Symposium | Forensic Psychiatry：[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

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[Symposium 26] Balancing Legal Obligations and Medical Ethics: Implementing Rights-Based Mental Health Care under the CRPD

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[SY-26-01] Service users' perspectives on supported decision making in psychiatric settings – A scoping review

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BackgroundSupported decision-making (SDM) in psychiatric setting is a process that enables individuals to make their own decisions regarding their treatment. The current clinical practice generally promotes SDM as a good practice, but for those who are seriously ill and lack capacity to make treatment decisions, substituted decision making is the norm. The UN Convention for the Rights of Persons with Disabilities (CRPD) focuses on promotion of human rights and dignity, and has mandated for the complete elimination of mental health practices such as involuntary hospitalization, compulsory treatment, and substitute decision making. However, research on SDM in psychiatry is limited, and the CRPD proposed changes using SDM is met with very mixed perceptions and opinions. We performed a scoping review to explore what is currently known about patients' perspectives on SDM in psychiatric settings.**Methods**Following the PRISMA-ScR framework for scoping reviews, a literature search was conducted across 7 databases, including articles published up to March 2025. The articles were first screened by title and abstract, with a focus on SDM and other related interventions such as psychiatric advance directives. A total of 13 articles were chosen for full-text analysis.**Results**This review shows a wide and diverse range of patients' experiences with SDM, including positive and negative views, as well as suggestions for implementation. The recurring themes involved patients' level of insight, increased autonomy, concerns about being ignored, and the role of trust in relationships, among others.**Conclusion**These results highlight the importance of shifting more autonomy and greater support for patients to make their own treatment decisions through the framework of SDM. It also leaves doubt that SDM alone without other forms of decision-making is adequate or desirable. This review could inform current policy, practice and research on regarding the role of SDM in mental health care.