



## Executive Summary

### *A Survey of Canadian Psychiatrists' and Psychologists' Experiences in Interprofessional Education*

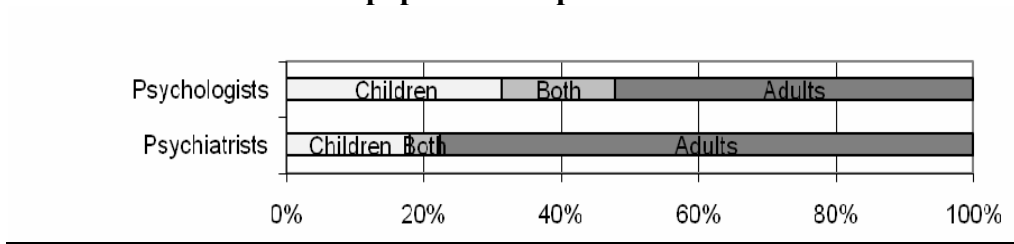
Mental health services for children and adolescents require an integration of the bio-psycho-social perspective, necessitating the formation of interdisciplinary teams. Clinical training programs in psychology and psychiatry must therefore provide trainees with both the opportunities and knowledge necessary to collaborate effectively. Although collaboration among health professionals is considered essential there is limited information on best practices to promote interprofessional collaboration. The current study was designed to identify best practices in interdisciplinary training by surveying students and professionals in psychology and psychiatry about the training experiences that prepared them to work with the other profession.

Diverse psychological organizations were contacted regarding their willingness to participate in the study by forwarding an email to their members. Five regulatory bodies (Prince Edward Island Psychologists Registration Board, l'Ordre des psychologues de Québec, College of Psychologists of New Brunswick, College of Psychologists of Ontario, Saskatchewan College of Psychologists), two provincial associations (British Columbia Psychological Association, and the Association of Psychologists of Nova Scotia) as well as four national organizations (Canadian Psychological Association Clinical Section, Canadian Psychological Association Student Section, Canadian Council of Professional Psychology Programs, and Canadian Register of Health Service Providers in Psychology) agreed to participate. Participants from psychiatry were contacted via the Canadian Psychiatric Association as well as through the department chairs and training directors in psychiatry in Canada with the approval of the Coordinators of Psychiatric Education. Although it is impossible to know exactly how many people in each profession received the survey, it seems we were successful in getting a notion of the population in each profession. We were able to contact approximately 8% of the roughly 14,000 practicing psychologists in Canada, as well as 6% of the roughly 4,100 practicing psychiatrists in Canada.

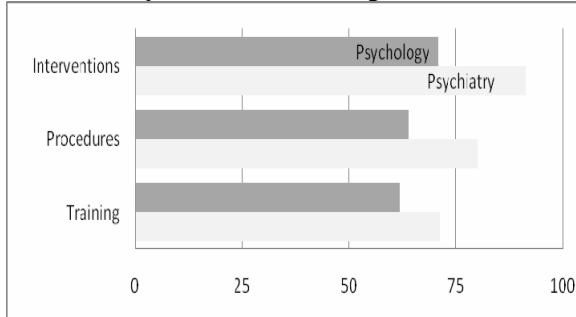
In interpreting the results of the survey, it is important to bear in mind the different recruitment strategies in each profession, as well as differences in the respondents from each profession. Compared to respondents in psychiatry, a higher percentage of psychology respondents were autonomous professionals. Furthermore, the sample of psychologists included a higher proportion who work exclusively or mostly with children, than was the case for psychiatrists. .

<b>PSYCHIATRY</b>	<b>PSYCHOLOGY</b>
English: 247 total - 67.2% Autonomous Professionals - 19% Residents - 12% Fellows - 0.4% Students	English: 976 total - 80.8% Autonomous Professionals - 4.2% Post Doctoral Supervised Practice - 1.6% Pre Doctoral Interns - 13.3% Pre Doctoral Students
French: 20 - 90% Autonomous Professionals - 10% Residents	French: 128 - 100% Autonomous Professionals

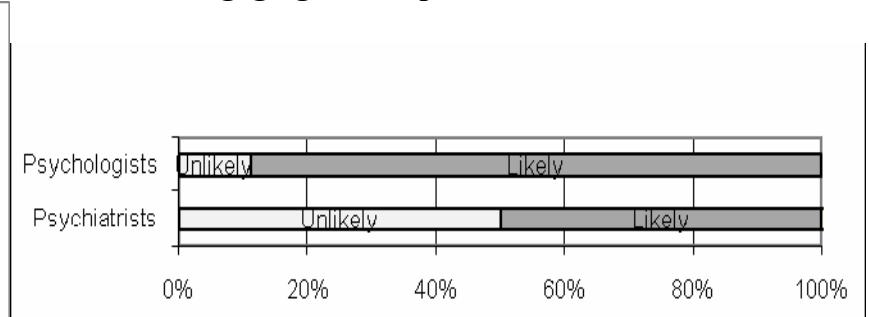
### Main population of practice



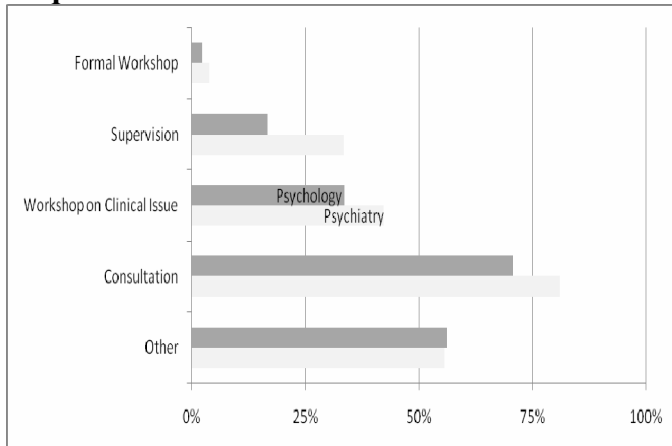
### Familiarity with the other profession



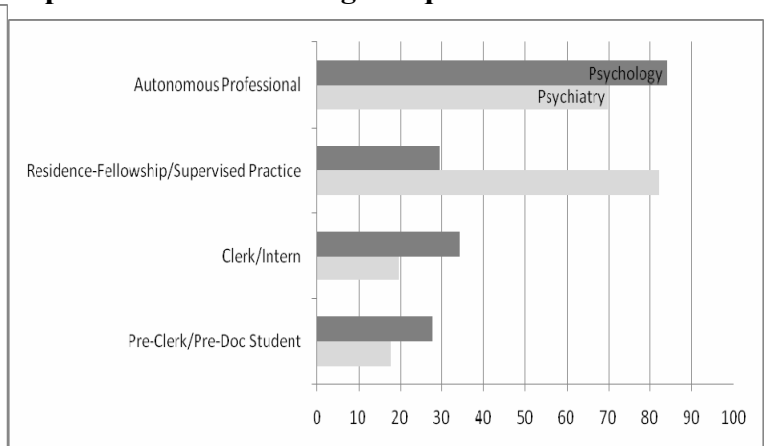
### Likelihood of engaging in interprofessional collaboration



### Means of Interprofessional Knowledge Acquired



### State of Training at Which Interprofessional Knowledge Acquired



### Summary of Findings

- In both professions, the large majority reported some familiarity with the other profession, a small minority reported considerable familiarity, and a smaller group reported no familiarity with the interventions and procedures used, as well as the training received by members of the other profession
- Training in interprofessional collaboration occurred throughout the career, beginning during the course of doctoral training for psychologists and medical school or residency for psychiatrists.
- Both psychologists and psychiatrists learned about the other profession through a variety of activities; the most common was consultation with the other profession, followed by workshops examining clinical issues, and co-supervision or supervision by a member of the opposite profession. The least frequent

means of learning about the other profession was by formal workshops on interprofessional collaboration

- Psychiatrists rated themselves as being more familiar with the nature and extent of training, procedures, and the interventions used by psychologists than did psychologists with respect to psychiatrists.
- Psychologists reported that they acquired their knowledge of Psychiatry as autonomous professionals whereas psychiatrists reported that they acquired most of their knowledge of Psychology during residency.
- The majority of respondents embraced the idea of interprofessional collaboration, and described both case-based work and formal training that had helped them to collaborate.
- Of psychiatry and psychology respondents who demonstrated no awareness/understanding of the opposite profession, psychologists were more likely to accept an opportunity for interprofessional collaboration in which they would be working with a psychologist than vice versa