

Among the four hundred distributed questionnaires, 373 were returned, out of which nine questionnaires were incompletely filled and were not included for analysis. These respondents included all levels of staff in the Queen Elizabeth Hospital. The present paper analyses and compares exclusively the responses of physicians and nurses ($n = 159$) among the survey. Data were analysed using Statistical Package for Social Sciences (SPSS) – version 8 software. Descriptive analyses were done for all data; the attitudes towards practical ethical problems were compared between nurses and physicians using a Chi square test. A Phi and Cramer's V value was obtained to determine the strength of the difference in their opinions. Statistical significance was fixed at the level of $p < 0.05$.

Results

A total of 159 respondents belonged to the category of either physicians or nurses. Interns, post-graduate medical residents, senior house officers and registrars were considered as junior physicians and the rest falling into the category of consultant physicians. 47% of the respondents were physicians, and 53% were nurses including sisters-in-charge.

Table 1 shows the demographics of physicians and nurses who responded to the questionnaire. There were more female nurses and more male consultant physicians consistent with the general trend.

The age distribution of the respondents was also consistent with the categories of medical and nursing staff. Work experience stretched across the entire spectrum of 1 year to over 31 years and was consistent with the occupations and ages of respondents. 90% of junior physicians were in the age group of 20–29 years and 65% of them had 4–10 years work experience. 72% of staff nurses were in the age group of 30–49 years and 60% of them had work experience of 7–20 years. 70% of consultant physicians and 80% of sisters-in-charge had a work experience of 20 years and more.

Figure 1 shows the responses to the frequency of ethical and legal problems encountered by the physicians and nurses. There were more physicians than nurses who encountered these problems on a daily and monthly basis and more nurses than physicians who encountered them

on yearly basis. Some of the sisters-in-charge responded that they never encountered such a problem.

All the physicians and 90% of nursing staff responded that knowledge of ethics is important to their work. Only one nurse responded that knowledge of ethics was "not at all important". There was a good correlation in that those who responded that they saw ethical problems every day never responded that ethical knowledge was unimportant.

Figure 2 shows the sources of knowledge regarding medical ethics and law. More than half of the respondents answered that they acquired their knowledge of ethics and law from multiple sources. More number of nurses than physicians responded that they acquired their knowledge of ethics and law during training. More than 70% of physicians and nurses responded that they acquired their knowledge of ethics during work.

A little more than half of both physicians and nurses responded that they had "no" or 'little' knowledge of the law; 45% of sisters-in-charge said they knew most of the law pertaining to work.

Among the 11% of physicians who did not know the main contents of the Hippocratic Oath, there were 5 junior physicians, one consultant physician and one General Practitioner. Sixty percent of sisters-in-charge also responded that they knew the contents of the Hippocratic Oath. However, 34% nurses and one sister-in-charge did not know the "Nurses Code". Over 90% physicians and nurses did not know of the Nuremberg Code or the Helsinki Declaration.

Tables 2 and 3 show the preferences of physicians and nurses as to whom to approach when faced with an ethical and legal problem. While majority of the nurses said they would approach the matron, majority of physicians said they would approach the immediate supervisor.

29% of physicians and 37% of nurses were unaware of the existence of an ethics committee at the institution. Of those who answered that there was a committee, many physicians felt that the committee is not fulfilling its role. 17% of physicians and 41% of nurses felt that the com-

Table 1: Demographics of respondents

Category	Number (%)	Gender ratio (M:F)
Junior physicians	48 (30%)	1.2: 1
Consultant physicians	27 (17%)	4.4: 1
Nurses	64 (40%)	1: 15
Sisters-in-charge	20 (13%)	0: 1