Training future Canadian psychologists in developmental disabilities

Jonathan Weiss, Ph.D., C.Psych

Overview

- The need for developmental disabilities training for psychologists
- What do we know at the moment about training future psychologists in Canada?
- What do we need going forward?

Background

- Individuals with developmental disabilities (DD) are at higher risk for health and mental health problems or problem behaviours compared to peers, across the lifespan.
  - Greater risk due to biological vulnerability, intellectual impairment, and social adversity (Emerson & Hatton, 2007).
  - Marginalized, difficulties accessing services
  - Disparities in health and well being compared to the general population (Ouellette-Kuntz et al., 2005).
  - Inequalities exist in opportunities for mental health care (both in terms of assessments and interventions)

Importance of training

- Training of psychologists is critical
  - Controlled act of diagnosis:
    - Psychologists have increased responsibility yet without necessarily receiving the training
    - Psychologists must be trained in the use of standardized instruments for diagnosis of DD
  - But also in the assessment and treatment of mental health problems
    - Found in approximately 40% of individuals with DD (Beange, McElduff, & Baker, 1995; Emerson & Hatton, 2007; Cosper et al., 2007)
  - Designing behavioural interventions
  - Adapting conventional talk therapy
  - Supporting family caregivers
  - Mental health promotion and resilience
  - Informing policy

Importance of broad training

- With community living and an emphasis on normalization, there has been a shift away from specialized care, with community-based psychologists expected to provide primary psychological services
- What is the current state of the training for clinical and counseling psychologists in Canada?
  - In other healthcare professions
    - Many students do not have instruction in DD (McCreary, 2001)
  - The Canadian government does not entice professionals to enter the field of DD (McCreary, 2001)
Canadian training for professionals in DD

- Other professions are asking the same questions
  - Canadian medical students training (Burge, Ouellette-Kuntz, Isaacs, & Lunsy, 2008)
  - Almost all students mentioned they would benefit from increased interaction with individuals with DD and training on their care would be beneficial
  - Psychiatry Residents (Lunsky & Bradley, 2001; Burge, Ouellette-Kuntz, McCreary, Bradley, & Lechne, 2002)
  - There is inadequate training opportunities in many residency programs. Senior residents claim a need for increased curriculum on the topic of developmental disabilities
  - Canadian social work training (Burge, Druck, Caron, Ouellette-Kuntz, & Paquette, 1999).

International Training in DD

- United States
  - Lack of academic training in graduate programs (Wenges, 2007; VanderScie-Beyak, 2003)
  - 70% of clinical and 67% of counseling programs did not include DD in the curriculum (Hurley, Tomassile, & Pfadt, 1998)
  - In 1985, the NIMH identified DD as an area that should be incorporated into graduate psychology training programs (Roberts et al., 1985)
- United Kingdom
  - British Psychological Society wrote these guidelines to address the issue: Good Practice Guidelines for UK Clinical Psychology Training Providers for the Training and Consolidation of Clinical Practice in Relation To People with Learning Disabilities (2005)

State of training for Canadian psychology students


- Developed online survey for graduate students based on medical student survey (Burge, Ouellette-Kuntz, Isaacs, & Lunsy, 2008)
- Sent invitations to every Director of Training of a clinical or counseling psychology graduate program in Canada listed on the CPA or CCPPP websites
- Follow-up email invitations

Overall sample

- 474 responses
  - 29 Universities
  - 8 provinces (Quebec, Ontario, Alberta, BC, Nova Scotia, Saskatchewan, Manitoba, New Brunswick)
  - 303 responses from CPA accredited programs (25 universities)

Broad definition of DD

- “Children, youth and adults who have significantly greater difficulty than most people with intellectual and adaptive functioning and have had such difficulties from a very early age (or the developmental period prior to age 10). ‘Adaptive functioning means carrying out everyday activities such as communication and interacting with others, managing money, doing household activities and attending to personal care. This definition of developmental disability also includes children, youth and adults with developmental disorders such as Fetal Alcohol Spectrum Disorders or Autism Spectrum Disorders (National Coalition on Dual Diagnosis, 2005, p. 2).’

Responses from CPA accredited programs

- N = 303
Intended areas of competence

- Clinical Counseling
- Health
- School Rehabilitation
- Neuropsych I/O

Intended client groups

- Adult
- Adolescent
- Family
- Child
- Couples
- Geriatric

Type of program

- Program
- General clinical orientation
  - Cognitive/Behavioural
  - Eclectic
  - Integrative
  - Psychodynamic
  - Other
  - Interpersonal
  - Humanistic
  - Behavioural
  - Experiential

Training experiences

- 38% felt that training in DD is very important, 56% felt it is somewhat important
- 85% noted that training in DD would improve their ability to work with other populations
- How well do students feel they are educated about DD?
  - Poor: 55%
  - Sufficient but need more: 40%
  - Sufficient or excellent: 5.5%
- No difference after removing the largest two contributors (Université de Montréal and York University)

- Percentage of students who have taken a mandatory or elective course on developmental disabilities and their perception of whether it was sufficient in its coverage of DD.

<table>
<thead>
<tr>
<th>Rating</th>
<th>Elective</th>
<th>Mandatory</th>
</tr>
</thead>
<tbody>
<tr>
<td>No course available or not taken</td>
<td>85.5</td>
<td>84.5</td>
</tr>
<tr>
<td>Yes, but it was insufficient</td>
<td>3.2</td>
<td>6.0</td>
</tr>
<tr>
<td>Yes, it was sufficient</td>
<td>8.5</td>
<td>7.7</td>
</tr>
<tr>
<td>Yes, it was extensive</td>
<td>2.8</td>
<td>1.8</td>
</tr>
</tbody>
</table>
Is most training occurring in pediatric/child settings?
- Population of focus:
  - 18% specified lifespan (child, adolescent, AND adult)
  - 30% Child focused
  - 45% Adult focused

- Adult-only report less training in DD than child or lifespan
  - Fewer volunteer / work experiences outside of school
  - Fewer courses
  - Less training in assessment and intervention of DD
  - Adult-only students rate training in DD as less important
  - Fewer foresee serving clients with DD in the future

Does training depend on graduate level (MA vs. PHD)?
- No difference in the proportion of
  - Courses in DD taken
  - Foreseeing working with clients with DD in the future
  - Ratings of the importance of DD training

- MA students report less overall training in DD than PhD students and less around diagnosis of DD

Training experiences
- Of students who have observed or conducted an assessment, 48% have never done so with a person with DD
  - With senior students (> PhD3): 40%

- Of students who have observed or conducted psychotherapy, 88% have never done so with a person with DD
  - With senior students (> PhD3): 78%

How could training be improved?

What fosters interest in working in DD?

- Attitudes (i.e., interest) in working with people with DD is an important reason why professionals get training in the field

- In medicine (Edwards, Lennox & White, 2007), social work (Burge et al., 1999), and psychology (Lennox & Chapling, 1996)

What fosters interest in working in DD?
- Of the 458 students surveyed, 57% indicated an intention to work with people DD in their future practice

- 79% of students thought that specialists should provide care to people with DD, vs. all practicing psychologists

- This was especially true for students who did not intend to work with people DD
### What fosters interest in working in DD?

- Contact with people with DD
  - Formal educational
    - Observed or conducted an assessment: 46%
    - Observed or conducted psychotherapy: 17%
    - Took a course in DD: 17%
  - Informal
    - 12% had a close family member with DD
    - 62% had known someone with a DD personally
    - 49% had volunteered or worked with people with DD
    - 39% saw people with DD regularly, where they live, work, or go to school

### What predicts interest?

- In terms of formal educational experiences
  - Taking an elective course in DD was the strongest predictor of wanting to work with DD in the future (6 times more likely), followed by receiving assessment experience (2.9 times more likely to indicate interest)

- In terms of informal experiences
  - Seeing people with DD regularly was the strongest predictor (3.5 time more likely), followed by having worked or volunteered (2 times more likely)
  - Having a personal relationship was not as predictive

### Discussion

- Students want more training than they receive, but when and how?
  - Within the university
    - The challenge of balancing specialized training in DD with the requirements of a program
    - A lack of faculty to provide the training
  - Within the community
    - Practica and internship rotations are an important place to receive training (LaGreca et al., 1988)
    - Limitations to the practicum approach: Only specific students are enrolled in those settings

### Internship Resources

- **Child**
  1. Holland Bloorview Kids Rehab Internship Program
  2. Concordia University Psychology Internship Program: Preschool Pediatric Psychology
  3. Children’s Hospital of Eastern Ontario: Dual Diagnosis team and Preschool Autism Program
  4. Edmonton Consortium: Pediatric rotation
  5. Hamilton Health Sciences: Specialized Developmental and Behavioural Services / PDD Services
  6. IWK Grace Health Ctr.: School Aged Autism Team
  8. Nova Scotia Capital District Mental Health: Dual Diagnosis rotation
  9. Regina Qu’Appelle Health Region: Wascana Rehab Centre Children’s Program
  10. Sarnia Health Region: Developmental rotation
  11. Kingston Internship Consortium: Ongwanada

### Discussion

- There is a divide in training and interest depending on the age-focus of the student
  - It is important to consider DD as a lifespan issue, not a child issue
- Providing elective courses and assessment training in school may serve to increase student interest
  - But experiences outside of school likely also determine student choice
- Taking a “diversity” approach to training, infusing DD content into all other courses (Fouda, 2006)
  - In existing courses
  - In guest lecturers that can make the population interesting and accessible
Discussion

- In psychological training, there is an emphasis on "competencies"
- Most students feel that a specialist in DD should provide psychological services
- Does this reflect the way our community and health services are going?
- Perhaps a balance on specialist training for some and foundational training for all
- A shift in accreditation policy
- What if the Canadian Psychological Association asked for more DD content in its programs?

References


Thank you!

Questions?

Jonathan Weiss, PhD,CPsych
Assistant Professor
Dept. of Psychology
York University
jonweiss@yorku.ca
www.yorku.ca/jonweiss
Tel: 416-736-2100 ext. 22987