President's message

The Academy of SCI Professionals: Multidisciplinary or interdisciplinary?

"ASCIP sounds truly unique," she said to me after I explained details about our organization, "but can you tell me, do you describe ASCIP as multi-disciplinary or interdisciplinary?"

I took a sip of my coffee as I prepared to answer.

Being in the rehabilitation field for many years, I am familiar with the difference between a multi-disciplinary and interdisciplinary team approach to patient care. Teamwork is one of the most fundamental factors in rehabilitation and an essential part of our quality of patient care. The interdisciplinary approach to patient care has shown better results for team effectiveness in comparison with a multi-disciplinary approach.¹⁻³

But how does this relate to an organization such as the Academy of Spinal Cord Injury Professionals (ASCIP), which has members from a number of disciplines? Does it matter if the organization is multidisciplinary or interdisciplinary?

A multidisciplinary approach within an organization could be discipline-oriented. Each discipline could function autonomously, working in parallel towards a shared goal; acknowledging one other's contributions to the organization and sharing successes. The leaders of each discipline may communicate with each other, but there might be little communication among the individual professionals.

In an interdisciplinary team, there is a commitment from each discipline to work synergistically with a shared strategy and an appreciation of how each discipline contributes to the common goals of the organization.⁴ In this approach, there is no hierarchy among the disciplines, and there is a higher level of communication and cooperation among the individual members of the organization.

Challenges may arise among multiple disciplines represented by one organization. This may be due to previous experiences in other settings (e.g. the acute care hospital). Turf battles amongst the different professions could develop as people vie for status or recognition within the organization in an attempt to replicate their past experiences in other settings.⁵ Individuals may express acceptance to working together as equals, but in practice, may exhibit reluctance.⁶ Personal anxiety and suspicion may limit the ability to trust and move forward. Professional rivalries could become roadblocks to implementing a genuine interdisciplinary approach.

Armed with my definitions, I thought about ASCIP's history, formed by the merging of separate organizations (American Paraplegia Society, American Association of Spinal Cord Injury Nurses, American Association of Spinal Cord Injury Psychologists and Social Workers, and Therapy Leadership Council) and our recent past as we came together, to the present.

The distinctive feature of ASCIP is its mission to represent all professionals who are involved in bettering the lives of persons with SCI-related disorders. Simply wanting the same goal, but with diverse group representatives, does not guarantee achieving this mission. ASCIP's governance board incorporates representatives of our membership as a whole, working together for the benefit of the overall organization, with the executive board chosen by the governance board based upon needs of the organization and talents of individuals.

In my view, it is critical that an organization such as ASCIP be truly interdisciplinary. The energy spent on maintaining silos creates barriers that would impede organizational growth. Old rivalries, if they exist, need to be replaced by cooperation and shared interests. The interdisciplinary approach to leadership and governance enhances communication and understanding among members of the different disciplines, creating an environment of mutual acceptance, respect and cooperation.

So I finished my sip of coffee and explained that ASCIP is, in fact, interdisciplinary and through this approach, growing stronger every day. This approach has allowed us to successfully achieve many elements of our mission. As ASCIP members, we will continue working together to meet the challenges facing our patients and our field.

References

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