

Editorial

Brain health and value diversity: A new implementation field for values-based practice?

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Brain health has recently emerged as an overarching concept encompassing cognitive, sensory, social-emotional, behavioral, and motor aspects of brain functioning, enabling individuals to achieve their potential for both health and wellbeing over their life course, independent of the presence or absence of disease.¹ It is contingent on a continuous, complex interplay between interconnected determinants related to physical health, healthy environments, safety and security, learning and social connection, and access to quality services. Even though responsibility for optimizing brain health can be taken at an individual level, brain health is heavily influenced by determinants far beyond the control of individuals and their families. For instance, protection from abuse and maltreatment or equitable access to health services depends on interacting social, financial, and political factors that can often only be minimally influenced by individual or small group initiatives.^{2,3} In addition, the voice of many people, including the very young, the very old, the sick, the disadvantaged, and those who live in poverty, may not be sufficiently influential, even though the decision-making process crucially affects the brain health and quality of life for these individuals. The breadth of determinants of brain health makes brain health a terrain that is justifiably shaped by a plethora of stakeholders with highly diverse values and hence potentially conflicting interests and albeit different degrees of power. Consequently, decision-making in such contexts embodies a thorny process that may render the negligence of the values, viewpoints, and perspectives of those directly involved in a given decision, particularly when the individual capacity to advocate for oneself and the willingness of society and governments to act on behalf of their citizens, are low.

Values-based practice (VBP) is a toolkit for balancing interests, wishes, and values in contexts characterized by diverse values, which may be valuable in decision-making related to brain health.⁴ The implementation of this toolkit in different healthcare fields (e.g., occupational therapy, orthopedics, primary care, psychiatry, psychology, radiotherapy) has been proposed, and training materials for healthcare professionals have been developed.⁵ VBP aims to include the differences in values, viewpoints, and perspectives of those directly concerned with a given decision so that communication and shared decision-making are facilitated. Based on the legacy of the Popperian open society,⁵ VBP treats values in the same way that democracy treats ideas and human voices. Hence, this decision-making toolkit is neither restricted to ethical codes nor prioritizes one value over others. It also does not endorse certain values while excluding others, provided the values in play are compatible with legal, regulatory, and bioethical frameworks. The emphasis of VBP is on good processes rather than predetermined 'correct' outcomes.^{6,7} Respect for differences between stakeholders results in the creation of a culture of mutual responsibility and in building up a positive relationship between all those concerned, so that everyone feels a sense of ownership of the decision made.^{4,6} Of note, according to VBP, the perspective of the health service user or of the individuals or community seeking to protect their brain health is the ideal starting point for any decision. This approach minimizes the negligence of the views, needs, values, competencies, resources, and aspirations of those trying to optimize their brain health in contexts where powerful socioeconomic and further interests may be at stake.

The 'good process' of VBP is safeguarded by ten principles.⁴ Four of them pertain to clinical skills and practice – awareness raising regarding the involvement of values in a given decision-making process; use of a clear reasoning strategy to explore value diversity; knowledge about the values and facts that may be relevant to different contexts; and good communication skills. Two further principles underscore the importance of person-centered and multidisciplinary health service delivery. Other principles focus on the fact that all decisions are based on both values and facts, where the former become noticeable particularly when they are diverse or conflicting, especially in environments where variable choices are at the disposal of service users. The last principle of VBP is based on partnership in decision-making, including service users and providers.

In conclusion, VBP may become a valuable tool for making balanced decisions in the broad terrain of brain health. Its protective focus on the perspectives of service users and its democratic character may pave the way towards achieving equity in and optimization of brain health.

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