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TRANSCENDING RESPONSIBILITY

DEVELOPING A NEW INTERDISCIPLINARY EDUCATIONAL PROGRAM

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AGENDA

- Definitions
- Starting point: PhD Research
- Conflict between professionals
- Transcending Responsibility
- Creating a interdisciplinary educational program to increase the knowledge of future professionals working at the intersection of health, wellbeing and law in the urban environment of Amsterdam

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Definitions:


- **Multidisciplinarity** draws on knowledge from different disciplines but stays within the boundaries of those fields (NSERC, 2004).
 Multidisciplinarity is like a salad bowl, such as a vegetable platter or mixed salad, in which the ingredients remain intact and **clearly distinguishable**.
- **Interdisciplinarity** analyses, synthesizes and harmonizes links between disciplines into a coordinated and coherent whole (CIHR, 2005).
 Interdisciplinarity is like a melting pot, such as a fondue or stew, in which the ingredients are only **partially distinguishable**.
- **Transdisciplinarity** integrates the natural, social and health sciences in a humanities context, and in so doing transcends each of their traditional boundaries (Soskolne, 2000).
 Transdisciplinarity is like a cake, in which the ingredients are **no longer distinguishable**, and the final product is of a different kind from the initial ingredients.

From: Bernard C.K. Choi, Anita W.P. Pak (2006). Multidisciplinarity, interdisciplinarity and transdisciplinarity in health research, services, education and policy: 1. Definitions, objectives, and evidence of effectiveness. Clin Invest Med, 29 (6): 351-364.

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PHD RESEARCH

- The role of coercion in the admission process of people suffering from Korsakoff's syndrome.
- What is society's role with respect to these patients?
- Do we have to interfere in these patients life or should they be left alone?
- What can be understood as good care during involuntary admission processes?
- Who are responsible?



Hooff van den, S.L. 2015. *Transcending Responsibility. Empirical and theoretical perspectives on involuntary admission of patients suffering from Korsakoff's syndrome (Dissertation).*

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HARMFUL USE OF ALCOHOL


The question of interest for this presentation:
How to deal with the different responsibilities?

Some background of the Korsakoff's syndrome:

- Serious lack of thiamine due to prolonged bad food or stopping eating completely
- Self-neglect
- Memory disorders
- Confabulation
- Orientation problems in time and space
- No awareness of illness
- Uncertain and afraid of failure
- Central executive dysfunction

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FAMILY RESPONSIBILITY



- Preventing death, further mental and physical deterioration, and loss of dignity: to get good care for their relative;
- need for interference;
- convincing healthcare professionals of the urgent need for specialist care.

'They (doctors) are proud people. Fear of being proved wrong. I have turned over the whole hospital. I became very angry (...). And the doctor saw it all and saw how very ill she (her mother) was, he just let her go home. He said: 'the lady here just may decide for herself'.

If my mother thinks that she can go on drinking her bottle of wine in the hospital, what is the doctor thinking when he sent her home? That everything will be okay at home?' (daughter)

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Table 2. A model of "imposing care" from the family carers' perspective.

| Aspects of imposing care | Loss of dignity, life-threatening excessive drinking | | | | Nursing home admission |
|--|--|---|---|---|--|
| | Phase 0 No intrusion in the life of the relative | Phase 1 Intrusion in the life of the relative | Phase 2 Insistence to get care for the relative | Phase 3 Determined to get care for the relative | |
| 1. "Convince myself" 2. "Violate the relative's autonomy." 3. "Persuade the healthcare professional" | Carers have to learn to recognize symptoms of severe alcoholism. | Carers have to acknowledge the seriousness of the situation and convince themselves that they need to start imposing daily care on their sick relative. | Carers have to convince healthcare professionals that home care assistance is needed for the relative to maintain an acceptable dignified life. The relative must give up part of his autonomy. | Carers have to realize that the relative will die when no care is offered. Overruling the relative's autonomy, and "fighting" for an involuntary admission seem the only options to prevent further deterioration and dignity loss. | Carers have to cope with the involuntary admission. They will arrange the most appropriate daily care. |

Hooff van den, S.L. & Goossensen, A. 2015. Conflicting Conceptions of Autonomy: Experiences of family carers with involuntary admissions of their relatives. Ethics and Social Welfare, 9 (1): 64-81.

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MEDICAL RESPONSIBILITY




- Moral obligation to act in the patient's best interest and to ensure that the patient receives the best possible care.
- Preventing further damage.
- Do what is good consonant with their clinical expertise.

"As a healthcare professional I am obliged to offer help, with or without being requested or asked for, when people are in need. The question is: what is need?" (healthcare professional)

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INVOLUNTARY ADMISSION




- DUTCH COMPULSORY ADMISSION ACT (BOPZ)
 - New acts (2020):
 - Compulsory Mental Health Care Act (In Dutch: Wet verplichte Geestelijke Gezondheidszorg); intended for psychiatric patients
 - Care and Compulsion Act (In Dutch: Wet Zorg en Dwang), intended for patients suffering from an intellectual disability or psychogeriatric disorder such as dementia.
 - NOT EASY: CRITERIA BOPZ
 - Considerable **danger** to oneself or others due to the person's **psychiatric illness**
 - **No alternatives** available
 - The patient does not agree with admission

Hooff van den S.L. 2018. New Dutch Legislation and Preventive Coercive Home Health Care for Excessive Alcohol Consumers. International Journal of Mental Health and Addiction, First online: 30 October 2018. <https://doi.org/10.1007/s11469-018-0020-8>

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LEGAL RESPONSIBILITY



- preventing harm to others;
- protecting individuals from undue interference in their independent life: respecting their rights;
- competent addicts who refuse care should be left alone.

*" Sometimes there is an argument in Court, because the patient claims: I just want to drink myself to death, I do not want to be hospitalized'. That is interesting. Is it possible to give this person the opportunity to reach this decision? I think so. I will argue for his **right of self-determination and free will.**" (legal professional)*

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Patient perspective

- See themselves as competent autonomous people, free to make decisions about one's own life, regardless of what others might decide.


*"What I really don't like, is what they do to me, by imposing that juridical authorization. As soon as I get free, I dug in my heels and take a drink, I have deserved it. Just for fun. I will show them that it **did not work, that treatment.** I will have my drink." (patient)*




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DEALING WITH DIFFERENT PERSPECTIVES AND RESPONSIBILITIES

- Interdisciplinary field, with different perspectives on the involuntary admission process of patients who lack awareness of illness.
- This results in **Tensions and Challenges** due to these differences in perspective and responsibility.
 - healthcare professional
 - family carer
 - legal professional and
 - the patient




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CONCLUSION


All actors look at dilemmas in different ways, which results in tensions:


- the moment of recognition of the problem;
- the moment of feeling responsible;
- the moment of needing a coerced intervention in the patient's life;
- the reason for an involuntary admission.

Understanding of the different responsibilities.

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TRANSCENDING RESPONSIBILITY



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WHAT DOES THIS IMPLY?

- More flexible notion of responsibility: **transcending responsibility**
- Try to transcend (going beyond) the own professional responsibility to connect with the **others' perspective** on responsibility.
- This asks for a re-examination of assumptions and values, critical thinking and new creativity.
- Question and reframe own assumptions or habits of thought.
- Professionals need to **reflect** critically on their own responsibility.

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Reality can be so complex that equally valid observations from differing perspectives can appear to be contradictory.

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INTERPROFESSIONAL WORKING

Necessary:

- Work together
- Not blaming the others for having another worldview
- Be reflective
- Reach out to the other

This will lead to a **shared responsibility** for the problem.

Students need to practice this!

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NEXT STEP: DEVELOPMENT OF A NEW TEACHING PROGRAM

In the Amsterdam metropolitan society, legal and healthcare professionals (including social workers) are increasingly confronted with issues at the **intersection of (health)care and justice.**

Special areas of interest are:

- the problems surrounding people suffering from a mental illness,
- youngsters that cause nuisances of themselves on the streets and
- homeless people.

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The approach to this kind of problems requires a **interdisciplinary approach**. This means that healthcare, social welfare and legal professionals have to work together, for instance to apply for involuntary care.

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TEACHING PROGRAM

In which students from different faculties:

- work together on real time cases;
- receive interdisciplinary training and courses;
- learn what is meant by 'Transcending Responsibility' *(be open to the perspective of the others professionals and to create a new shared responsibility)*

The idea is to familiarize students with:

- > **the legal contexts** in which they have to operate (for instance themes related to pressure and coercion) as well as
- > **the welfare and care context** in which the client/patient is situated (the care from neighbourhood teams, youth care teams or mental health care teams).

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INTERDISCIPLINARY TEAMWORK

- Required in health and social care, such as primary health care, education in health care,
- Training of medical, nursing students and legal students
- Such teamwork can offer a coordinated range of skills, expertise and clinical experience in a setting of interprofessional support.

Interdisciplinarity
Why scientists must work together to save the world

POSTER DOWNLOAD

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Discussion

In this project, we like:

- to **work together** with and learn from the expertise of other members of the consortium;
- to **enhance the quality** of this educational project;
- to be inspired, informed about and discuss **innovative approaches** which make **interdisciplinary** educational programs possible.

So please contact me!
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