

Source: Walsh, M. E., Brabeck, M. M., & Howard, K. A. (1999). Interprofessional collaboration in children's services: Toward a theoretical framework. *Children's Services: Social Policy, Research, and Practice*, 2(4), 183-208.

This theoretical article does an excellent job of advancing current discussions about interprofessional collaboration and has direct implications for the mental health field. The authors: 1) distinguish between cooperation and collaboration, 2) review various conceptual and practical barriers to collaboration, and 3) argue for the importance of a theoretical framework that can ground collaboration across professions. To this end, they propose a "biopsychosocial" life span model of development. Significantly, the authors also provide empirical evidence in support of interprofessional collaboration.

The biopsychosocial model assumes that development occurs across the life span, at multiple levels, and in context. Because professionals tend to identify themselves with a particular age group in their practices (e.g., pediatric, elementary, adolescent, adult, geriatric), accurate assessment must be conducted simultaneously by a range of professions. All human service professionals maintain an account specific to their field of how humans develop. Walsh et al. propose the biopsychosocial model in order to ground such accounts within an all-encompassing framework of development, thereby encouraging accurate, collaborative assessment.

The authors note that it has only been within the past decade that practitioners in a number of professions, including education, psychology, law, social work, nursing, and health, "have recognized the need for interprofessional collaboration in a wide range of training and practice settings." According to Walsh et al., limited data to support interprofessional collaboration is just beginning to emerge (Corrigan, 1996; Chalfant & Pysh, 1989; Dolan, 1995; Ellis, 1984; Fuchs & Fuchs, 1989; Golan & Williamson, 1994; Lawson & Briar-Lawson, 1997; Sindelar, Griffin, Smith, & Watanabe, 1992; Wang, Heartel, & Walberg, 1995). The authors suggest that positive findings are most evident in school settings via the implementation of integrated services. The Wang et al. study began with a literature search that identified 44 school-linked collaborative efforts having positive results. Data were then organized by category under six program areas and coded by outcome. With regard to the integrated services category, 95% of outcomes indicated "positive effects on students' achievement tests, grades, dropout rates, and attendance." The authors concur with Wang et al., however, that results of the literature search may be overinflated due to the likelihood that "only evaluations with positive results" were published.

Nevertheless, Walsh et al. assert that the "results of individual studies are worth reviewing." In the Golan and Williamson study of school-linked services in California, teachers were found to have benefitted from participation in the services through: 1) increased contact with parents and agency professionals, 2) greater feelings of helpfulness to students, and 3) further understanding of and appreciation for program services. Walsh et al. also review the work conducted by Chalfant & Pysh, 1989; Fuchs & Fuchs, 1989, and Sindelar et al., 1992, in which: 1) student-support and teacher-assistance teams improved student academic performance, 2) generated creative, appropriate interventions, 3) assisted teachers in mainstreaming students who were receiving pull-out services, and 4) "helped reduce the number of inappropriate referrals to special education."