



Paternalism in Community health care

A cautionary tale

Presenter: Cara Corvino RNBN
Case Coordinator with Respiratory Home Care
Winnipeg, MB

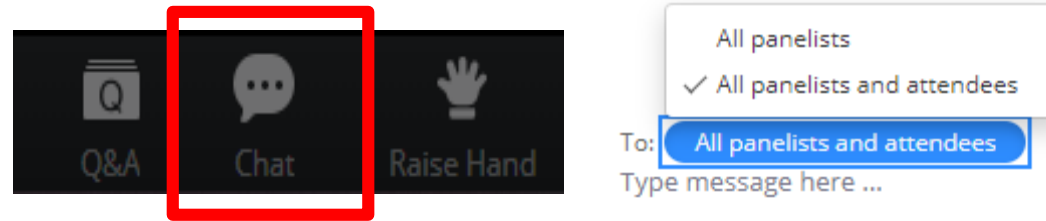
Land Acknowledgment

- ▶ *I acknowledge that I am on ancestral lands, Treaty 1 territory, traditional territory of the Anishinaabeg, Cree, Oji-Cree, Dakota, and Dene Peoples, and on the National Homeland of the Red River Métis.*



Webinar Housekeeping

- ▶ Everyone will be muted except the host and moderator
- ▶ Ask questions through the Zoom chat box



- ▶ All webinars will be recorded and posted on [Regional Ethics Network](#) website
- ▶ Evaluation to follow
- ▶ Next month's speaker





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OVERVIEW

- What is paternalism?
- History of paternalism in healthcare
- Types of paternalism
- Paternalism in Public and Community Healthcare
- Risks of paternalism
- Case Study
- Lessons Learned
- Finding the Balance
- Questions



WHAT IS PATERNALISM?



- ▶ When the decision making power of an individual is limited by a person in authority
- ▶ Paternalism in healthcare - When a health care practitioner makes healthcare decisions that is in a patients best interest even if it is against their wishes
 - ▶ Used to prevent people from unhealthy behaviours or from making decision that are not in their best interest.
 - ▶ Overrides the values or choices of the individual
 - ▶ Paternalism focuses on the ethical principal of beneficence over an individuals autonomy.

HISTORY OF PATERNALISM IN HEALTHCARE



- ▶ In the past paternalism was considered standard practice
 - ▶ Seen as necessary for doctors to make the best decisions in treating their patients.
 - ▶ Doctors and health care professionals were seen as the decision maker and having the knowledge of what is the best course of action for the patient.
 - ▶ Doctors were treating the symptoms of illness and not the patient.
- ▶ Shift to patient centered care
 - ▶ Importance was placed on communication with and understanding of the patient
 - ▶ By the end of the 20th and 21st century, there was a shift away from paternalism in the West.

Types of Paternalism



- ▶ **Soft Paternalism**

- ▶ Take away an individual's ability to make choices - such as in preventing self-harm

- ▶ **Strong Paternalism**

- ▶ Take away an individual's ability to make choices to benefit the patient - such as a treatment or procedure

THE ROLE OF PATERNALISM IN COMMUNITY HEALTHCARE

Public Health

- ▶ Focus is on the health of the public
- ▶ Ethical decisions and values are based on the good for the community
- ▶ Providing public health services and increasing health literacy to individuals in improve overall health of a community. - Ex: immunizations

Home Care Services

- ▶ Home care services are specific to each individual client to assist in living safely at home
- ▶ Social networks can impact how care is received and provided
- ▶ The limitation of someone's home may mean a home care worker has to adjust the care the client is requesting



RISK OF PATERNALISM

- ▶ Potential to create feelings of moral distress amongst health care workers.
- ▶ May require ongoing community support or assistance.
- ▶ Can erode trust of an individual
- ▶ Overriding an individuals ability to make a competent choice even if it's a poor choice.

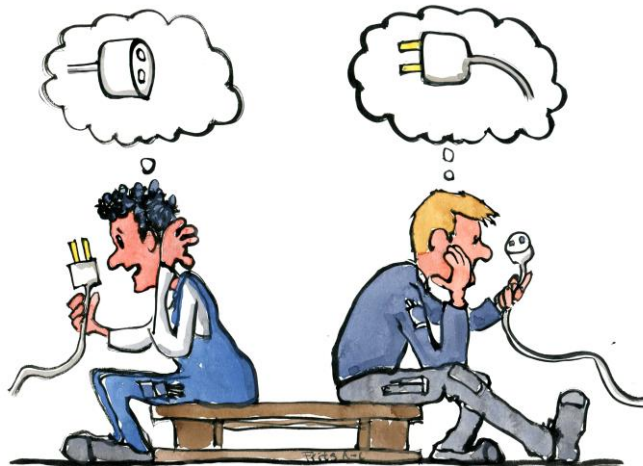


CASE STUDY

- ▶ Mrs. A is a 70 year old women who has rented a room on the second floor of a rooming house for 15 years. The only way to access or exit the second floor is a narrow staircase. Mrs. A uses a wheelchair in her room but is not able to propel the wheelchair independently outside of her suite. There is a shared bathroom on the second floor, but it is not wheelchair accessible. Mrs. A has Home Care involved for home care equipment such as a hospital bed and commode. She use to have home care assist in light house keeping but over time it had to be cancelled due to the deteriorating condition of the suite. There have been several unsuccessful attempts of her landlord to evict Mrs. A due to the disrepair and infestation in the suite and Mrs. A not being able to leave the suite for fumigation or repairs.
- ▶ The Home Care Case Coordinator (CC) has discussed housing options with Mrs. A multiple times, but Mrs. A always explains she does not want to move due to the social connections she has in the rooming house and surrounding area, along with not being able to take her cat if she moved. The CC has had a long trusting professional relationship with Mrs. A and over time the CC has involved multiple community supports that are made up of multi disciplinary teams. These supports have provided Mrs. A social supports, health care and housing options. Although Mrs. A refuses to leave the rooming house, she often shares stories with the CC regarding unsafe tenants in the rooming house, harassment and financial abuse from the landlord, challenges with her water freezing in the winter and not being able to access a bathroom. Mrs. A's competency has been assessed and she is found competent for all decision making.
- ▶ After multiple meetings and lengthy conversations the CC and other community agencies involved with Mrs. A have decided that for Mrs. A's own safety, health and ability to receive home care supports she should be moved to subsidized housing. This is directly going against Mrs. A's wishes. The team tirelessly works together to move Mrs. A from her suite and into an apartment. Unfortunately due to her limited housing options the apartment is in another area of the city, does not have a wheelchair accessible shower and is not pet friendly.

DISCUSSION/LESSONS LEARNED

- ▶ The ongoing need for social and community supports.
- ▶ The limitations of moving to a different area of the city and in a different living environment.
- ▶ Clients mental health and ability to process the move.
- ▶ The complex social supports that the client had in her previous living environment.
- ▶ Erosion of trust with social support and health care supports.



FINDING THE BALANCE

How much Paternalism is the right amount?

- ▶ Balancing the ethical principals of beneficence and autonomy
- ▶ Ensuring that patients or client's are making an informed choice
- ▶ Harm reduction strategies
- ▶ Relational autonomy



QUESTIONS

