



Effectiveness of Narrative-Based Medical Ethics Education for Nursing Students in Iran: A Systematic Review

Maryam Tajadini¹, Tayebe Ilaghi Nezhad², Elham Alimadadi³, Zhale Sadeghian³, Mahdieh Parhoon⁴, *Hoda Ahmari Tehran⁵

¹Instructor of Nursing, Department of Anesthesiology, School of Allied Medical Sciences, Rafsanjan University of Medical Sciences, Rafsanjan, Iran; AND Student Research Committee, School of Health and Religion, Qom University of Medical Sciences, Qom, Iran. ²Instructor of Neonatal Intensive Care Nursing, Department of Nursing, School of Medical Sciences, Sirjan University of Medical Sciences, Sirjan, Iran; AND Student Research Committee, School of Health and Religion, Qom University of Medical Sciences, Qom, Iran. ³Student Research Committee, Department of Health Philosophy and Ethics, School of Health and Religion, Qom University of Medical Sciences, Qom, Iran. ⁴BSN, Bushehr Heart Center Hospital, Bushehr University of Medical Sciences, Bushehr, Iran. ⁵Associate Professor of Medical Education, School of Medicine, Spiritual Health Research Center, Qom University of Medical Sciences, Qom, Iran.

Abstract

Background: Nurses, both students and professionals, need strong ethical competence for patient care. Traditional ethics education lacks practical application, prompting interest in narrative ethics education using storytelling. This study systematically reviews research on narrative ethics education for nursing students and nurses in Iran to assess its effectiveness and challenges.

Materials and Methods: A systematic review was conducted by searching Persian and English literature up to April 2025 in databases including Web of Science, PubMed, Scopus, Cochrane Library, CINAHL, EMBASE, SID, and CIVILICA. Search terms included “medical ethics,” “narrative,” “education,” “medical sciences,” “medicine,” “nursing,” and “Iran.” Two independent researchers screened studies. Quality was assessed with the modified JADAD scale and JBI Critical Appraisal Tool.

Results: This systematic review of five studies involving 319 nursing from various Iranian cities (Yazd, Tehran, Birjand) demonstrated that narrative ethics education significantly improves ethical intelligence, sensitivity, empathy, and respect for patient privacy. The positive effects were sustained for up to two months post-intervention. Both virtual and face-to-face delivery methods were effective in enhancing students’ professional behavior, communication skills, and overall ethical competence. While some studies reported no significant differences compared to traditional lecture-based methods, narrative education consistently showed greater improvements in ethical sensitivity. By engaging students with patient stories and moral dilemmas, this educational approach fosters deeper moral insight and reflective thinking, making it a flexible and practical strategy for nursing ethics education.

Conclusion: Narrative ethics education effectively boosts nursing students’ ethical awareness, empathy, and professional behavior. Its flexible delivery, both virtual and in-person, prepares students to face clinical ethical challenges. Combining narrative and lecture methods enhances nurses’ patient advocacy, making it a comprehensive strategy in nursing education.

Key Words: Iran, Narrative ethics education, Nursing education, Nursing students.

*Please cite this article as: Tajadini M, Ilaghi Nezhad T, Alimadadi E, Sadeghian Zh, Parhoon M, Ahmari Tehran H. Effectiveness of Narrative-Based Medical Ethics Education for Nursing Students in Iran: A Systematic Review. Med Edu Bull 2025; 6(2): 1143-50. DOI: **10.22034/MEB.2025.548532.1125**

*Corresponding Author:

Hoda Ahmari Tehran, PhD in Medical Education, Qom University of Medical Sciences, Qom, Iran.

Email: ahmari9929@yahoo.com

Received date: Apr. 12, 2025; Accepted date: Sep.22, 2025

1- INTRODUCTION

Nurses, as key healthcare team members, play a fundamental role in patient care, and possessing strong ethical skills directly affects care quality and patient satisfaction (1). Professional ethics comprise principles guiding behavior amid occupational challenges to support humane, correct decisions (2, 3). However, purely theoretical ethics education is insufficient for improving ethical decision-making and calls for more practical methods (4, 5).

The narrative approach, using stories about patients' ethical challenges, fosters empathy and deeper understanding of patient experiences. It enhances analytical skills, critical thinking, and responsibility in clinical decisions (6, 7). Narration also stimulates reflection and complex ethical analysis, promoting ethical intelligence and humanistic professional behavior (8).

Medical sciences increasingly face complex ethical dilemmas, where effective management indicates ethical competence—resolving conflicts through dialogue without violence or deception (9–12). Traditional teaching methods like lectures and seminars have limited effectiveness in improving ethical sensitivity (13, 14).

Narration, combining storytelling and role-playing, effectively teaches ethical concepts by emphasizing sensitivity, judgment, motivation, and ethical character in decision-making (15–17). It improves care and empathy by conveying patients' pain and experiences, aiding the understanding of ethical situations (14, 16).

This study aims to systematically review research on narrative-based medical ethics education for nursing students in Iran, assessing its impact, benefits, limitations, and challenges to provide robust evidence for improving ethics education quality and outcomes.

2- MATERIALS AND METHODS

2-1. Data Sources

This systematic review followed the Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines (18). A comprehensive search was conducted in electronic databases including PubMed, Web of Science, Scopus, EMBASE, Cochrane Library, CINAHL, CIVILICA, SID, and Google Scholar. The search covered all publications up to April 2025 without time restrictions. Keywords used were “medical ethics,” “narrative,” “education,” “medical sciences,” “medicine,” “nursing,” and “Iran,” combined with Boolean operators “AND” and “OR.”

2-2. Eligibility Criteria

The review used the PICO framework:

- **Population:** Nursing students in Iran
- **Intervention:** Medical ethics education via a narrative approach
- **Comparison:** Traditional or alternative teaching methods
- **Outcomes:** Improvement in ethical sensitivity, ethical intelligence, and other relevant educational measures.

2-3. Inclusion and Exclusion Criteria

The inclusion and exclusion criteria are summarized in the **Table 1**.

Table-1: Inclusion and Exclusion Criteria for Selected Studies.

Criteria	Description
Study Type	Original research: experimental, quasi-experimental, or clinical trials
Population	Nursing students or nurses in Iran
Intervention	Narrative-based medical ethics education (virtual or in-person), alone or combined with lectures
Language	English or Persian
Publication Date	Published up to April 2025
Excluded Study Types	Case reports, narrative reviews, theoretical articles, editorial letters
Geographic Location	Conducted in Iran

2-4. Study Selection and Data Extraction

Two researchers independently screened titles, abstracts, and full texts for eligibility. Disagreements were resolved with a third researcher. Extracted data comprised authorship, publication year, study location, design, sample size, type of narrative education, and main outcomes.

2-5. Quality Assessment

The modified JADAD scale assessed randomized controlled trials' quality, scoring randomization, blinding, and withdrawal reporting on a 0–5 scale. Scores of 5 indicated high quality, 3–4 moderate quality, and below 3 low quality with high bias risk (19).

For experimental studies, we used the JBI Critical Appraisal Tool for Quasi-Experimental Studies. This tool includes 9 items that assess risk of bias domains such as clarity of cause and effect, similarity of comparison groups, presence of control groups, repeated outcome measurements, completeness of follow-up, reliable outcome measurement, and appropriateness of statistical analysis. Each item is rated as Yes, No, Unclear, or Not applicable, leading to an overall appraisal of Include, Exclude, or Seek further information based on risk of bias. The JBI tool emphasizes qualitative judgment over numeric scoring to guide study inclusion and interpretation (20).

2-6. Ethical Considerations

As a systematic literature review, this study did not require formal ethical approval. Nevertheless, ethical principles of transparency, integrity, and neutrality were strictly maintained throughout the review process. The selection, appraisal, and synthesis of studies were conducted impartially and accurately to uphold scientific rigour and ethical standards in reporting.

3- RESULTS

After removing duplicates and exclusions, four studies were included in this systematic review (20-23) (**Figure 1**). Of these, three were experimental studies and one was a clinical trial, involving a total of 259 nursing students. Three studies compared virtual narrative ethics education with either in-person training or control groups (20, 22, 23). Studies were conducted in Yazd (two), Tehran (one), and Birjand (one) (**Table 2**).

Narrative ethics education significantly increased students' ethical intelligence, with mean scores differing significantly between pre-test, immediately post-intervention, and two months later ($P=0.02$). Indicators such as integrity, empathy, and forgiveness also showed significant improvements (23). Ethical sensitivity improved markedly and persisted up to two months post-intervention, with no significant difference between immediate and two-month follow-ups (22). Control groups showed no significant changes.

Respect for patient privacy improved similarly following both virtual and in-person training (20, 21). Although Bayg et al. reported no statistically significant difference between narrative and lecture methods in enhancing ethical sensitivity, the narrative group showed a higher mean increase (20). These findings suggest that narrative ethics education, delivered virtually or face-to-face, effectively enhances ethical sensitivity and is a suitable alternative when in-person training is not feasible.

Overall, narrative ethics education is an effective and flexible approach to promoting ethical intelligence and sensitivity among nursing students.

Table-2: Summary and Quality Assessment of Studies on Narrative Ethics Education for Nursing Students and Nurses in Iran.

Authors, Year (Ref)	Study Location	Study Design	Sample Size	Type of Narrative Education	Comparison Group	Quality Assessment Summary
Bayg et al., 2022 (21)	Yazd	Experimental	In-person narrative (41) / Virtual narrative (31) / Control (31)	Virtual and in-person narrative	In-person training, lecture	Moderate quality*
Imanifar et al., 2015 (22)	Birjand	Experimental	Narrative ethics (28) / Lecture (28)	Face-to-face and virtual narrative	No specific comparison	Moderate quality*
Nasiryani et al., 2020 (23)	Yazd	Experimental	Virtual narrative (30) / Control (30)	Virtual narrative ethics education	Control group	High quality*
Nasiryani et al., 2023 (24)	Tehran	Clinical trial (RCT)	Virtual narrative (40)	Narrative ethics education	Not specified	High quality**
Imanifar et al., 2022 (25)	Birjand	Experimental	Narration (27) / Lecture (26) / Control (22)	Ethics narration and lecture	Control group	Moderate quality*

* Based on modified JADAD scale

** Based on JBI Critical Appraisal Tool.

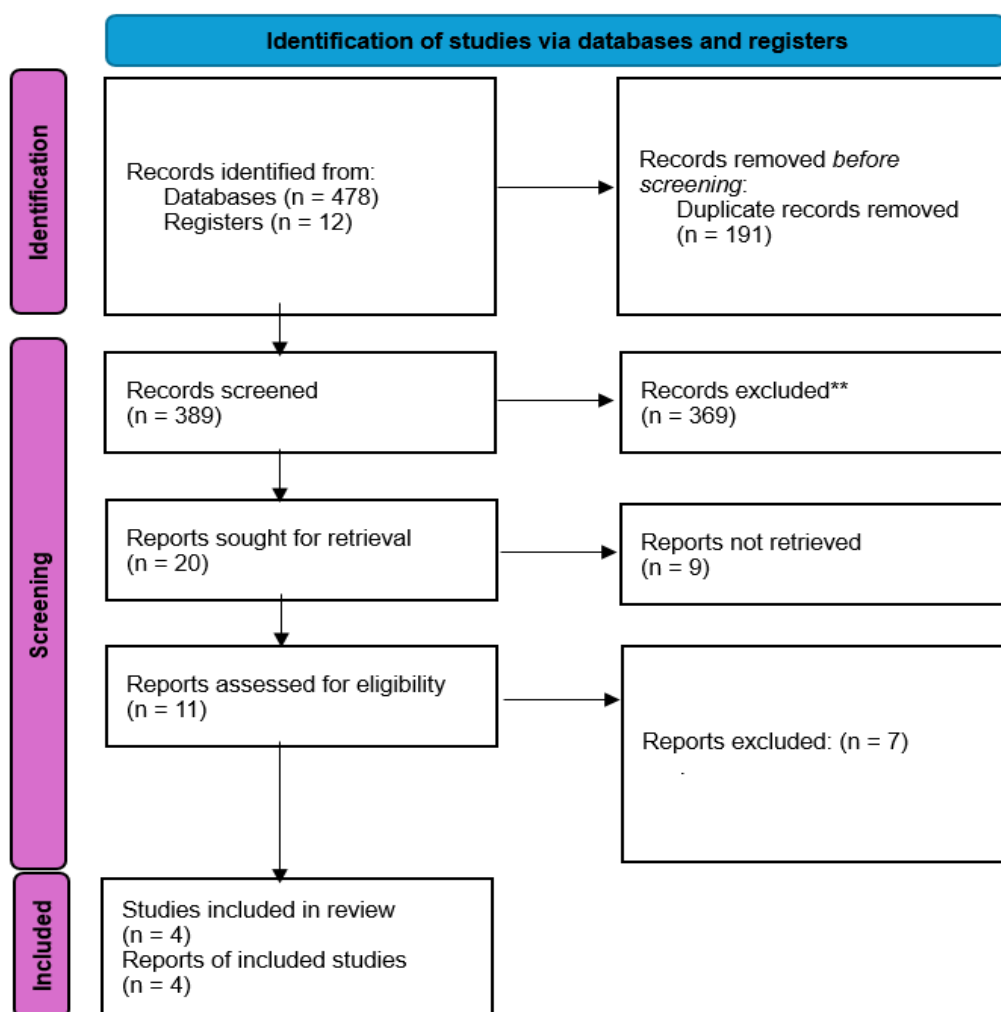


Fig.1: PRISMA Flowchart.

4- DISCUSSION

This systematic review assessed the effectiveness of narrative education in teaching medical ethics to nursing students in Iran. The findings demonstrate that narrative ethics education significantly enhances nursing students' ethical intelligence, sensitivity, and respect for patient privacy (22–24), consistent with previous studies supporting narrative approaches as effective in improving ethical understanding and decision-making (26, 27). Notably, the quasi-experimental study by Imanifar et al. (2022) extended these findings beyond students to nurses, showing that ethics education through narration and lecture positively impacts nurses' patient advocacy skills (25).

The narrative approach enables engagement with complex ethical issues through storytelling, fostering deeper understanding and empathy (28). This method promotes precise comprehension of ethical principles and their practical application, improving ethical behavior. The review also shows narrative ethics education's positive effects can last up to two months post-intervention, indicating sustained impact on students' ethical development, though longer follow-up is needed (21, 23).

Narrative education cultivates empathy and humanistic care by presenting real patient experiences and ethical dilemmas, enhancing ethical reasoning and sensitivity (29–32). It encourages reflection on personal values and professional behavior and strengthens critical thinking for addressing complex ethical challenges (33, 34). Its flexible delivery—both face-to-face and virtual—achieves comparable benefits, including improved respect for patient privacy (21).

However, barriers such as educators' preference for traditional methods and cultural factors may limit narrative education adoption. Providing robust

scientific evidence and successful examples may boost acceptance, while supportive environments are needed for sharing personal experiences (31, 35, 36). Standardized evaluation aligned with educational goals should be developed to optimize implementation (37). Some studies suggest narrative education enhances nurses' moral courage, essential for addressing occupational challenges (22). Nonetheless, declining ethical sensitivity over time highlights the need for ongoing education to maintain benefits.

In summary, narrative ethics education effectively improves ethical intelligence, sensitivity, empathy, and professional behavior in nursing students and nurses, enhancing nursing care quality. The main limitation is the small number of studies focused on Iran, limiting generalizability. Future research should explore long-term effects, develop standardized assessments, and extend studies across diverse populations to broaden global applicability.

5- CONCLUSION

Narrative ethics education, whether delivered virtually or face-to-face, effectively enhances ethical intelligence, sensitivity, empathy, and patient advocacy skills in both nursing students and practicing nurses, thereby improving nursing care quality. The reviewed studies demonstrated significant and sustained improvements in key ethical competencies such as integrity, empathy, forgiveness, and respect for patient privacy. Importantly, quasi-experimental evidence shows that combining narrative and lecture methods positively impacts nurses' patient advocacy, supporting its application beyond students. The main limitation is the limited number of studies focused on Iran, which restricts generalizability. Future research should investigate long-term effects, develop standardized assessment

tools, and broaden study populations for wider applicability.

6- AUTHORS' CONTRIBUTIONS

Study conception or design: HA, and MT; Data analyzing and draft manuscript preparation: TI, EA, ZS, and MP; Critical revision of the paper: HA; Supervision of the research: MT; Final approval of the version to be published: MT, TI, EA, ZS, MP, and HA.

7- CONFLICT OF INTEREST: None.

8- REFERENCES

1. Baek H, Han K, Cho H, Ju J. Nursing teamwork is essential in promoting patient-centered care: a cross-sectional study. *BMC Nurs.* 2023 Nov 17;22(1):433. doi: 10.1186/s12912-023-01592-3. PMID: 37978376; PMCID: PMC10655287.
2. T. Nafea E. Professional Values and Ethics in Medical Education. *Education and Human Development.* IntechOpen; 2024. Available from: <http://dx.doi.org/10.5772/intechopen.114233>.
3. RHODES R, COHEN DS. Understanding, Being, and Doing: Medical Ethics in Medical Education. *Cambridge Quarterly of Healthcare Ethics.* 2003;12(1):39-53. doi:10.1017/S0963180103121056.
4. Mahajan R, Aruldas BW, Sharma M, Badyal DK, Singh T. Professionalism and ethics: A proposed curriculum for undergraduates. *Int J Appl Basic Med Res.* 2016 Jul-Sep;6(3):157-63. doi: 10.4103/2229-516X.186963.
5. Safari Y, Khatony A, Khodamoradi E, Rezaei M. The role of hidden curriculum in the formation of professional ethics in Iranian medical students: A qualitative study. *J Educ Health Promot.* 2020 Jul 28;9:180. doi: 10.4103/jehp.jehp_172_20. PMID: 32953908; PMCID: PMC7482700.
6. Kagawa Y, Ishikawa H, Son D, Okuhara T, Okada H, Ueno H, Goto E, Tsunozumi A, Kiuchi T. Using patient storytelling to improve medical students' empathy in Japan: a pre-post study. *BMC Med Educ.* 2023 Jan 27;23(1):67. doi: 10.1186/s12909-023-04054-1.
7. Xue M, Sun H, Xue J, Zhou J, Qu J, Ji S, Bu Y, Liu Y. Narrative medicine as a teaching strategy for nursing students to developing professionalism, empathy and humanistic caring ability: a randomized controlled trial. *BMC Med Educ.* 2023 Jan 18;23(1):38. doi: 10.1186/s12909-023-04026-5.
8. Golchin Mehr S, Azami E, Kamali M, Jafari H. Effects of Adherence to the Principles of Professional Ethics on Nursing Performance: A Narrative Review Study. *Tabari Biomed Stu Res J* 2022; 4 (2):40-7. URL: <http://tbsrj.mazums.ac.ir/article-1-3768-en.html>.
9. Patient VR. *Heal thyself: How the new medicine puts the patient in charge.* New York: Oxford University Press; 2008. ISBN: 978-0195313727.
10. Pozgar GD. *Legal and ethical issues for health professionals: Jones & Bartlett Learning;* 2023. ISBN: 978-1284261714.
11. Martin D, Mörch C-M, Figoli E. The notion of moral competence in the scientific literature: a critical review of a thin concept. *Ethics & Behavior.* 2023;33(6):461-89. doi: 10.1080/10508422.2022.2067163.
12. Piaget J. The affective unconscious and the cognitive unconscious. *J Am Psychoanal Assoc.* 1973;21(2):249-61. doi: 10.1177/000306517302100201. PMID: 4744440.
13. Zielina M, Škoda J, Ivanová K, Dostál D, Juričková L, Anthony Procházka D, Straka B, Doležal A. Exploring moral competence regression: a narrative approach in medical ethics education for medical students. *BMC Med Ethics.* 2024 Jun 21;25(1):73. doi: 10.1186/s12910-024-01073-5.
14. Meacham KR, Sloan I, Latessa RA. Practical tips for teaching ethics and humanism to medical students. *MedEdPublish* (2016). 2022 Mar 23;12:23. doi: 10.12688/mep.19022.1. PMID: 36168537; PMCID: PMC9370080.
15. Olaiya O, Hyatt T, Mathew A, Staudaer S, Bachman Z, Zhao Y. Building connections between biomedical sciences and ethics for medical students. *BMC Med Educ.* 2022 Dec 1;22(1):829. doi: 10.1186/s12909-022-03865-y. PMID: 36456922; PMCID: PMC9714188.

16. Daryazadeh S. Application of narrative in medical ethics. *J Med Ethics Hist Med*. 2019 Oct 21;12:13. doi: 10.18502/jmehm.v12i13.1642.
17. Sullivan BT, DeFoor MT, Hwang B, Flowers WJ, Strong W. A Novel Peer-Directed Curriculum to Enhance Medical Ethics Training for Medical Students: A Single-Institution Experience. *J Med Educ Curric Dev*. 2020 Jan 22;7:2382120519899148. doi: 10.1177/2382120519899148.
18. Moher D, Shamseer L, Clarke M, Ghersi D, Liberati A, Petticrew M, Shekelle P, Stewart LA; PRISMA-P Group. Preferred reporting items for systematic review and meta-analysis protocols (PRISMA-P) 2015 statement. *Syst Rev*. 2015 Jan 1;4(1):1. doi: 10.1186/2046-4053-4-1.
19. Jadad AR, Moore RA, Carroll D, Jenkinson C, Reynolds DJ, Gavaghan DJ, McQuay HJ. Assessing the quality of reports of randomized clinical trials: is blinding necessary? *Control Clin Trials*. 1996 Feb;17(1):1-12. doi: 10.1016/0197-2456(95)00134-4. PMID: 8721797.
20. Tufanaru, C., Munn, Z., Aromataris, E., Campbell, J. and Hopp, L. Systematic Reviews of Effectiveness. JBI Manual for Evidence Synthesis, The Joanna Briggs Institute, 2020. <https://doi.org/10.46658/JBIRM-17-03>.
21. Beyg Rasoul, Mohsenpour Mohaddeseh, Jamali Jamshid, Saleh Moghaddam Amir Reza. A Comparison of the Effects of In-Person and Virtual Narrative Ethics Training on Nurses' Respect for the Patient's Privacy. *MEDICAL ETHICS*. 2022;16(47).
22. Imanifar N, VAGHAR SS, Afshar L, SHARIFZADEH GR. Comparison effect of teaching ethical principles using narrative ethics and lecture on the moral sensitivity of nurses. *Faṣḥnāmah-I akhlāq-I Pizishkī - i.E., Quarterly Journal of Medical Ethics*, 2015;9(31):95–125. <https://doi.org/10.22037/mej.v9i31.8988>.
23. Nasiriani K, Fazlojoo S E, Dehghani Tafti A, Mobar Y. The Effect of Virtual Narrative Ethics Education on Moral Sensitivity in Critical Care Nurses. *IJMEHM* 2020; 13:168-79. <http://ijme.tums.ac.ir/article-1-6180>.
24. Nasiryani K, Zamani N, Bahri A, Fazljoos SE. The Impact of Virtual Teaching of Ethical Principles in the Narrative Way on the Moral Intelligence of Nursing Students. *Iranian Journal of Medical Ethics and History of Medicine*. 2023;16(1):1-12. doi: <https://doi.org/10.18502/ijme.v16i18.15954>.
25. Imanifar N, Derikvand M, Vagharseyyedin SA. The effect of nursing ethics education through narration and lecture methods on patient advocacy by nurses in Iran in 2017: a quasi-experimental study. *Journal of Multidisciplinary Care*. 2022;11(2):83-89. doi: 10.34172/jmdc.2022.61.
26. Erbay H. Narrative medicine in ethics education: from theory to practice. *J Med Ethics Hist Med*. 2025;18.
27. Farid N, Nazari N, Jafar Malek N. The Heart of Healing: How Narrative Medicine Deepens Nursing – A Systematic Review of Clinical Trials. *IJMEHM* 2024; 17 (S1):1-3. URL: <http://ijme.tums.ac.ir/article-1-7005>.
28. Zurzycka P, Wojtas K. Selected aspects of narration in the integrated care of patients diagnosed with schizophrenia. *Nursing Problems / Problemy Pielęgniarstwa*. 2023;31(2):58-64. doi:10.5114/ppiel.2023.130712.
29. Xue M, Sun H, Xue J, Zhou J, Qu J, Ji S, Bu Y, Liu Y. Narrative medicine as a teaching strategy for nursing students to develop professionalism, empathy and humanistic caring ability: a randomized controlled trial. *BMC Med Educ*. 2023 Jan 18;23(1):38. doi: 10.1186/s12909-023-04026-5.
30. Marina N, Tamara R. Narrative and ethics education for nurses. *Journal of Medicine and the Person*. 2014 Dec;12(3):137-42.
31. Daryazadeh S. Application of narrative in medical ethics. *J Med Ethics Hist Med*. 2019 Oct 21;12:13. doi: 10.18502/jmehm.v12i13.1642. PMID: 32328226; PMCID: PMC7166250.
32. Sternschein R. Nursing a Healthy Balance in Medical Education: A Case for Interprofessional Education. *Acad Med*. 2020 Jun;95(6):826-827. doi: 10.1097/ACM.0000000000003207. PMID: 32079928.

33. Hosseini Choupani, S. S., Ghaffari, S., Jafari, H., Bazarafshan, M., Gholampour, M. H. Professional ethics and ethical challenges related to nurses and patients: A narrative review. *Journal of Nursing Reports in Clinical Practice*, 2024; 3(Issue 4): 383-389. doi: 10.32598/JNRCP.2403.1055.
34. Momeni G. Ethics Education via Narration for Students of Medical Sciences. *Iranian Journal of Medical Education* 2022; 22:223-25. <http://ijme.mui.ac.ir/article-1-5438> .
35. Olaiya O, Hyatt T, Mathew A, Staudaher S, Bachman Z, Zhao Y. Building connections between biomedical sciences and ethics for medical students. *BMC Med Educ*. 2022 Dec 1;22(1):829. doi: 10.1186/s12909-022-03865-y. PMID: 36456922; PMCID: PMC9714188.
36. Martin, D., Mörch, C. M., & Figoli, E. The notion of moral competence in the scientific literature: a critical review of a thin concept. *Ethics & Behavior*, 2022;33(6), 461–89. doi.org/10.1080/10508422.2022.2067163.
37. Meacham KR, Sloan I, Latessa RA. Practical tips for teaching ethics and humanism to medical students. *MedEdPublish* (2016). 2022 Mar 23;12:23. doi: 10.12688/mep.19022.1. PMID: 36168537; PMCID: PMC9370080.