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Ethical Conflicts Encountered by Rehabilitation Clinicians in A Teaching Hospital in Malaysia

Topic: Rehabilitation Across the Continuum of Care

Kohilam Ganesen[1], Julia Patrick Engkasan[1], Mazlina Mazlan[1], Kristi Kirschner[2]

[1]*Department of Rehabilitation Medicine, Faculty of Medicine, University Malaya, Kuala Lumpur, Malaysia*
[2]*Departments of Medical Education, Neurology and Rehabilitation, University of Illinois, Chicago, United States*

BACKGROUND

Rehabilitation clinicians often face unique ethical dilemmas due to the vast array of clinical diagnosis and impairments of rehabilitation patients that warrants co-management by a dedicated interdisciplinary team to reduce overall morbidities and improve quality of life. The objective of this study is to identify ethical issues encountered by rehabilitation clinicians in their routine daily clinical practice.

METHODS

A self-constructed questionnaire based on previous study was developed in both English and Malay language. It consists of an open - ended question where participants are to elaborate up to three ethical conflicts. The survey was introduced within the context of various departmental meetings and continuous medical education sessions throughout the study period (March - August 2024). The questionnaire was distributed at designated pick-up and drop-off locations to those agreed to participate. Two weekly reminders were given via department meetings to participants to complete the questionnaires.

RESULTS

152 of the 343 rehabilitation clinicians completed the survey yielding 44% response rate, which resulted in 306 ethical conflicts. As each of the ethical conflicts can be coded up to three categories, a total of 327 codes emerged from the 306 ethical conflicts. The 327 codes were coded into 40 categories that were later collapsed into nine final themes. 35.8% (n:117) of the issues identified are on elements of conflicts. The elements of conflicts included (1) conflict between clinician with patient/family, (2) conflicts between interprofessional specialties, (3) conflicts between healthcare team members, (4) paediatric ethics and conflicts between parents and (5) conflicts between patient and family. The second most theme are professionalism issues with 16.5% (n = 54) issues encompassing (1) truth-telling issues, (2) duty and responsibility, (3) patient confidentiality and privacy, (4) staff refusing to follow policies/ procedures, (5) boundary crossings, (6) conflicts of interest, (7) dress codes and (8) communication problems. The third highest theme are on respect and dignity at 16% (n = 52) which revolves around (1) mistreatment of clinical staff by patients/ families, (2) refusing to request privacy, (3) mistreatment among clinical staffs, (4) religion/culture beliefs, (5) disrespect of hospital/clinic rules and racism.

CONCLUSION

Various ethical conflicts are identified among the rehabilitation clinicians due to the diverse nature of the rehabilitation setting. The multi-cultural population of the study also provide unique and rich concerns. This study have given an opportunity to tailor effective educational program to address the issues encountered.

Statement of Disclosures

None

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Corresponding Author:
Kohilam Ganesen
Department of Rehabilitation Medicine, Faculty of Medicine, University Malaya, Kuala Lumpur, Malaysia
Email: g.kohilam@ummc.edu.my