

Collaborative and Interdisciplinary Teaching in Sport and Exercise: Lessons from the Development and Delivery of an Equity, Diversity, and Inclusion Workshop

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Training in sport and exercise that is collaborative and interdisciplinary allows for the delivery of key knowledge and skills that help shape trainees' practice. Such training also demonstrates how collaborations can take shape and how individuals can work together in the future. We present an example of collaborative and interdisciplinary training used within an equity, diversity, and inclusion workshop that was provided to trainees enrolled on the Sport and Exercise Psychology Accreditation Route (SEPAR) training program offered through the British Association of Sport and Exercise Sciences. The SEPAR program was designed to allow trainees to gain knowledge, skills, and experience to apply and register as Practitioner Psychologists with the Health and Care Professions Council in the United Kingdom. The workshop was a collaboration between individuals trained in sport and exercise psychology and clinical social work. Overall, the workshop helped trainees gain an understanding of key terms and definitions concerning equity, equality, diversity, inclusion, and social justice as well as legal responsibilities. The workshop also demonstrated a variety of perspectives from sport and exercise psychology and clinical social work as to how inclusive and socially just approaches can be used to create safe environments that can foster strong therapeutic relationships with clients.

Keywords: collaborative, interdisciplinary, teaching, practice, equity, diversity, inclusion, social work, sport psychology

DEI WORKSHOP

Collaborative and interdisciplinary professional practice within sport and exercise settings is essential to deliver high quality care to individuals (Moore et al., 2022b). Be it the delivery of community-based exercise programs, or the delivery of highly specialized performance related care in elite sport, a variety of professions often work in concert to help address the unique needs of individuals. For example, the delivery of exercise programs to individuals living with serious mental illness requires the attention of multiple healthcare professionals. Research on community-based exercise programing as part of overall weight management for people living with schizophrenia in Toronto, Canada demonstrated a unique collaborative effort amongst exercise scientists, psychiatrists, general practitioner physicians, clinical psychologists, social workers, recreation therapists, physical therapists, occupational therapists, and clinical dieticians in helping identify various client needs and working toward the delivery and maintenance of exercise provisions (Faulkner et al., 2009; Gorczynski et al., 2013). This included conducting physical and mental health assessments, creating safe and motivating climates to exercise, scheduling and delivering exercise sessions, and organizing post exercise care, which included dietary care. Delivery of professional services within elite sport is equally as occupationally diverse (Reardon et al., 2019). For instance, mental health literacy programs designed to help educate athletes, coaches, staff, referees and others on mental health symptoms and disorders, reduce stigma, and promote help seeking behaviors are rooted in the collaborative efforts of psychiatrists, sports physicians, clinical psychologists, clinical social workers, and sport and exercise psychologists (Gorczynski et al., 2021; Moore et al., 2022a). The use of such collaborative and interdisciplinary models demonstrates how multiple and different professions can work together to identify and address client needs and create safe spaces.

Collaborative and interdisciplinary models of professional practice rely on building a climate of mutual respect and shared values, using knowledge across disciplines to assess and address client needs, strong and clear communication skills to understand clients and provide care in a responsive and collaborative manner, and the application of relationship building values and principles of team dynamics to structure and continually enhance the way interdisciplinary interactions occur (Interprofessional Education Collaborative, 2023). Collaborative and interdisciplinary professional practice is meant to be clear, comprehensive, respectful, and rooted in professional competencies with legislative and regulatory boundaries. Collaborative and interdisciplinary professional practice should not result in hierarchical power struggles amongst professionals or blur professional boundaries. Ultimately, collaborative and interdisciplinary professional practice centers around a shared purpose: the betterment of the client through the application of multiple and unique professional services.

One of the greatest obstacles that stand in the way of collaborative and interdisciplinary professional practice is competition (McHenry et al., 2021; Moore et al., 2022a). There are many reasons why competition exists amongst healthcare professionals, especially within the delivery of services related to mental performance and mental healthcare within sport and exercise. Unfortunately, competition has created multiple turf wars over client acquisition and retention, delivery of services, scopes of practice, and revenue (Moore et al., 2022b). Some individuals view competition positively and believe that competition amongst healthcare professionals results in more efficient services, innovative practices, continual improvement of services, lowered costs, and overall better options for clients (Barros et al., 2016). Many individuals do

not share this perspective and believe that competition results in a lower quality of care, restricted and inequitable access to services, and inefficient coordination of care amongst healthcare professionals (Barros, et al., 2016). Furthermore, competition may also result in the commodification of exercisers and athletes where they are viewed as economic units and sources of income, rather than individuals who need help (Edwards, 2021). Ultimately, competition may drive healthcare professionals away from providing needed holistic care to support their clients which can only be achieved through collaborative and interdisciplinary approaches (McHenry et al., 2021; Miller Aron et al., 2023; Van Slingerland et al., 2020). Competition may also limit opportunities to deliver collaborative and interdisciplinary training across healthcare professions.

Ensuring that collaborative and interdisciplinary models of care remain respectful, coordinated, and efficient, healthcare trainees need training in the creation and maintenance of such models of practice. In essence, trainees need exposure to the design of such collaborations and how such collaborations can improve overall client care. In this article, we present a strategy taken by professionals in sport and exercise psychology and clinical social work to deliver a workshop in equity, equality, diversity, inclusion, and social justice for trainees enrolled on the Sport and Exercise Psychology Accreditation Route (SEPAR) training program offered through the British Association of Sport and Exercise Sciences (BASES). The purpose of this article is to provide insight into how collaborative and interdisciplinary professional practice can be discussed with and taught to trainees.

Background

The Sport and Exercise Psychology Accreditation Route training program offered through BASES was designed to help psychology trainees in the United Kingdom gain necessary knowledge, skills, and experience in sport and exercise psychology so that they could apply to the Health and Care Professions Council (HCPC) as Practitioner Psychologists (BASES, 2023). The HCPC is the regulator of health and care professions in the United Kingdom. The goal of the training program is to ensure trainees develop core competencies to be industry ready and practice ethically, safely, and efficiently in an autonomous manner. The SEPAR training program can take between two and four years, where trainees work with their supervisors to produce a portfolio of evidence to demonstrate a minimum required level of proficiency across a variety of competencies as well as engagement in 3,200 hours of activity, including consulting, continued professional development, and broad dissemination of information about the profession. Included in the SEPAR training program are a series of core workshops that trainees must attend and complete. Workshops were developed to deliver key knowledge and skills to trainees in a wide variety of competencies.

The Workshop

The Equality, Diversity, and Inclusion workshop was designed in 2022 to provide both theoretical and practical knowledge and skills to ensure trainees were practicing in an inclusive and socially just manner (Cunningham, 2019). The on-line, one-day workshop was designed by individuals trained in sport and exercise psychology and clinical social work with an aim to provide essential training around cultural factors to further promote diversity and inclusion in sport and exercise. The team consisted of one registered practitioner psychologist with a

doctorate in sport and exercise, one clinical social worker, and two individuals with doctorates in sport and exercise psychology. A further aim of the workshop was to demonstrate to trainees their legal responsibilities, such as the need for referral to other healthcare professionals when necessary. The on-line workshop included 4 mini-lectures, small breakout rooms with group exercises that focused on collaborative learning, and larger forums for discussion. Trainees were provided with key readings, resources and follow-up exercises to assist with reflective practice. Workshops were limited to 25 attendees. Specifically, the workshop covered the following topics:

- Definitions of equality (e.g., people have the same conditions), equity (e.g., fair allocation of resources to reach equality), diversity (e.g., socially meaningful differences), inclusion (e.g., embracing difference and integration of people), and social justice (e.g. changes to systems that lead to sustainable and equitable access to resources);
- Protected characteristics and legal responsibilities in sport and exercise psychology;
- Epidemiology of discrimination, harassment, bullying, and violence in sport and exercise settings;
- Conscious and unconscious bias, stereotypes, prejudice, and discrimination;
- Cultural competence;
- Representation and generational diversity and inclusivity in sport and exercise psychology;
- Holistic life perspectives within sport and exercise psychology;
- Socioecological perspectives with respect to inclusivity and diversity;
- Sport and exercise psychology curriculum decolonization strategies;
- Inclusive leadership styles;
- Relationship development and management amongst healthcare professionals;
- Referral; and
- The sport and exercise psychology scope of practice, SEPAR core competencies, British Psychological Society Code of Ethics, and BASES Code of Conduct.

The workshop provided attendees with key skills to appreciate, understand and interact with a variety of individuals in their professional practice, be it clients or other healthcare professionals. Ultimately, the workshop helped convey the message of inclusive and socially just approaches that can be incorporated into one's professional practice.

Lessons Learned

This collaborative and interdisciplinary workshop has resulted in trainees gaining experience in theoretical and practical knowledge and skills. Ultimately, the workshop offered a variety of perspectives – from sport and exercise psychology and clinical social work – and space to discuss the creation of meaningful connections with clients and other healthcare professionals. Specifically, the workshop discussed the use of inclusive and socially just approaches to build cultural competence and better identify when clients need to be referred, such as in the instance of addressing mental health symptoms and disorders. The workshop also

helped trainees understand different strategies that are needed to develop strong therapeutic relationships to facilitate treatment adherence and success (Gorczynski et al., 2022).

Workshop facilitators discussed their own experiences of how they have fostered strong therapeutic relationships with clients and helped refer clients when needed. For instance, from a clinical social worker perspective, it was demonstrated that by taking an inclusive and socially just approach, a client can begin to feel genuinely understood, seen, respected, and cared for. The use of such inclusive and socially just approaches provide the foundation for the creation of a safe space where trust and a therapeutic bond can be established and maintained. Such a bond can lead to shared decision making in therapy, agreement on goals and interventions, and the opportunity to address problems and challenges that may come up with the relationship during treatment. Without a firm understanding of equity, equality, diversity, inclusion, and social justice, a therapeutic relationship between a clinical social worker and a client would not be possible.

From a sport and exercise psychologist perspective, rooting one's practice in diversity and inclusion allows for a better understanding of a client and their situation throughout the consulting process. Operating in a manner that is inclusive and socially just allows the sport and exercise psychologist to establish a stronger relationship and gain a clearer sense of expectations and goals in the intake process as well as gather necessary knowledge about the client during needs analysis. It is at this point that a sport and exercise psychologist may identify client needs that exceed their scope of practice, such as addressing mental health symptoms and disorders that would need to be referred to a clinical social worker or clinical psychologist, for instance. Working inclusively also allows the sport and exercise psychologist to understand the client to collaboratively choose, plan, deliver, and monitor any agreed upon interventions for mental performance alongside their client.

Some insights for other individuals considering using a similar approach to collaborative and interdisciplinary training:

- Assume trainees have little working knowledge of other healthcare professions;
- Explain different scopes of practice for other healthcare professions;
- Demonstrate how collaborative and interdisciplinary approaches can address client needs in different ways;
- Consider the use of case studies to help demonstrate different approaches to care;
- Root training in core competencies of the Collaborative and Interdisciplinary model (i.e., climate of mutual respect and shared values, using knowledge across disciplines to assess and address client needs, strong and clear communication skills, and the application of relationship building values);
- Allow time for reflective practice throughout the workshop;
- Understand that not all trainees will be comfortable or equipped to discuss certain topics (e.g., decolonization), so create opportunities for guidance and reassurance to help strengthen self-efficacy around the topics engaged throughout the workshop; and
- Make the sessions fun, interactive and enjoyable by allowing plenty of time for group discussion where trainees can ask questions.

Conclusion

Collaborative and interdisciplinary professional practice within sport and exercise settings is essential to provide support to clients. Using collaborative and interdisciplinary approaches in professional training helps establish a climate of mutual respect and shared values and build strong and clear communication skills. The purpose of this article was to provide insight into how collaborative and interdisciplinary professional practice can be discussed with and taught to trainees. We hope this article may stimulate educators within sport and exercise psychology, social work, and other professions to teach in a manner that is collaborative and interdisciplinary.

References

- Barros, P. P., Brouwer, W. B., Thomson, S., & Varkevisser, M. (2016). Competition among health care providers: helpful or harmful? *The European Journal of Health Economics: HEPAC: Health Economics in Prevention and Care, 17*(3), 229–233. https://doi.org/10.1007/s10198-015-0736-3
- British Association of Sport and Exercise Sciences (2023). Sport and Exercise Psychology Accreditation Route (SEPAR). British Association of Sport and Exercise Sciences. https://www.bases.org.uk/spage-professional_development-separ.html
- Cunningham, G. B. (2019). *Diversity and inclusion in sport organizations: A multilevel perspective.* Routledge.
- Edwards, C. D. (2021). Depression assessment: Challenges and treatment strategies in the athlete. *The Psychiatric Clinics of North America*, 44(3), 381–392. https://doi.org/10.1016/j.psc.2021.04.011
- Faulkner, G., Gorczynski, P., & Cohn, T. (2009). Psychiatric Illness and Obesity: Recognizing the "Obesogenic" Nature of an Inpatient Psychiatric Setting. *Psychiatric Services*, 60, 538-541. https://doi.org/10.1176/ps.2009.60.4.538
- Gorczynski, P., Currie, A., Gibson, K., Gouttebarge, V., Hainline, B., Castaldelli-Maia, J. M., Mountjoy, M., Purcell, R., Reardon, C., L., Rice, S., Swartz, L. (2021). Developing mental health literacy and cultural competence in elite sport. *Journal of Applied Sport Psychology*, 33(4), 387-401. https://doi.org/10.1080/10413200.2020.1720045
- Gorczynski, P., Faulkner, G, & Cohn, T. (2013). Dissecting the 'obesogenic' environment of a psychiatric setting: Client perspectives. *Canadian Journal of Community Mental Health*, 32(3), 65-82. https://doi.org/10.7870/cjcmh-2013-024
- Gorczynski, P., Reardon, C. L., & Miller Aron, C. (2022). Lesbian, Gay, Bisexual, Trans, and Queer Mental Health in Elite Sport: A Review. In In D. Prabhakar (Ed.), Advances in Psychiatry and Behavioral Health 2.1, 2(1), 9-16. https://doi.org/10.1016/j.ypsc.2022.03.002

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- Interprofessional Education Collaborative (2023). Core Competencies for Interprofessional Collaborative Practice. Interprofessional Education Collaborative. https://www.ipecollaborative.org/ipec-core-competencies
- McHenry, L. K., Beasley, L., Zakrajsek, R. A., & Hardin, R. (2022). Mental performance and mental health services in sport: a call for interprofessional competence and collaboration. *Journal of interprofessional care*, 36(4), 520–528. https://doi.org/10.1080/13561820.2021.1963218
- Miller Aron, C., LeFay, S., & Rodriguez, R.R. (2023). Eating Disorders in Sport. In: D. Baron, T. Wenzel, A. Ströhle, & T. Stull (Eds.), *Sport and Mental Health*. Springer. https://doi.org/10.1007/978-3-031-36864-6_16
- Moore, M., Gorczynski, P., & Miller Aron, C. (2022a). Mental health literacy in sport: The role of the social work profession. *Social work*, 67(3), 298–300. https://doi.org/10.1093/sw/swac022
- Moore, M., Gorczynski, P., Miller Aron, C., & Bennett, P. (2022b). Leaving professional competition on the field: Professional collaboration in promoting college athlete mental health. *Frontiers in Psychiatry*, *13*, 1079057. https://doi.org/10.3389/fpsyt.2022.1079057
- Reardon, C.L., Hainline, B., Aron, C.M., Baron, D., Baum, A.L., Bindra, A., Budgett, R., Campriani, N., Castaldelli-Maia, J.M., Currie, A., Derevensky, J.L., Glick, I.D., Gorczynski, P., Gouttebarge, V., Grandner, M.A., Han, D.H., Mcduff, D., Mountjoy, M., Polat, A., Purcell, R., Putukian, M., Rice, S., Sills, A., Stull, T., Swartz, L., Zhu, L.J. & Engebretsen, L. (2019). Mental health in elite athletes: International Olympic Committee consensus statement (2019). *British Journal of Sports Medicine*, *53*(11), 667-699. https://doi.org/10.1136/bjsports-2019-100715
- Van Slingerland, K., Durand-Bush, N., DesClouds, P., & Kenttä, G. (2020). Providing mental health care to an elite athlete: The perspective of the Canadian Centre for Mental Health and Sport Team. *Case Studies in Sport and Exercise Psychology*, 4(S1), 17-26. https://doi.org/10.1123/cssep.2019-0022