patient Exp*. 2020;7(4):516-21. [PubMed] [PMC]
- Rolls N, Gotfredsen JL, Vestergaard M, Hansen AS, Koblauch H. Importance of stoma care nurses in preparing patients for stoma surgery and adjustment to life with a stoma. *Br J Nurs*. 2023;32(16):S32-S41. [Crossref] [PubMed]
- Akyüz E, Erdemir F, Uğurlu Z, Üstündağ Ç. Perceptions and experiences of privacy among persons with an ostomy receiving treatment and care: a mixed-methods study. *J Wound Ostomy Continence Nurs*. 2022;49(5):455-61. [Crossref] [PubMed]
- Miller LR, Peck BM. Marginalization in the medical encounter: ostomy patients' experience of perceived stigmatizing sentiments from medical clinicians. *SAGE Open Nurs*. 2022;8:23779608221095315. [Crossref] [PubMed] [PMC]
- Young M, Wagner A. *Medical Ethics*. 2024. In: StatPearls [Internet]. Treasure Island (FL): StatPearls Publishing; 2025. [PubMed]
- Mpouzika M, Karanikola M, Panayiotou E, Raftopoulos V, Middleton N, Papanassoglou E. Nurses' attitudes and knowledge regarding patient rights: a systematic review. *Rev Esc Enferm USP*. 2021;55:e03678. [Crossref] [PubMed]
- Ibrahim SA, Hassan MA, Hamouda SI, Abd Allah NM. Effect of patients' rights training sessions for nurses on perceptions of nurses and patients. *Nurs Ethics*. 2017;24(7):856-67. [PubMed]
- Sheikhtaheri A, Jabali MS, Dehaghi ZH. Nurses' knowledge and performance of the patients' bill of rights. *Nurs Ethics*. 2016;23(8):866-76. [PubMed]
- Sharifnia AM, Green H, Fernandez R, Alananzeh I. Empathy and ethical sensitivity among intensive and critical care nurses: A path analysis. *Nurs Ethics*. 2024;31(2-3):227-42. [Crossref] [PubMed]
- Wound Ostomy Incontinence Nurses Society [Internet]. YOIH. © 2022 [Cited: March 20, 2024]. Available from: [Link]
- Eyüboğlu G, Eyikara E, Göçmen Baykara Z, Gül Ş. Development, reliability and validity of the Nurses' Ethical Behaviours for Protecting Patient Rights Scale. *Int J Nurs Pract*. 2022;28(1):e12991. [Crossref] [PubMed]
- Dibley L, Czuber-Dochan W, Wade T, Duncan J, Burch J, Warusavitarne J, et al; members of the stoma PPI team. Patient decision-making about emergency and planned stoma surgery for IBD: a qualitative exploration of patient and clinician perspectives. *Inflamm Bowel Dis*. 2018;24(2):235-46. [Crossref] [PubMed]
- Zhang JE, Wong FKY, Zheng MC. The preoperative reaction and decision-making process regarding colostomy surgery among Chinese rectal cancer patients. *Eur J Oncol Nurs*. 2017;28:107-13. [Crossref] [PubMed]
- Aktaş D, Baykara ZG. Stomalı bireylerde hassas bir konu: mahremiyet [A sensitive issue in individuals with stoma: privacy]. *Gazi Sağlık Bilimleri Dergisi*. 2020;5(3):8-15. [Link]
- Xi Z, Rong CM, Ling LJ, Hua ZP, Rui G, Fang HG, et al. The influence of stigma and disability acceptance on psychosocial adaptation in patients with stoma: A multicenter cross-sectional study. *Front Psychol*. 2022;13:937374. [Crossref] [PubMed] [PMC]
- Tural Büyük E, Ünalı Baydı N. The Effect of ethics education on the ethical sensitivity of nursing students. *Türkiye Klinikleri J Med Ethics*. 2021;29(2):158-65. [Crossref]