Critical reflections on patient empowerment, occupational therapy, and occupational justice

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Introduction

- My interest in this topic
  - Witnessing a sense of powerlessness among my patients
  - Not knowing how to help, i.e. promote empowerment
  - EMPOWERMENT IS ESSENTIAL TO CLIENT-CENTERED PRACTICE
  - EMPOWERMENT IS A CORE ELEMENT OF OCCUPATIONAL JUSTICE

Power + Participation = Health

Necessary social and material resources

Engagement in meaningful occupations, i.e. occupational justice

Disconnect

Empowerment Theory

(Rappaport, 1990)

- **Critical awareness**
  - Understanding the systems of power that control one's ability to act
- **Perceived control**
  - Perception of one's ability to exert power in a given situation
- **Citizen participation**
  - Having a valued and legitimate role in decision-making
  - Equal involvement in community activities

Patient empowerment

(Funnell & Anderson, 2004)

- "helping patients discover and develop the inherent capacity <u>to be responsible for one's own life</u>"
- "a complex experience of <u>personal change</u>"
- "a method of <u>helping patients select and make changes </u>in their diabetes self management"
- "to promote <u>autonomous self-regulation </u>so that the individual's potential for health is maximized"
- "a social process of recognizing, promoting and <u>enhancing people's ability to meet their own needs.</u>"

Q: How do patients define empowerment?

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Control

Psychological coping

Support

Participation

Legitimacy

Knowledge

Trust
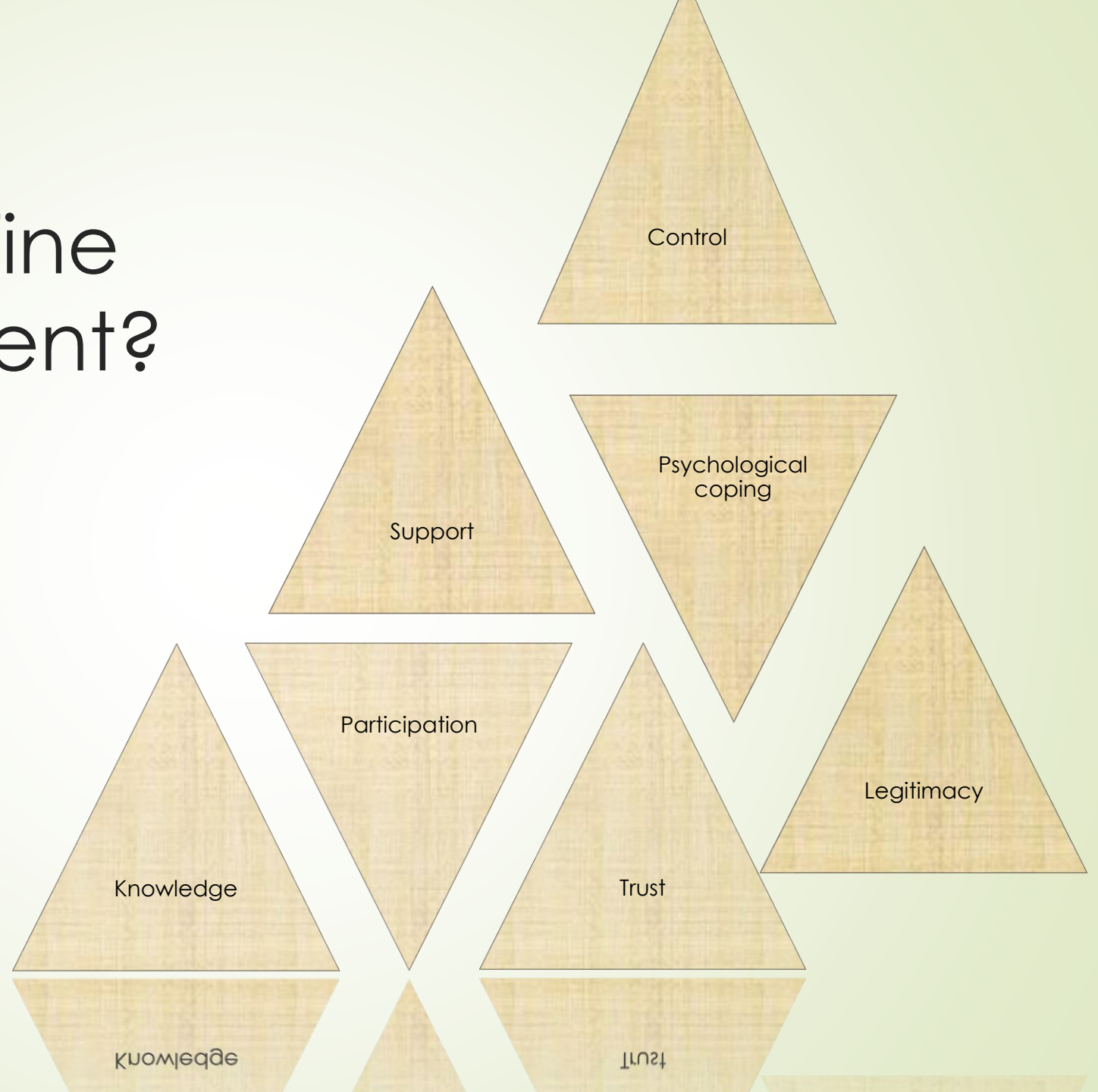
Method & Results

- Systematic literature review on patient empowerment
  - Qualitative research
  - Patient Perspective
- Results
  - 13 articles
  - 11 investigator teams
  - 9 countries: UK, Norway, Australia, Taiwan, New Zealand, China, Iran, Belgium, Italy
  - 205 patients total
- Analysis
  - Meta-study method for qualitative synthesis
    - Meta-theory
    - Meta-data analysis
   - Meta-method

Control

- Empowering
  - Shared decision-making
  - Personal responsibility for health
  - Control over daily life
  - Control over mind
  - Control over symptoms

- Disempowering
  - Uncertainty
  - Coercion

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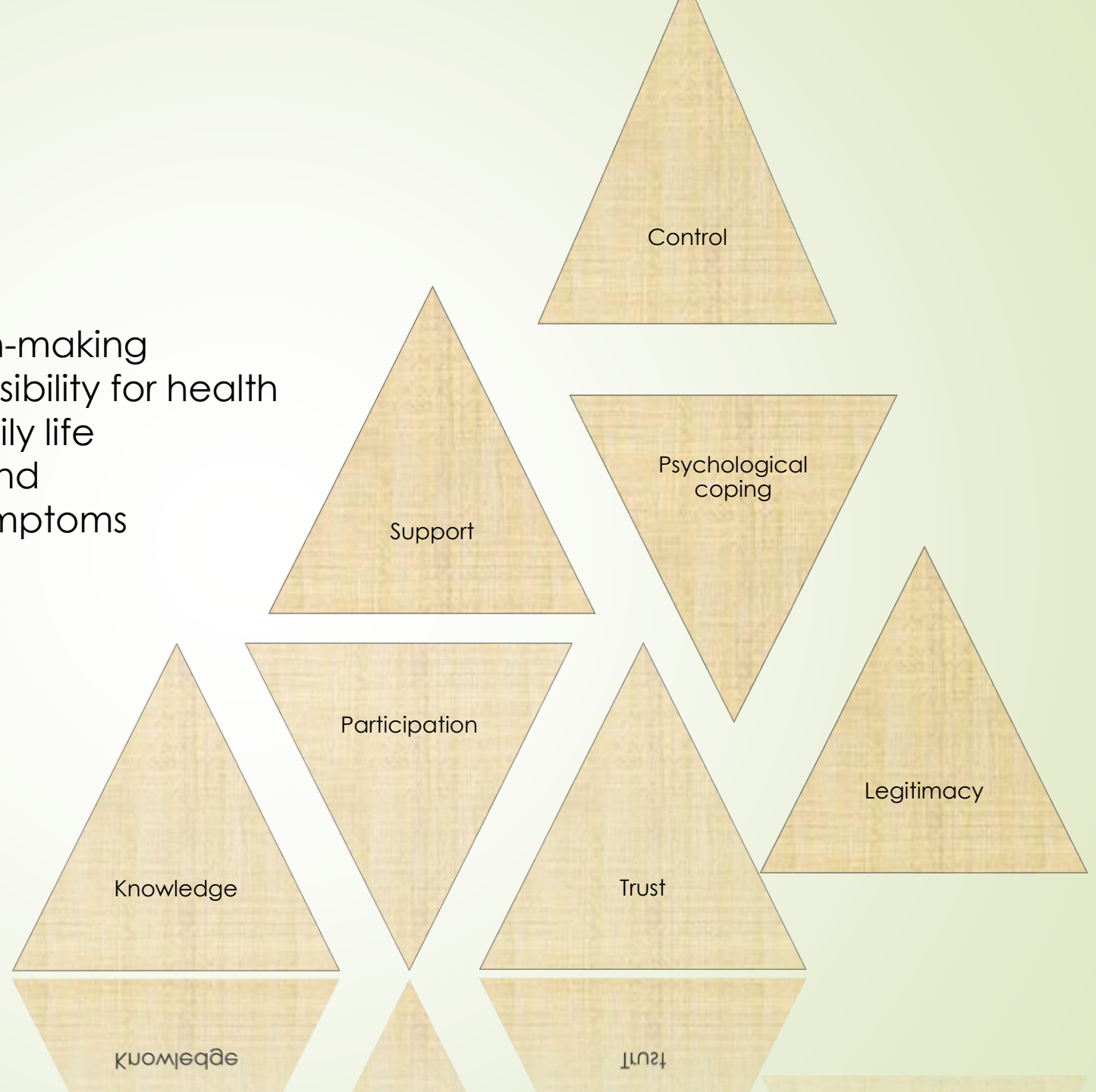
Psychological Coping

- Empowering
  - Acceptance
  - Planning for the future
  - Positive reframing
  - Faith
  - Meaning making
  - Hope
  - Identity integration

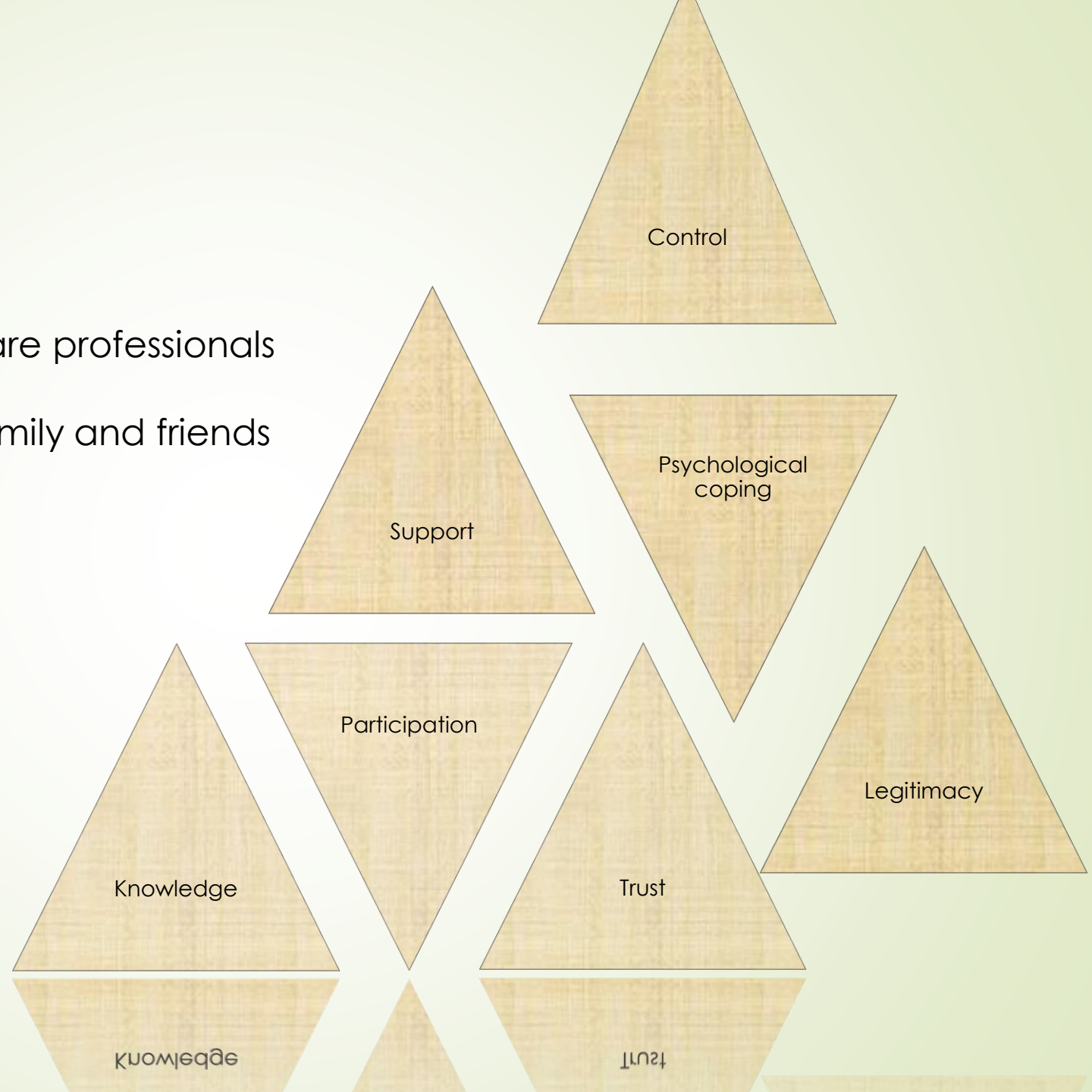- Disempowering
  - Fear
  - Stress

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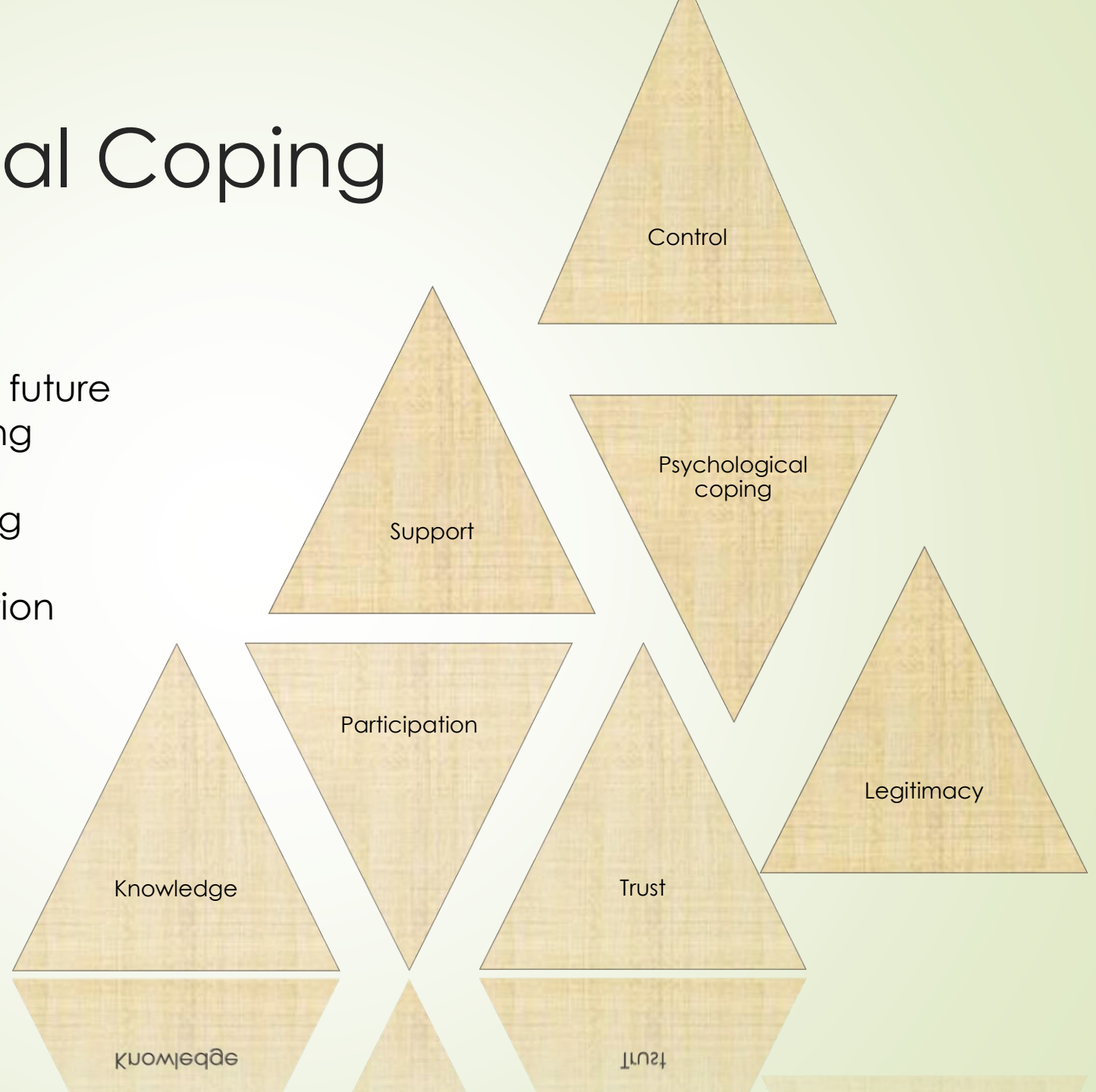
Trust

Legitimacy

- Empowering
  - Listening
  - Kindness
  - Respect
  - Responsiveness

- Disempowering
  - Objectification
  - Paternalism

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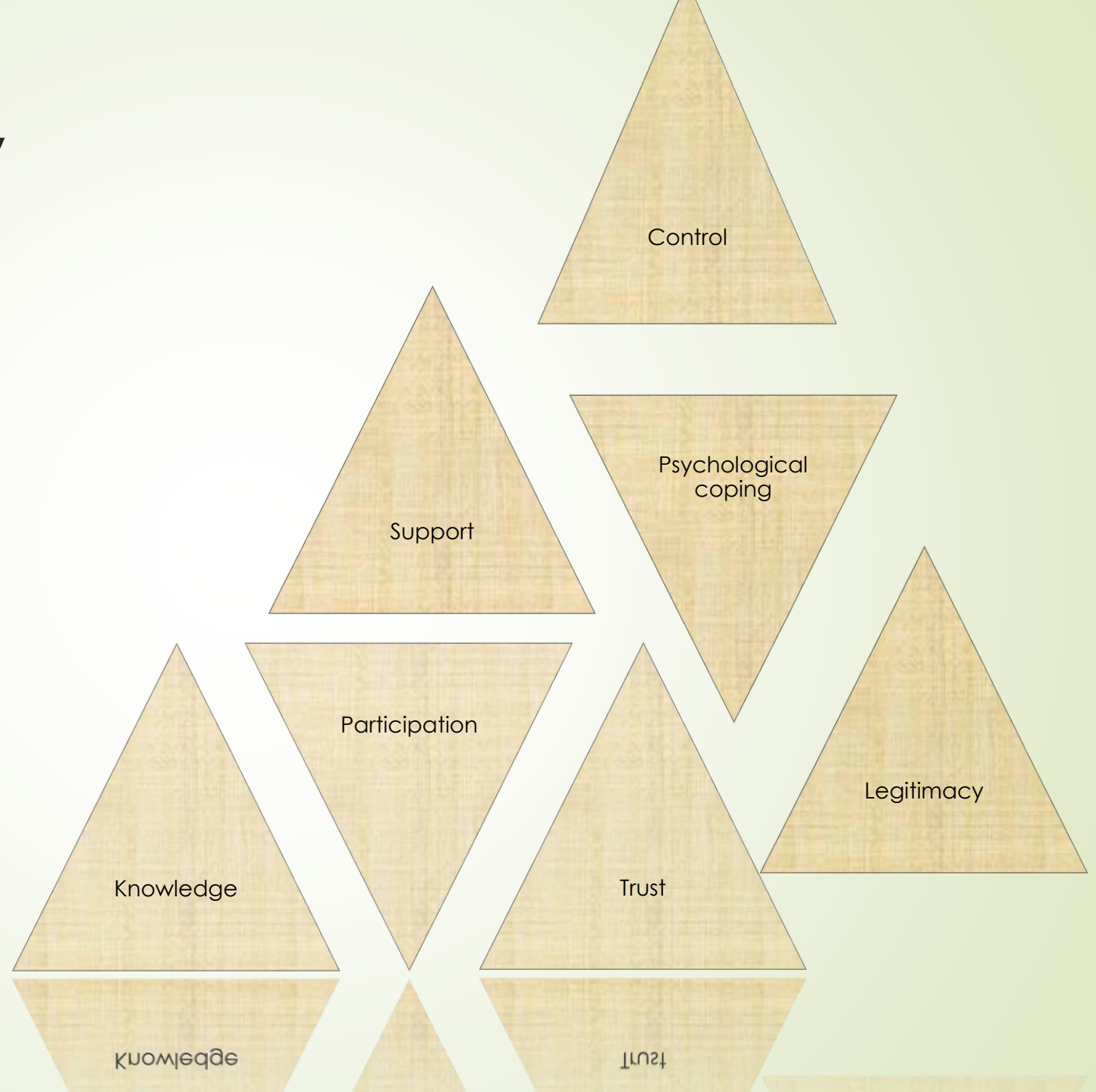
Knowledge

Trust

Support

- Empowering
  - Trust in healthcare professionals
  - Peer support
  - Support from family and friends
  - Taking time

- Disempowering
  - Isolation
  - Stigma

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Knowledge

- Empowering
  - Strong understanding of illness
  - Information available and accessible
 - Explanations clear

- Disempowering
  - Conflicting information
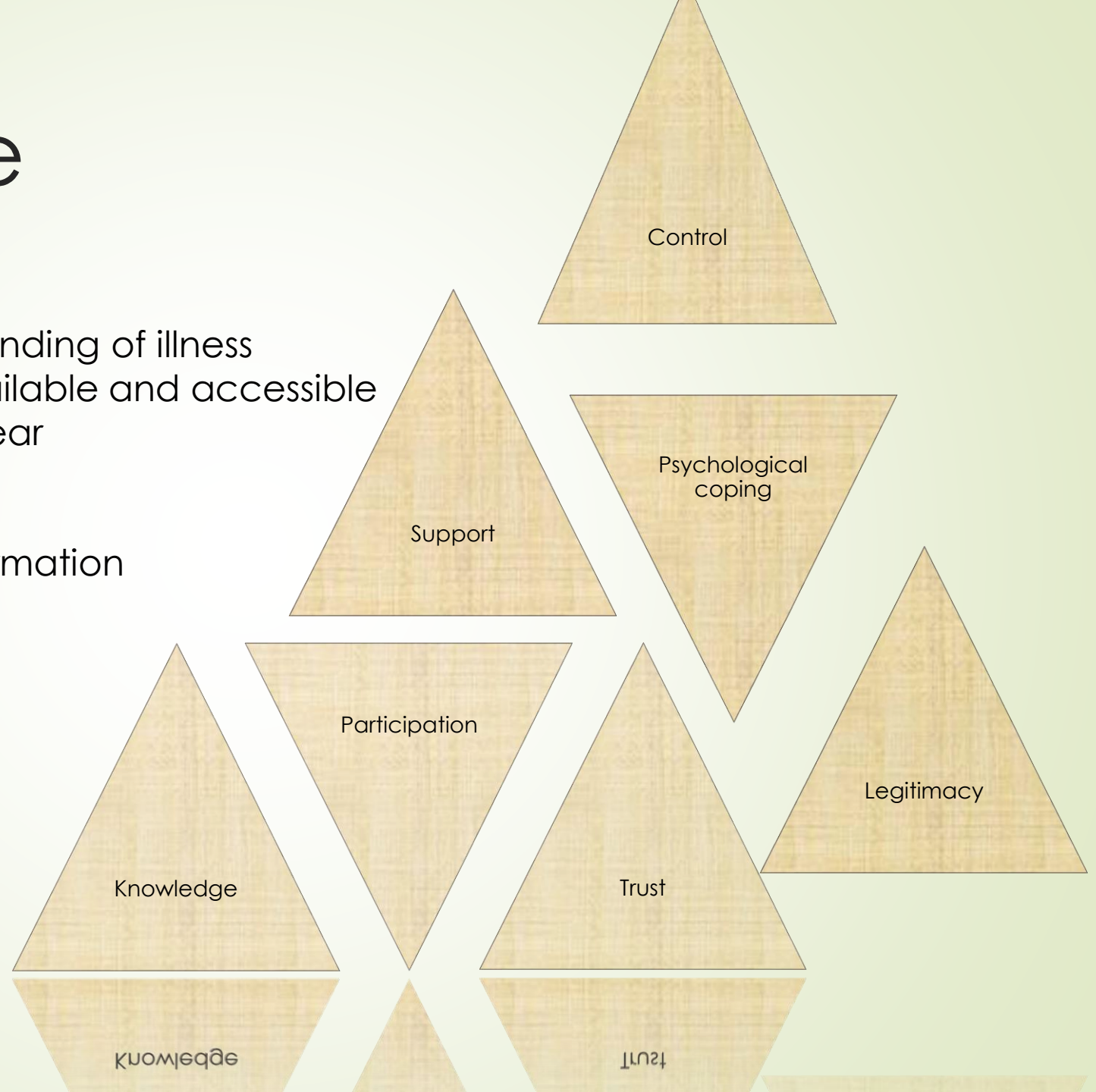
Participation

- Empowering
  - Maintaining roles
  - Engagement in meaningful activity

- Disempowering
  - Boredom

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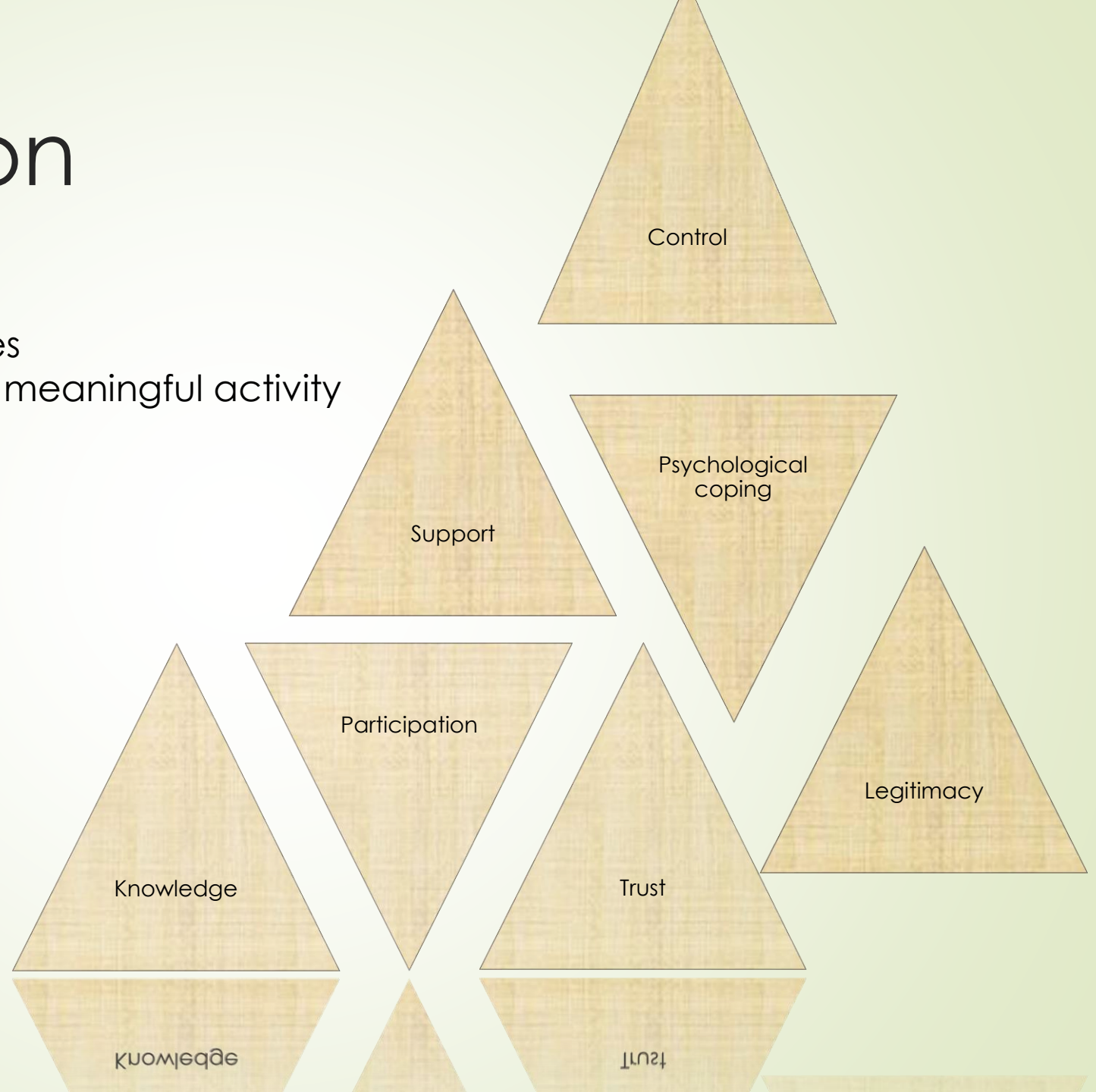
Meta-method

Meta-theory

- Most questions were geared towards **INDIVIDUAL ATTRIBUTES**

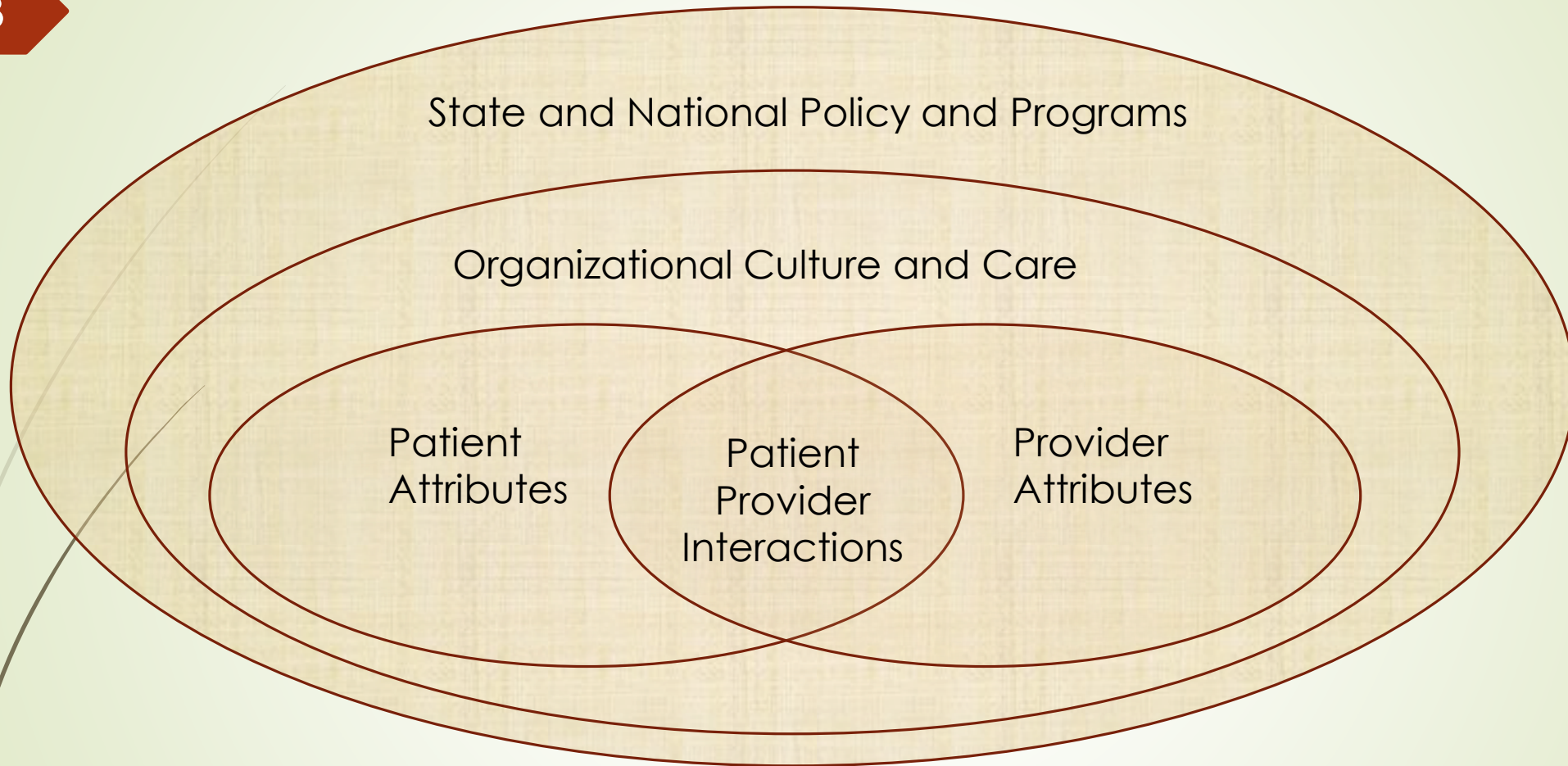- There was a relationship between questions asked and secondary coding of results
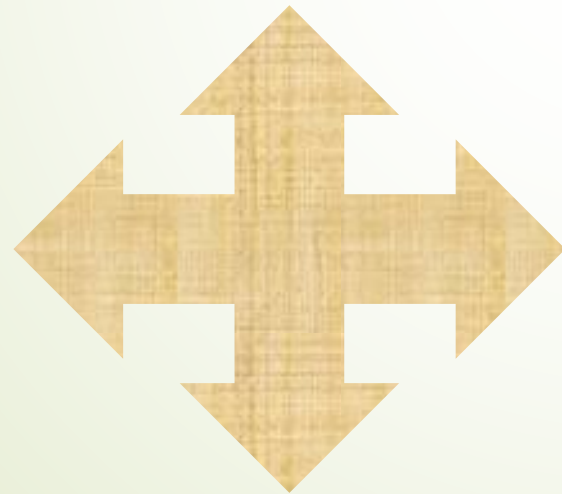
- Most researchers did not describe a guiding theory

- The definitions they used tended to identify individual and interpersonal aspects of empowerment, but were **MISSING STRUCTURAL ELEMENTS**

- In community psychology, these elements would be considered citizen participation

Empowering healthcare settings ➡
Patient empowerment and engagement ➡
Greater opportunity to achieve client-centered practice ➡
Greater opportunity to promote occupational justice

Thank you!

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