

Nursing Students' Views of Gift-giving by Patients

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ABSTRACT

Background: Gifts are often presented to healthcare professionals as an expression of appreciation for their care provision. In turn, this gives rise to the pivotal ethical dilemma concerning the acceptance or rejection of such gifts by healthcare professionals. This study aimed to explore the perspectives of nursing students regarding the ethical appropriateness of gift-giving practice by patients within the healthcare context.

Methods: This study employed a qualitative descriptive approach. Purposive sampling was applied, and nine nursing students agreed to be interviewed. The students took part in online interviews, which were transcribed verbatim and analysed using thematic analysis.

Results: This study identified three broad themes regarding students' perceptions of gift-giving by patients: (1) Gift-giving culture, (2) Misconception of gift-giving practice, and (3) Consequences of gift-giving practice.

Conclusion: This study's findings indicate that a sizable proportion of nursing students exhibit an ethical awareness about the appropriateness of gift-giving by patients. They cite a variety of ethical considerations when deciding whether to receive or decline such gifts from patients. They also emphasise the importance of the attributes of the gift, the anticipated intentions or expectations of the patient, and the potential ramifications for the clinical-patient relationship. Therefore, it is imperative to enhance further the professional behaviour of healthcare professionals in ethical practice. This will enable a resolution to the ongoing debate regarding the ethical appropriateness of gift-giving.

Keywords: Humans; Intention; Gift giving; Delivery of health care; Students

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INTRODUCTION

Giving gifts is considered a social convention in healthcare environments. In recognition of the high standard of care they have received, patients or their family members often show tokens of appreciation to healthcare professionals. Moreover, these actions can foster interpersonal connections, elevate the spirits of healthcare professionals, and instil a sense of gratitude (1). However, in the absence of hospital policy addressing the expressed concerns, gift-giving may compromise patient care, raising the ethical question of whether receiving or declining such gifts is appropriate (2). In clinical settings, this practice enjoys broad acceptance among elderly patients and their families. As per the Islamic perspective, gifts are classified as provisions and are deemed worthy of acceptance. The Prophet Muhammad (SAW) recommended that Muslims adhere to this habitual practice. When an individual is honoured with a gift, it is done so out of respect, friendship, or affection. The acceptance of a gift that is intended as a gratuity, on the other hand, is strictly forbidden.

It is also assumed that it is permissible for a healthcare professional to contemplate a gift from a patient, contingent on the gift's value, so long as the healthcare professional upholds principles of personal and professional integrity and professionalism (2). Healthcare professionals identify several advantages of accepting a patient's gift, including respecting the patient's autonomy, enhancing the patient's sense of self-worth, and fostering trust (3). The gift-giving cycle is created when the recipient is obligated to repay a "debt balance" incurred due to the gift-giving. Offering an excessive amount would indicate that the recipient placed a disproportionate value on the gift, resulting in embarrassment. Conversely, presenting something of equal value would avert negative emotions, given that gifts symbolise our desire to foster a connection (4).

However, certain healthcare professionals opt against accepting gifts from their patients due to concerns that doing so may constitute "boundary crossings" or "boundary violations" encompassing professional malfeasance (5). Considering the patient-healthcare professional relationship, healthcare professionals ought to decline ostentatious or personal gifts that are inappropriate (6). Most

gifts presented to medical professionals are given with the highest regard. Should healthcare professionals accept or refuse such gifts? Gift-giving has been widely accepted and practised in local healthcare settings due to its minimal impact on professional conduct. As a result, healthcare professionals are confronted with an ethical quandary. Hence, it is critical to acknowledge this aspect, given that healthcare professionals, including students pursuing attachments, encounter difficulties upholding ethical and professional limits when presented with gifts in exchange for their diligent attention. Therefore, the study aimed to examine the views of nursing students concerning the ethical appropriateness of gift-giving culture by patients.

METHODS

A qualitative descriptive study design was adopted due to the suitability of this study for this approach. By implementing this approach, the researchers gained insight into the students' perspectives and experiences of the topic. This study employed purposive sampling to recruit students from a single higher-learning institution in Brunei. The recruitment of nursing students was facilitated through the Nursing Programme Leader, who acted as a gatekeeper and played a crucial role in granting access to study environments and establishing communication channels between the researcher and potential students. With the inclusion criteria of at least one clinical placement rotation, nine nursing students agreed to participate in an online interview. The interview questions derived from the literature review and discussion of the research team resulted in six questions that seek to elicit the students' overall perspectives on the practice of gift-giving in healthcare environments.

The data from the interview were subjected to the six phases of the thematic analysis process (7). First, the data was classified into themes or patterns that shared similarities. To become acquainted with the content of the collected data, the research team read and repeated it during the initial phase. All pertinent data extracts were compiled in the second phase, and the transcripts were categorised. By analysing the collected data and codes in the third phase, the research team was able to identify significant, overarching patterns that may represent potential themes. To establish

whether the themes provided a reliable data account and addressed the research inquiry, the fourth phase entailed comparing the themes and the transcripts. In the fifth phase, a thorough analysis was conducted on each theme to ascertain its scope and focus. The research team contextualised the findings within the extant body of literature and integrated the analytic narrative with data extracts during the sixth phase. Specifying that each phase followed a recursive process involving iterative motion between stages is critical. Considered a road map for the analysis, these phases enabled a thorough examination of the data.

Trustworthiness and Rigour

Before assessing the validity and dependability of the questions, two nursing students who met the inclusion criteria participated in a pre-test. The research team reviewed the interview topics through concurrent data analysis. The broad range of student demographics, including course selection, experience level, and age, enhanced the applicability of the results.

Through audit trail audit, the group additionally guarantees that the study

procedure is logical, traceable, and well-documented. Additionally, extracts from students are used to illustrate adherence. Despite the recommendation for data saturation after the seventh interview, two sessions of interviews were conducted to confirm that no additional information surfaced.

RESULTS

All students are female and fall within the age range of 21 to 26 years. Students represent a spectrum of academic programmes, fields of study, and years of education. Two (n=2) students are in their final year of study and are pursuing a double major in nursing and midwifery; five (n=5) students are in their third year of study and are enrolled in a 4-year programme that offers a single major in nursing; and two (n=2) students are in their third year of study and are enrolled in a 2-year articulate programme that provides a single major in nursing. All of them have completed over five clinical rotations in a variety of clinical environments. **Table 1** shows the demographic characteristics of the students.

Table 1: Demographic characteristics of the students

Pin code	Gender	Age	Ethnicity	Major	Course
Student 1	Female	22	Malay	Nursing	4-year programme
Student 2	Female	26	Malay	Nursing	4-year programme
Student 3	Female	21	Malay	Nursing	2-years Articulated Programme
Student 4	Female	23	Malay	Nursing	4-year programme
Student 5	Female	21	Malay	Nursing	2-years Articulated Programme
Student 6	Female	26	Chinese	Nursing	4-year programme
Student 7	Female	26	Malay	Nursing/midwifery	Double Major
Student 8	Female	23	Malay	Nursing/midwifery	Double Major
Student 9	Female	22	Malay	Nursing	4-year programme

Theme 1: Gift-giving Culture

Based on the findings, every student said that the patient or their family often gives gifts to show appreciation. Therefore, the patient or their family may not necessarily understand the moral implications of giving gifts to healthcare professionals. The person who spoke said the following.

"I guess people who work in healthcare take such diligent care of their families. This is a small way to thank them for going above and beyond. When doctors and nurses treat patients or their loved ones well, patients and their families often give gifts to show their thankfulness, even if the patient or loved one dies."

(Student 7)

Following the students' assertions, it should also be noted that presenting gifts within the healthcare sector has become more common.

"Based on what I saw during my clinical experience, patients and healthcare professionals seem to give each other many gifts these days. It is common for people who work in medicine to give and receive gifts. Most people think giving gifts to patients and healthcare workers is a good, moral, and free action that makes everyone happy. Most people do not know that this kind of action could lead to unfair care for patients."

(Student 4)

Furthermore, one of the students pointed out that gift-giving is expected, with healthcare professionals receiving gifts as recognition for their caring for the nation's health. Also, the personal beliefs of the giver are beyond cultural factors. In Islamic tradition, giving a gift is considered a protective measure against misfortune. Furthermore, several students stated that giving gifts to healthcare professionals is frequently regarded favourably by elderly patients.

However, the students also felt that creating awareness among the public regarding the ethical insinuations of presenting gifts in the healthcare sector is critical for ensuring that healthcare professionals maintain their professional and ethical standards.

"I will let the patient know that we have a method in place for accepting gifts from patients because receiving gifts can also be seen as unethical. For the above reasons, I must tell the patients that we are wrong to get such a gift. I would feel bad not taking the gift if they insisted on giving it to me because I would not want her to feel rejected. If they did not insist on giving it, I would not feel bad taking it."

(Student 4)

As further expounded in the following theme, the students also acknowledged the importance of deliberating on the misconception in gift-giving practice.

Theme 2: Misconception of Gift-giving Practice

The students mentioned that most gifts presented to healthcare professionals are appreciated and given the highest regard. Equally, healthcare professionals scrutinize the authenticity of such gestures due to the

possibility that the individual harbours an ulterior motive or an unwarranted expectation. The subsequent assertions were extracted from one of the students' views:

"One thing that worries me is that it could be used to get special treatment from people who work in healthcare situations. Aside from that, it is common in Brunei for people to insist on getting things when given to them. Still, persistence might make me uncomfortable and wonder if the gift was given in good faith. If the person who gave me the gift is not being honest, I will either give it to someone else or not use it. Also, what the patient's family expects from me and the other healthcare workers we work with. They should be able to expect to get good medical care. Additionally, most people think giving gifts as a volunteer action is fine and can make the patient and the healthcare staff happy. They did not know that the act could cause a conflict of interest in the care they gave to patients. The nurses will give more attention to the patient who gives gifts than the patient who does not or cannot do so."

(Student 2)

The students' responses suggest that a bystander may perceive the act of gift-giving as an unjust practice and a manifestation of bribery; thus, the bystander may develop the following opinion.

"People may think giving healthcare professionals gifts like \$50 in cash and expensive chocolate boxes is an attempt to pay them. On the other hand, many people value the kind thing that every patient's family does to thank the medical staff. Other patients who saw what was done might feel obligated to do something in return, or even worse. They might feel bad about themselves because they cannot give gifts. Another thing is that some patients might think badly of the nurse who got the gifts. For example, they might think that the patient who gave the gift got better care than they did."

(Student 1)

Additionally, certain healthcare teams may harbour feelings of envy toward the gift that was granted to only a select number of staff members, even though they share the same duty. To prevent unnecessary conflict and negative thoughts, it is advised that individuals share the gifts they accept with others, regardless of their monetary value, as articulated by the students.

"As a courtesy, the healthcare professional should try to decline the gift. If this fails because the gift

giver is persistent, the healthcare professional should refer the gifts to the head of their department so that the gift can be appropriately used or distributed. Still, the Student told them to keep it a secret when given gifts: "Do whatever you choose to do respectfully and quietly." Keep quiet about your skills if you have them, and do not make fun of the patient or their family if they give you a gift for doing something that is part of your job."

(Student 8)

The following section provides additional accounts of the students' approaches to receiving gifts from patients, focusing on declining such gifts.

Theme 3: Consequences of Gift-giving Practice

The students indicated that healthcare professionals can uphold their ethical and professional standards by declining the gift presented to them. This undertaking could foster a negative perception of the patient regarding healthcare professionals. As a result, this influences the dynamic between the patient and the healthcare provider. The subsequent assertions underscore the viewpoints and emotions of the students as they declined to accept the gifts.

"We can hurt or disappoint the patient's family or other relatives if we do not acknowledge their kind actions and genuine thanks to the medical team. Some people think nurses are rude when they turn down gifts. I am worried because I think people will judge me for it and post about it on social media."

(Student 1)

In addition, the students raised an additional aspect: the possible repercussions of declining the presented gift.

"The main thing that worries me is that the mother might take the refusal as an insult. When I watch her daughter again, things will be bad between us. In addition, I am afraid that this will make things worse between me and her family. This means it will be hard for me to care for others because I feel bad and guilty during the conversation."

(Student 3)

However, situations may arise in which contemplating a gift is appropriate. The following assertions were explicitly extracted to illustrate this point.

"A few staff members said we should take anything, even a dollar or some food, to show them how much we appreciate them trying to help. Giving gifts to nurses and doctors does not have to cost much money. I believe that people who work in healthcare would enjoy a gift of food."

(Student 6)

Moreover, the students stated that the gift offered could be financial assistance for specific individuals, especially for nursing students. Therefore, it is advisable to bring the matter of gift-giving to the attention of the appropriate authority so that they may guide decision-making and potential resolutions to the issue raised by the student.

"We were told to tell the sister in charge about any gifts we were given so that she could decide what to do next, such as whether to accept the gift or politely refuse it."

(Student 2)

DISCUSSION

This study aimed to explore the perspectives of nursing students regarding the ethical appropriateness of gift-giving by patients. Students indicated from the outset that the patient or a family member of the patient is unaware of the ethical implications associated with gift-giving. The results indicate that the gift-giver perceives the practice not only as an expression of appreciation or gratitude but also as a social and cultural obligation. Gift-giving as a token of gratitude and a means to "avert misfortune" is an indisputable aspect of Bruneian culture and upbringing. It has been suggested that presenting charitable contributions following personal beliefs can aid in the fight against adversity and illness (8). Previous research indicates that the awareness and decision-making skills of undergraduate nursing students on the ethical dimension of healthcare practice are inadequate (9). Thus, ethics courses must be incorporated earlier in the nursing and midwifery curriculum to ensure that students are adequately prepared for situations involving moral issues, such as gift-giving in the clinical setting (10). This suggests that charitable gift-giving may also be a factor in presenting gifts to the recipient without anticipating a return.

Moreover, the lack of explicit hospital policy or guidelines regarding gift-giving creates ambiguity regarding the ethical permissibility

of accepting or rejecting such gifts (2). Furthermore, to prevent any perceived conflict of interest, healthcare professionals must assess the situation and ensure that the public is adequately apprised of hospital policies concerning the ethical dilemma of gift-giving. Meanwhile, differentiating between an ordinary act of courtesy and hidden vested interests becomes formidable. Most patients present gifts as an unexpected token of appreciation (11). However, certain patients believe giving gifts will grant them significant social standing and facilitate access to more specialised or individualised medical attention. To influence the healthcare professional-patient relationship, a patient might propose exchanging a gift in exchange for a social acquaintance or professional colleague. Patients frequently hold benign expectations primarily from their yearning for personal fulfilment and social interactions.

On the other hand, performing good acts and appropriately repaying someone's kindness are cultural expectations. The cultural acceptability of gift-giving is enhanced by its intrinsic role in the community dynamic (12). Theoretically, the act of receiving a gift has the potential to influence our characters; furthermore, it is in our nature to reciprocate with good behaviour. Patients may raise concerns regarding the healthcare ramifications of the study's results, contributing to prejudice and discrimination. Moreover, healthcare professionals may alter their views or conduct in response to patients who present gifts (5). The nursing students in this study articulated their belief that accepting gifts constitutes extortion and injustice and assessed it as such. A gift can constitute a bribe and an expectation of compensation or recognition (13). Irrespective of the underlying motives for the gift, it engenders a feeling of duty within the bond.

Meanwhile, declining gifts that present an ethical dilemma could lead to an unfavourable perception on the part of the giver. Accepting gifts could violate a healthcare professional's fiduciary duty to the patient (14). This is because gift-giving could be interpreted as an attempt by the patient to win the staff's favour in return for higher expectations. Frequently, patient gifts have served as a precursor to boundary violations. It is appropriate to respectfully decline inappropriate gifts and explain the reasoning behind the decline (2). However, as indicated by the students'

feedback, declining the gift might be interpreted as disrespect and devaluation, consequently impacting the rapport between the patient and the nurse. Accordingly, this may result in awkward encounters, impede the development of rapport, pose challenges to delivering high-quality care, and evoke feelings of remorse, especially when the carer is working with an elderly and long-term patient population.

In contrast, patients may experience feelings of rejection if the gift is declined, and the value of the gift is also a significant factor (15). Also, the patient should be informed that accepting the gift will not necessitate modifying treatment for the illness. A common occurrence is that healthcare professionals lack knowledge regarding the patient's ancestry, which includes their public status. Hence, healthcare professionals must always uphold the standards of professionalism while refusing gifts. This is because the conduct of healthcare professionals can impact the reputation of the healthcare sector, whether favourably or unfavourably.

It is evident, based on the study findings and support from prior research, that there are numerous aspects to contemplate the ethical appropriateness of gift-giving, such as the nature of the gifts, the patient's expected intentions or expectations, and the potential ramifications for the patient-healthcare professional relationship regarding the acceptance or rejection of the gift in question. Nevertheless, healthcare professionals would be better guided by a hospital policy that is well-defined and current. This policy should outline a collection of anticipated national standards of conduct that can aid in resolving the ongoing controversy surrounding the suitability of gift-giving in a clinical environment.

The current research had some limitations. Out of the total number of students who participated, only a small number provided succinct responses, and all of them were female. This limitation can impede the applicability of the results to different contexts and undergraduate nursing students. Additional research is necessary to scrutinise the fundamental principles students integrate into their professional and ethical responsibilities surrounding the

appropriateness of gift-giving in a clinical environment.

CONCLUSION

This study's findings indicate that a sizable proportion of nursing student exhibit an ethical awareness about the appropriateness of gift-giving by patients. They cite a variety of ethical considerations when deciding whether to receive or decline such gifts from patients. They also emphasise the importance of the attributes of the gift, the anticipated intentions or expectations of the patient, and the potential ramifications for the clinical-patient relationship. Therefore, it is imperative to enhance further the professional behaviour of healthcare professionals in ethical practice. This will enable a resolution to the ongoing debate regarding the ethical appropriateness of gift-giving.

ETHICAL CONSIDERATIONS

The research protocol obtained approval from the university's ethical review committee (No. UBD/PAPRSBIHSREC/2022/02). Before data collection, each student provided written consent, ensuring voluntary participation.

CONFLICT OF INTEREST

The authors have declared no conflict of interest.

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AUTHOR CONTRIBUTIONS

These authors contributed equally to this work.

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