The Effects of Interdisciplinary Training on MCH Professionals, Organizations & Systems

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History of ID Training

Given the multi-faceted aspects of children's growth and development and the families in which they reside, the professional field of Maternal and Child Health has advocated and encouraged not only the participation of many disciplines to promote the well-being of children, families and to address their needs, but also the collaboration among disciplines. In the 1940s, the federal government first funded Public Health interdisciplinary training programs, designed to enhance the administrative and research skills of individuals with clinical degrees and expertise (Alley, Kavanagh, Blagay, & Hutchison, 2003). Third, interdisciplinary training programs were developed (e.g. through the Learning or vocational training) to provide support for services to individuals with mental retardation in the 1960s, LEAH (established in the late 1960s) for adolescent health, and PCPs (established in the 1970s) for pulmonary diseases. Although these four “interdisciplinary” training programs bring together students and faculty from a range of disciplines and provide exposure to a broad variety of skills, little effort has been made either to define exactly what is meant by interdisciplinary exposure/training or to assess the effects of this training on participants, the organizations within which they work, or the MCH populations they serve.

The UNC Interdisciplinary Leadership Program

In 2000, faculty and staff from the five UNC-MCHS-funded training programs (LEAH, Nutrition, Pediatric Dentistry, Public Health, Social Work) joined to support a new initiative, the IDLP. The IDLP served as a platform for shared resource development and collaborative interdisciplinary management in interdisciplinary training for Maternal and Child Health, and were joined in 2006, by a representative of the NC Title V program. The Institutional Review Board of The University of North Carolina at Chapel Hill approved the study. The Consortium developed the Interdisciplinary Leadership Development Program (IDLP) to address the needs of professionals who work across disciplines. The IDLP is designed to enhance the capacity of participants to engage in interdisciplinary practice and research, to enhance the capacity of participants, either directly or through their organizational work, to effect change at the societal/community level through policies, practices and programs.

Methodology

We developed a web-based survey with scales and open-ended questions, and a telephone interview in order to elaborate further on the survey, for a sub-sample. The survey asked questions about graduates’ work settings, jobs, and time spent in professional activities corresponding to the MCH pyramid. It also asked about graduates’ skillset and skills related to interdisciplinary practice and how partipants in degree programs and the IDLP had changed these constructs. Graduates were asked to explain if and how participation in the programs had helped them influence outcomes at several levels, including for family, children, consumers, programs, organizations, partnerships, or policies. Finally, we inquired about potential barriers to institutional change.

Survey Attitude/Belief Questions

We rate how often you have used these skills in the past three months.

Survey Skills Questions

Table 1: Model-predicted Effects of ILDP and Academic Program on ID Skills

Table 2: Model-predicted Effects of IDLP and Academic Program on ID Skills

Table 3: Attitudes/Beliefs and Frequency of Use of ID Skills Affected Systems

Table 4: Lessons Learned

-history-based long program designed to expose LEND, Public Health, Public Health

In order to develop competence in ID team building, one of the ID Core MCH Leadership Competencies, training programs should consider “thinking outside the box” for ways to bring different disciplines together.