Empowerment and shared decision-making: Clinical principles to promote the adoption of an approach that values the dignity of risk

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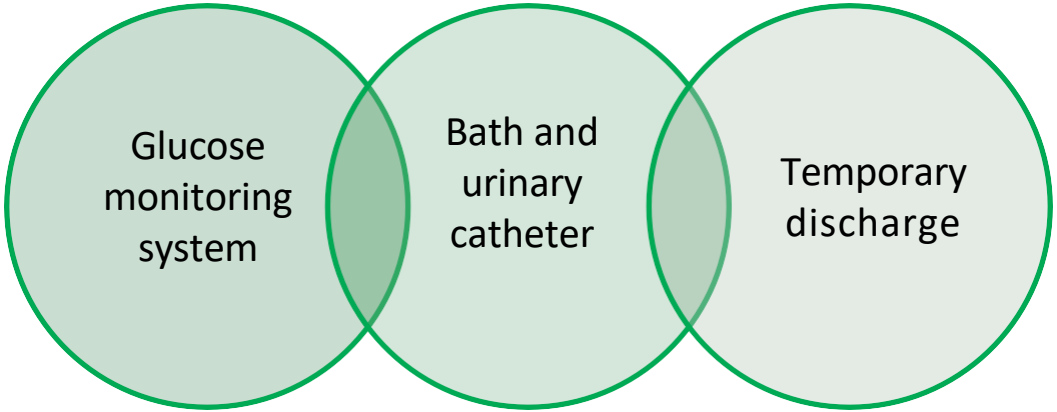
PRESENTATION OBJECTIVES

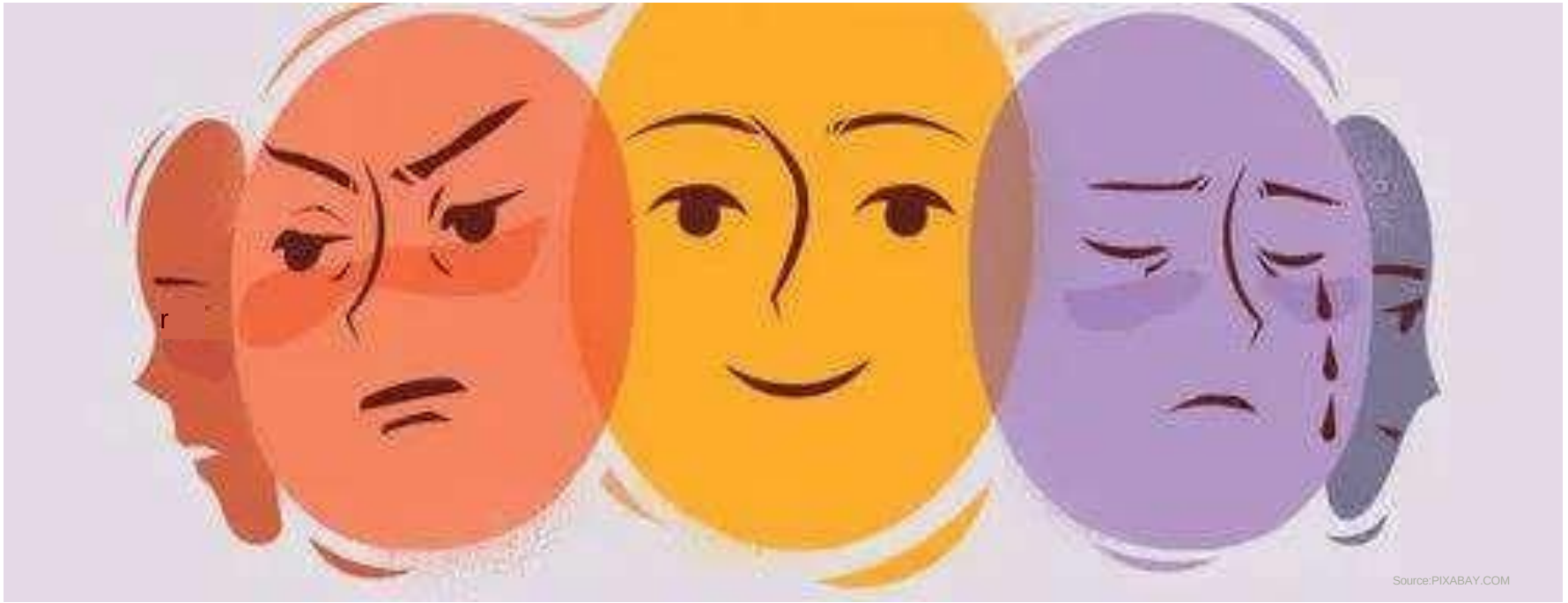
- Clinical application
- Empowerment/Dignity of risk
- Transferability
- Questions and comments

SUPPORT FOR THE ELDERLY PERSON IS BASED ON THEIR EMPOWERMENT, RESPECT FOR THEIR CHOICES, A CONSIDERED TOLERANCE OF RISK, RESPECT FOR ETHICS AND THE LEGAL FRAMEWORK, WHILE ENSURING THE QUALITY AND SAFETY OF CARE

MRS MARGUERITE TREMBLAY



Leblanc M., et al., (2025)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DIGNITY OF RISK

Respect the right of the person to make decisions deemed imperfect by considering the risks and benefits in shared decision-making process.

Autonomy/Autodetermination

Respect for the person

Balance between safety and freedom

Free and informed consent

Leblanc M., et al., (2025), Tarsney, (2022)

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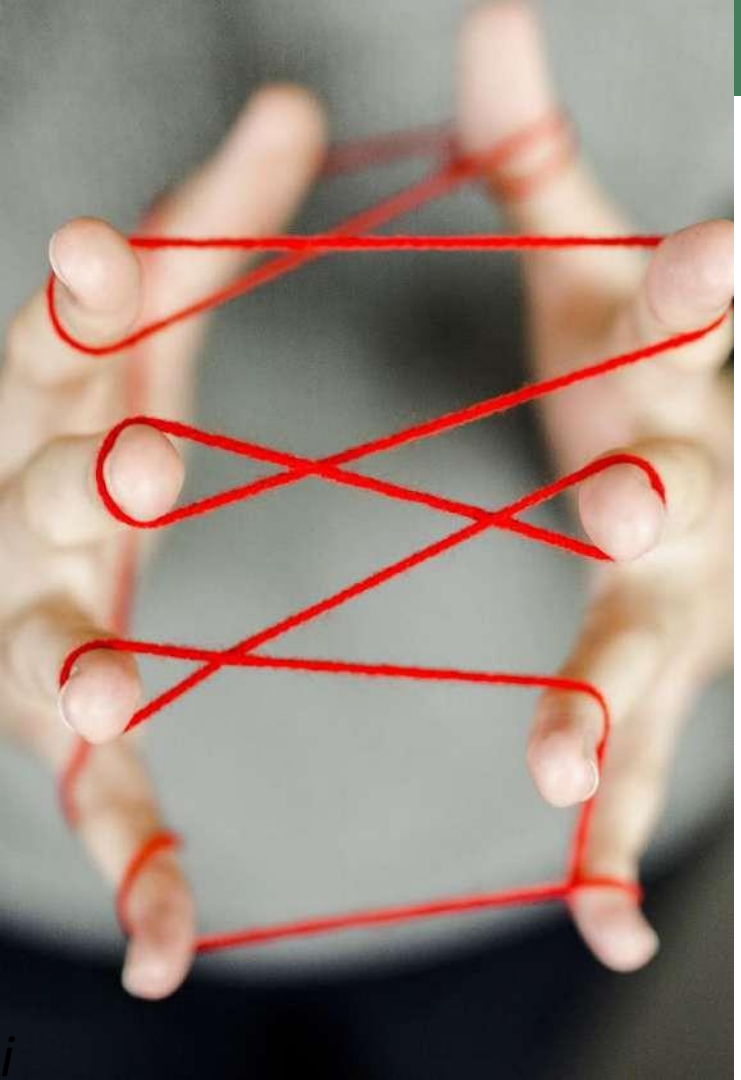


EMPOWERMENT

"*Process by which a person, or a social group, acquires control over the means that allow them to become aware, strengthen their potential, and transform themselves with a view to development, improvement of their living conditions and their environment.*"

(Mailhot-Bisson, 2025; Tessier et al., 2015)

FROM A PERSPECTIVE OF AUTONOMY

Paradigm of care	"Do for"	"Do with" or "Be with"
Evaluation	Based on deficits Focus on what the individual is unable to do	Physical and psychological needs Person's abilities
Response to needs of the user	Determined by the clinicians	Determined by the user and their family Involvement in decisions Impact on trust
Care and services	Provided according to a substitution logic Little emphasis on skills	Around the person's needs/expectations
Impact on the services to elderly people	↓ Quality of life Refusal of service $ Cancels the benefits of home care	↑ Quality of life Participation in care Efficiency $ Resumption of maximum autonomy

(Mailhot-Bisson, 2024)

WHAT IS THE RECIPE?

General components of empowerment:

1. Global multidimensional structured assessment
2. Goal-directed planning determined by the user
3. Interventions oriented toward precise goals determined by people's needs

- Flexible and adapted according to progress
- Philosophy: we analyze and rethink the task

(Araujo de Carvalho, 2017)

POINTS TO REMEMBER

- Think of strategies aimed at conservation of energy
- Beyond the person, the environment and assistive devices
- Reduce sensations unpleasant (pain, fatigue…)
- Encourage the expression of fears
- Encourage trying things by herself before intervening
- Assess the person's "state"
- Break tasks into small steps
- Simple explanations and not too long. Validate understanding

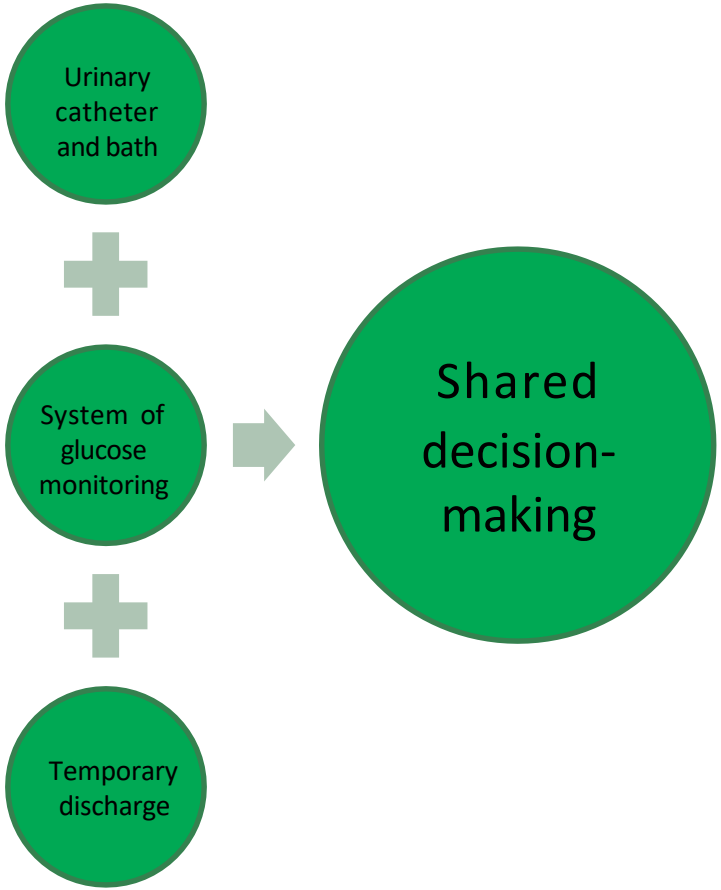
(Araujo de Carvalho, 2017)

CLINICAL APPROACH

Expressed desire / gap	Stakeholders	Evidence-based data	Risks and benefits
Practical wisdom	Risk tolerance	Tactical representation	Shared decision-making

Leblanc. M., et al., (2025)

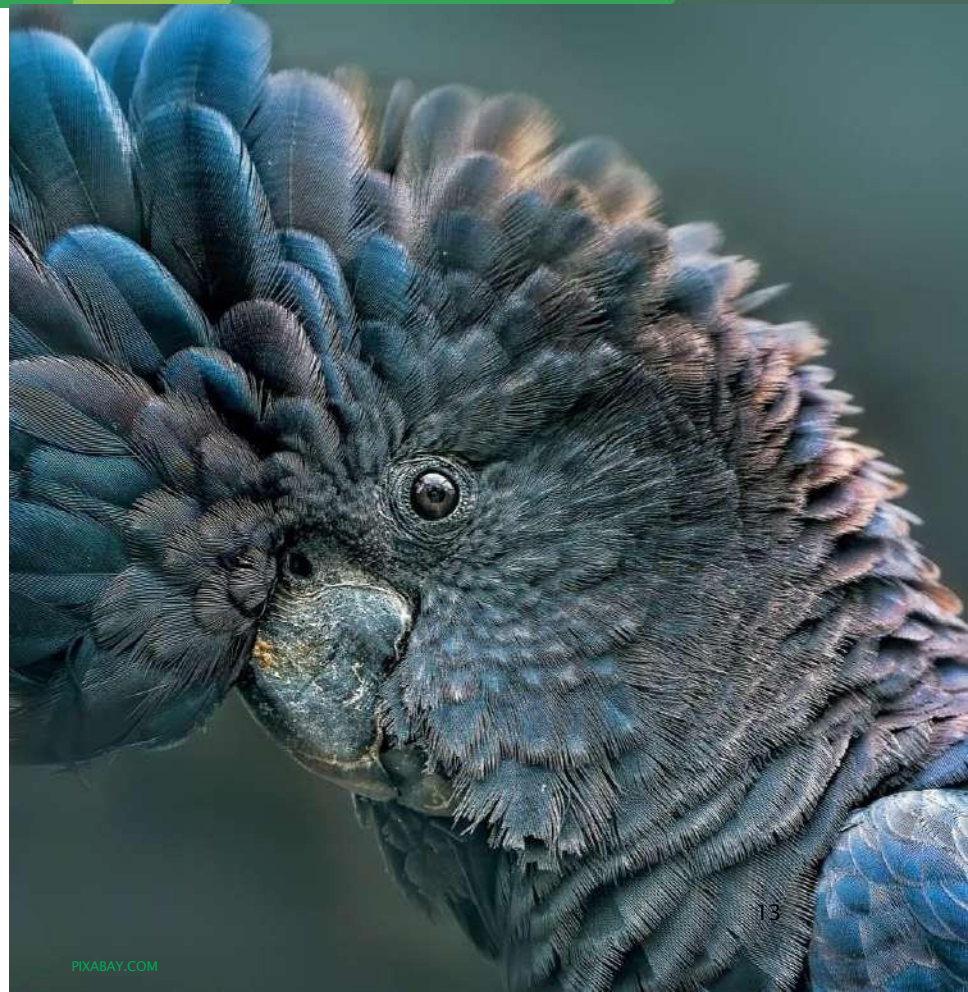
RESULTS



Leblanc M., et al., (2025)

In summary

- Respect for preferences
- Interdisciplinarity
- Risk tolerance
- Practice supervision
- Ethical and legal
- Practical wisdom
- Advocacy



Leblanc M., et al., (2025)

The housing environment cannot be free from any risk!

How to transpose this approach into your environments?

THANK YOU

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