Title: Health workers' ethics and professionalism in post-conflict Liberia

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What problem was addressed: The increasing concern over the need to pay attention to unethical behavior in the health professions in post-war Liberia has recently provoked interest and raised key research questions: What effects did the conflict have on the ethical and professional behavior of Liberia's health workers? What clusters of unethical behavior are being observed? How should these unethical behaviors be addressed?

Specifically, this study seeks to achieve the following objectives:

1. Identify factors that adversely influenced the behavior of health workers as a result of the conflict
2. Identify the clusters of unethical and unprofessional behavior that are common among health workers and students in the post-conflict period
3. Provide practical ways of addressing these issues

What was done: Employing a combination of qualitative and quantitative data collection methods (eight semi-structured interviews, five focus group discussions, and three surveys), this study looks at causes of unethical behavior in the health professions in post-conflict Liberia (2003 to 2015). The assumption is that certain unethical practices currently observed in the health professions are largely related to the impact or developments that occurred during the civil war (1989-2003).

The study contends that factors inducing unethical behavior in the health professions in post-war Liberia include war-induced poverty, poor and unregulated training, disregard for morality or immoral survival practices during the war, erosion of confidentiality between patients and health workers, poor justice system, poor information transfer, absence of professional indemnity, bureaucratization of relationships between colleagues, disregard for the dignity of health professionals, and declining motivation.

Unethical behavior includes physical and verbal abuse among health workers and with patients, sexual interactions among health workers and with patienst or patients' relatives, extorting money from patients or their relatives for materials already provided by the hospital, and being under the influence of alcohol or narcotics.

What was learned: The quantitative survey results revealed that 96% of students strongly agreed about the importance of ethics and professionalism being taught in their schools. In the three schools surveyed, ethics and professionalism training begins from year 1 with a minimum

of two hours per week. When it came to identification of student unethical and unprofessional behavior, less than 10% of students identified all the unethical and unprofessional behavior listed. Similarly, faculty unethical and unprofessional behaviors in and out of school were listed. Going to a bar with students was recognized as an unethical faculty behavior by 27% of students; of all the respondents only 29% recognized that being sexually attracted to a student is an unethical faculty behavior.

The magnitude of unethical and unprofessional behavior among health workers in post-conflict Liberia and the lack of recognition of such behavior by health workers in training require multi-level strategies to develop and sustain an ethically and professionally based health system. Systematic de-traumatization of health workers and students, training, impartial leadership, and functional ethics committees in health facilities are among recommended solutions for a post-conflict health system with high ethical and professional standards.