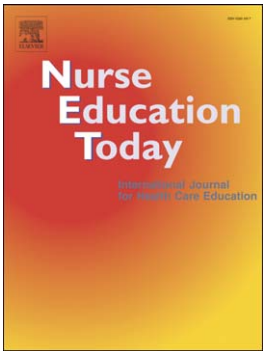
Accepted Manuscript




# Academic misconduct – helping students retain their moral compass

Steve Tee, Kathy Curtis

PII: S0260-6917(17)30290-3
DOI: doi:10.1016/j.nedt.2017.11.030
Reference: YNEDT 3678

To appear in: *Nurse Education Today*

Please cite this article as: Tee, Steve, Curtis, Kathy, Academic misconduct – helping students retain their moral compass, *Nurse Education Today* (2017), doi:10.1016/j.nedt.2017.11.030

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting proof before it is published in its final form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.

ACCEPTED MANUSCRIPT

**Nurse Education Today Editorial**

# Title: Academic misconduct – helping students retain their moral compass

**Authors: Prof Steve Tee and Dr Kathy Curtis**

**Professor Stephen Tee** DClinP, MA, PGCEA, BA, DPSN, RMN, PFHEA
Professor of Nurse Education & National Teaching Fellow
Faculty of Health & Social Sciences
Bournemouth University
Royal London House
Christchurch Road
Bournemouth
Dorset BH1 3LT
UK
Email: stee@bournemouth.ac.uk

**Dr Katherine Curtis** PhD, MSc, PG Dip.Ed., BSc, RGN, SFHEA
Associate Professor & Head of Department Nursing and Clinical Sciences
Faculty of Health and Social Sciences
Bournemouth University
Bournemouth House
Christchurch Road
Bournemouth
Dorset BH1 3LH
UK
Email: kcurtis@bournemouth.ac.uk

ACCEPTED MANUSCRIPT

ACCEPTED MANUSCRIPT

## Academic misconduct – helping students retain their moral compass

One rather unpalatable aspect of the work we have to do in higher education is to detect and address incidents of academic misconduct such as cheating.

Academic misconduct or academic dishonesty is broadly defined as any attempt by a student to secure an unfair advantage in their work which is submitted for assessment. In the case of nursing and other health professions this includes practice assessments. The type of offence will typically involve some form of deception or fraudulent activity and can include plagiarism, collusion, forging assessor signatures on practice assessments, or cheating in exams. Academic misconduct also includes helping others to commit an academic offence (BU 2017).

The issue of academic misconduct in universities is on the increase. In 2017 in the UK, a 42% increase over the last four years was revealed in data obtained through a freedom of information request, particularly cheating involving technology (Sarah Marsh, The Guardian Monday 10 April 2017). This problem is not confined to the UK, with similar concerns being voiced in the US (Perez-Pena 2012), Australia (Belot 2016) and South Africa (2014).

In 2016, The Times newspaper described a "plagiarism epidemic" in Britain's universities with almost 50,000 students being caught cheating in the last three years. Some of this 'epidemic' could be improved detection as a result of more sophisticated online plagiarism recognition systems being applied to academic work. Despite this, identifying a high level of misconduct makes very uncomfortable reading for health professions where ethical behavior is a central expectation. Also, these figures only reflect misconduct that has been detected and with the increasing sophistication of mobile electronic devices and more 'online' courses and assessment, there is every likelihood the actual figures are much higher.

The issue for all health education providers is to understand the links between academic misconduct and eventual fitness to practice as a professional. It is clear from NMC fitness to practice hearings and HCPC tribunals, that cheating behavior by qualified nurses and allied health professionals is taken seriously and penalized (HCPC 2017, NMC 2015). However, what is less clear is when this behavior started and what could have been done to prevent it developing in the first place. This has significant implications for how we educate students on avoiding temptation to cheat in view of their future responsibilities as registered professionals.

Researchers have been seeking to examine the relationship between individual regulatory self-efficacy which is a person's belief in their ability to resist peer pressure to misbehave and moral disengagement which is the cognitive mechanism that enables a person to justify their actions (Bandura 2016). This has also been explored in relation to cheating amongst students undertaking a vocationally oriented programme such as nursing (Fida et al 2016). Evidence from research such as this demonstrates that unethical bahaviours such as cheating or conforming to low standards of behavior are associated with stressful and demanding environments where there is a lack of support or a high workload, such as can be experienced by students when engaging in higher education or within nursing practice (Fida et al. 2014, Curtis 2013). One of the critical findings is that an individual's decision to resort to wrongdoing could over time lead to a normalising of similar behavior, resulting in "morally desensitizing" the student to further misconduct. In other words, students who

ACCEPTED MANUSCRIPT

choose to cheat, and get away with it, may increasingly self-justify this behaviour, resulting in further acts of similar behaviour.

It goes without saying that health professionals need to operate with integrity in order to foster the trust of patients and the public. The concept of integrity was recently examined by Devine and Chin (2017) who found that honesty, ethical behavior and professionalism are the defining attributes. They emphasized the importance of faculty being role models for integrity, with this being a key element in building a culture of honesty.

Role modeling is evidently an important tool, but institutions also need to set clear and transparent boundaries on what is acceptable behaviour and to articulate what will happen when these boundaries are breached. Fear of serious penalty associated with being caught cheating has been shown to encourage academic integrity (McCabe Butterfield and Trevino, 2012). The types of sanctions and penalties available to higher education institutions varies but will usually range from written warnings, requirements to resubmit work, re-sit an examination, repeat a module, capping of marks for an assessment, or withdrawing the student from their course. But are these sufficient? Universities often have fitness to practise processes, running parallel, which consider whether standards appropriate to professional practice have been maintained. But are those involved in such processes fully prepared to consider the wider implications of a student's behavior?

In 2009, Tee and Jowett (2009) commented on new UK regulatory procedures for determining fitness for practice. They concluded how vital effective fitness to practise procedures were for public protection and these were highly dependent on sound collaboration between higher education and practice providers. This also included the management of fitness to practise panels within achievable timescales to ensure emerging issues were addressed in a timely manner. These conclusions remain relevant today but it seems that with the recent increases in academic misconduct, there is an escalating need to address the antecedents to these behaviors before they result in misconduct.

In order to enhance student preparation for professional practice it is vital that those who teach and supervise students in academic and practice settings recognize that cheating behavior can be associated with future unethical and unsafe care. Preventative measures need to be considered alongside punitive in order to ensure those entering health professions have insight into the risks to their future practice and to the public from cheating behavior. However, a simple educational approach of sharing that information with students and emphasizing the expectations within codes of conduct is not enough for some students. Codes of conduct have been available for some time, and despite these, cheating has continued. It is now time to refocus efforts on enabling all students to identify when they are tempted to cheat and provide them with strategies for managing this temptation, particularly during periods of high workload and stress. The link between personal effort and a moral self-concept with a sense of reward needs strengthening. It is also important to make the link for students between reporting misconduct in practice and 'whistle-blowing' in the classroom.

Academic misconduct needs to be taken very seriously and following many years of punitive measures, perhaps it is now time to enhance the sense of personal reward and moral identity associated with academic integrity. Those supporting and supervising students need to ensure adequate support is in place that minimizes sense of workload pressure and stress, and enables students to take control of any temptation to cheat. If this is done

ACCEPTED MANUSCRIPT

alongside punitive measures that have an emotional, reputational and financial cost, it may improve future health professional's academic integrity and moral engagement, and sustainably reduce the incidence of student, and future health professional, misconduct.

Ali A. 2016 UK Universities in 'plagiarism epidemic' as almost 50,000 students caught cheating over last 3 years. The Independent. 4 January 2016

Bandura, A. (2016). *Moral Disengagement: How People Do Harm and Live With Themselves*. New York: Worth Publishers.

Belot H 2016 Cheating at major Australian universities may be easier than many realise. The Sydney Morning Herald. January 25 2016

Curtis K (2013) Learning the emotional requirements of compassionate practice: Student nurse vulnerability and courage. *Nursing Ethics*, 21(2), 210-223.

Devine C A and Chin E D 2017 Integrity in nursing students: A concept analysis. Nurse Education Today. http://www.nurseeducationtoday.com/article/S0260-6917(17)30245-9/abstract DOI: http://dx.doi.org/10.1016/j.nedt.2017.10.005

Fida, R, Tramontano, C, Paciello M., Ghezzi, V, & Barbaranelli, C. (2016). Understanding the Interplay Among Regulatory Self-Efficacy, Moral Disengagement, and Academic Cheating Behaviour During Vocational Education: A Three-Wave Study. *Journal of business ethics, 1-16*

Fida, R, Paciello M., Tramontano, C, Barbaranelli, C., Fontaine, RG. (2014) The Role of Irritability in the Relation between Job Stressors, Emotional Reactivity, and Counterproductive Work Behavior *European Journal of work and organizational psychology, 23*, 31-47

Health and Care Professions Tribunal Service (HCPTS) (2017) Available online: https://www.hcpts-uk.org/hearings/search [Accessed 19/11/17]

Marsh S 2017 More university students are using tech to cheat in exams

The Guardian Monday 10 April 2017

McCabe, D.L., Butterfield, K.D., & Trevino, L.K. (2012). *Cheating in college: Why students do it and what can be done about it.* Baltimore: John Hopkins University Press

News24 2014 Cheating students on the rise – survey. News24 2014-08-17. https://www.news24.com/SouthAfrica/News/Cheating-students-on-the-rise-survey-20140817

ACCEPTED MANUSCRIPT

NMC (2015a) Conduct and Competence Committee Hearings, Available online: https://www.nmc.org.uk/globalassets/sitedocuments/ftpoutcomes/2015/apr/reasons-sesay-cccsh-40725-20150408.pdf [Accessed 19/11/17]

Perez-Pena 2012 Studies Find More Students Cheating, With High Achievers No Exception. New York Times SEPT. 7, 2012

Tee S R and Jowett R 2009 Achieving fitness to practice: Contributing to public and patient protection in nurse education. Nurse education Today 2009 May;29(4):439-47. doi: 10.1016/j.nedt.2008.08.013.

ACCEPTED MANUSCRIPT