

# Students' Perspectives on Interprofessional Education in Canadian Graduate Psychology Programs

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## Background

Collaborative practice and research are increasingly part of the landscape for Canadian psychologists, whether they are academics, practitioners, or researchers. Discipline-based departments in hospitals and community clinics have largely been dismantled and re-organized as interprofessional teams where professionals from a variety of backgrounds work together. Granting agencies are encouraging, and in some cases, requiring researchers to collaborate with other disciplines. The impetus behind these initiatives is the belief that collaborative work will lead to improved outcomes in health and to increased research productivity (Health Canada, 2007; National Academy of Sciences, 2004; NSERC, 2006; Romanow, 2002). Given these new demands, interdisciplinary collaboration has been increasingly recognized as a critical area for psychologists (APPIC, 2002; Arredondo, Shealy, Neale, & Winfrey, 2004; Hinshaw & DeLeon, 1995; Johnson, Stewart, Brabeck, Huber, & Rubin, 2004; McDaniel, 1995; Tovian, 2006).

A number of Canadian universities have developed interprofessional educational programs where students from a range of disciplines learn together. Most of these initiatives have been in the area of health, and psychology has largely been absent. It may be that graduate students in psychology are participating in other initiatives, but we know little about the extent of interprofessional education in psychology. In order to ascertain what kinds of interprofessional education are being provided in Canadian psychology graduate training, the Canadian Psychological Association (CPA) Education and Training Committee undertook two surveys about interprofessional education in graduate psychology. One was with Canadian professional psychology programs and internships and the other with Canadian graduate students in psychology. We summarize the results from the latter here.

## Method

Participants were graduate students who were members of the CPA Section for Students in Psychology. At the time of the survey, there were 1545 members. This included undergraduates, graduate students, as well as recent graduates. The Section was unable to determine what percentage were graduate students. In the email, potential participants were directed to the study through a link which was hosted on SurveyMonkey. Participants were asked about their interprofessional education in five different areas:

1. Seminars about interdisciplinary/ interprofessional issues, for example, how to work in interdisciplinary teams;
2. Classes taken with students from other disciplines, for example, a seminar series on interviewing for medical residents and psychology interns;
3. Presentations by faculty from other disciplines, for example, seminars on psychopharmacology taught by a pharmacist;
4. Student participation in interdisciplinary teams in practice settings, for example, being part of an interprofessional oncology team;
5. Student involvement in interdisciplinary research, for example, a requirement that a thesis/dissertation committee have representation from other disciplines.

Respondents identified how frequently these activities occurred, with a range from one session to a year. They were asked to describe which other professions/disciplines were involved, the content/topics of the activities, and what they considered was most and least successful about their interprofessional and interdisciplinary education, and how important they believed interdisciplinary practice, teaching, research, and supervision would be in their future work. They also evaluated the extent to which they believed factors, such as “student attitudes” and “discipline boundaries,” presented barriers to the provision of interdisciplinary education. These barriers have been identified in interdisciplinary health education (Curran, 2004; McVicar, Deacon, Curran, & Cornish, 2005; Oandasan & Reeves, 2005). The students who had had interprofessional education were asked to describe what they considered most and least successful about their experiences, as well as to identify any other barriers.

Survey Monkey’s online analysis procedures were used to create summary, descriptive data. Chi Square analyses were completed in order to compare the distributions of categorical variables. The first author carried out a thematic analysis of the responses to the open-ended questions. After this analysis, the second author independently sorted 50% of the responses into the thematic categories. There was 87% agreement between the two raters.

## Results

One hundred and thirteen graduate students filled out the survey: 60.2% (68) were doctoral students and 39.2% (45) were Masters students. Three others responded to say that the survey was not appropriate for them. Twenty-nine percent of the respondents indicated they had completed their coursework and 63% were working on their theses. Students were enrolled in 19 different programs, including applied psychology, clinical, counselling, developmental, educational/school, health, and social/social-personality. About half (51.3%) the respondents were in clinical psychology. Overall, 61.1% of the respondents had had some interprofessional experience. Doctoral students were significantly more likely to have had interprofessional education than masters students,  $\chi^2(1, N = 113) = 4.66054, p < .05$ . Students in clinical psychology were also significantly more likely to have been exposed to interprofessional education than were students in other programs,  $\chi^2(1, N = 113) = 16.68969, p < .001$ . There was considerable variability in the types and extent of interprofessional education students received. Some attended only one or two seminars about interdisciplinary issues, while others experienced a range of types of interprofessional education: they were involved in interdisciplinary teams, interacted with students from other disciplines, heard lectures about interprofessional issues, and so on.

### *Interprofessional Education Experiences*

#### *1. Seminars about interdisciplinary/ interprofessional issues*

About a third of the respondents (30.8%) had participated in seminars about interdisciplinary and interprofessional issues. Most were five sessions or less. The issues addressed included advantages and disadvantages to interdisciplinary work, effective teamwork, and how to collaborate with other professions.

#### *2. Classes taken with students from other disciplines*

Forty students (35.5%) reported that there had been students from other disciplines in their classes, usually in a semester-long course. Usually they encountered students from other disciplines through taking courses outside their programs or when students from other disciplines took psychology courses. The latter tended to be in areas of psychology that are more

interdisciplinary, such as health, education, neuro-, forensic, and cognitive. Most of the interaction was with students from health-related disciplines, except for educational/school psychology students who shared classes with students from education.

### *3. Presentations by faculty from other disciplines*

About a third (36% or 41) of the students reported that they had attended presentations and seminars given by faculty from other disciplines, usually from medicine. The most common topic was psychopharmacology.

### *4. Student participation in interdisciplinary teams*

Forty-eight percent of the respondents had participated in interdisciplinary teams. This was the most frequent type of interdisciplinary experience. Doctoral students were more likely to have been members of interdisciplinary teams than were masters students: 59% compared to 31%. (In the other four areas of interprofessional education, masters and doctoral students had similar rates of participation.) Doctoral students were also more likely to have had a year-long internship (20 students) compared to masters students (4). Most of the teams were in hospitals (34) or community-based clinics (15), with a few in school settings. Given the settings, it is not surprising that most of the teams were health-focussed.

### *5. Student involvement in interdisciplinary research*

Students reported the least involvement in interdisciplinary research. Only nine of the 113 respondents (8%) were required to be involved in interdisciplinary research: seven had to have a thesis committee member from another discipline (2 masters and five doctoral), one was required to be part of a non-thesis related interdisciplinary research project, and one doctoral internship included an interdisciplinary research project. Students' interdisciplinary research experience tended either to be self-initiated or by happenstance.

### *Other interdisciplinary activities*

Thirteen respondents participated in other interdisciplinary activities, such as seminars, workshops, and presentations on different aspects of interdisciplinary practice and research. These all occurred outside their programs, none were mandatory, and were generally initiated by the students.

### *Students' Perceptions of their Interprofessional Education*

Almost all the respondents believed that interdisciplinary collaboration would be at least moderately important in their future work (See Table 1 at end). This was particularly the case for practice, where 92% of the students thought that collaborative practice would be important or very important. There were no significant differences between those who had had interprofessional education and those who had not in how important they believed interdisciplinary collaboration would be in their future practice, research, teaching or supervision.

In assessing the degree to which six factors were barriers to interprofessional education, there were few differences between students who had been part of interprofessional education and those who had not. Most considered high curricular demands (84%) and psychology's lack of integration with other programs (71%) as significant barriers. About half the respondents (55%) identified discipline boundaries as a problem. Student attitudes were not viewed as an impediment, with only 19% identifying it as a barrier.

### *Student Perceptions of Benefits of Interprofessional Education*

In describing what was most successful about their interdisciplinary education, respondents referred most often to what they had learned. They believed that they had developed

a better understanding of other professions and had gained knowledge about their own practice from other professions. Some stated that their interdisciplinary experiences had given them greater insight into their own discipline. Students also highlighted skills they had developed, including how to interact and communicate with other professionals and how to work as part of an interdisciplinary team. A number believed they now had a broader understanding of the advantages of interprofessional practice, and how collaboration can have a positive impact on care, particularly in addressing complex issues.

#### *Student Perceptions of Challenges in their Interprofessional Education*

While a handful of respondents characterized their interdisciplinary education as entirely positive, many more commented that there were not enough opportunities, and that structures were not in place to support this kind of learning. Often participants used the words like “lack,” “piecemeal” or “haphazard” to characterize their experiences. Students identified some structural barriers, for example, that their psychology department was physically separated from departments with whom they would most naturally collaborate or that other programs did not consider psychology a health profession. Even when there was an interdisciplinary curriculum, there were challenges: it was difficult to find content that was relevant for everyone, as well as to pitch the program at the right level. Interdisciplinary tensions also interfered with successful interdisciplinary experiences and “silo” thinking was identified as a problem.

#### *Ways in which CPA can Facilitate Interdisciplinary Activities and Education*

Students had a number of suggestions regarding how CPA can help facilitate interprofessional activity and education, including organizing speakers and events at the CPA convention that were multidisciplinary; promoting the advantages of interdisciplinary collaboration; encouraging programs to implement interdisciplinary education; developing models, standards, and guidelines for interprofessional education; creating stronger linkages with other professional organizations; and changing accreditation guidelines to include interdisciplinary training, including allowing for cross-disciplinary supervision. Some respondents recommended ways in which CPA could play a stronger role in encouraging interdisciplinary research, for example, advocating for more interdisciplinary research, finding funding for students to do this kind of research, and highlighting interdisciplinary collaborative work in CPA journals.

Table 1  
*Percentage of Total Student Respondents Endorsing Levels of Importance of  
 Interprofessional/Interdisciplinary Collaboration in Their Future Work (N = 110)*

Career roles	Practice	Research	Teaching	Supervision
Very important to important	92%	64%	42%	53%
Moderately important	4%	23%	30%	33%
Little importance to unimportant	1%	8%	16%	11%
Not applicable	3%	5%	11%	5%