

## ***Behavior and Social Issues Special Section on Interprofessional Collaboration***

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*Behavior and Social Issues (BSI)* invites papers for a special section on Interprofessional Collaboration targeted for the Fall 2025 issue.

There have been recent reflections by some in our field that applied behavior scientists have some difficulty in sustaining collaborative and caring professional relationships with caregivers (e.g., Taylor et al., 2018). This also has implications for relationships and collaboration with other professionals. Difficulty with collaboration can have a negative impact on the discipline and practice as well as on the treatment outcomes for the persons and communities with whom and with which we provide behavioral services and supports (Slim & Reuter-Yuill, 2021). One reason for the lack of skills in the areas of collaboration may be a lack of training and mentorship opportunities focused on relationship development and collaboration across disciplines (Kelly & Tincani, 2013). Recently, Friedman and colleagues (2024) demonstrated the effects of training to improve self-compassion and collaboration skills of providers of behavioral services. Despite calls for improved interprofessional collaboration and the reported benefits of this process, this is one of the first studies in the field of behavior science to focus on teaching these skills to professionals.

In addition to interprofessional collaboration simply being good professional practice, behavior science runs the risk of being left behind other professions if we ignore this evolving approach to effective care which is increasingly being more commonly used by a variety of other professions. Many professions' credentialing bodies have committed to using a model of interprofessional collaboration. As behavior scientists and practitioners spend more and more time intervening with and advancing social change in educational, business, and health-care sectors, our profession's sustainability may depend on our ability to collaborate using shared frameworks such as the competencies of interprofessional collaboration (IPC; Kirby et al., 2022).

The Interprofessional Education Collaborative (2023) describes the core competencies of IPC as

- Values and Ethics - Work with team members to maintain a climate of shared values, ethical conduct, and mutual respect.

- Roles and Responsibilities - Use the knowledge of one's own role and team members' expertise to address individual and population health outcomes.
- Communication - Communicate in a responsive, responsible, respectful, and compassionate manner with team members.
- Teams and Teamwork - Apply values and principles of the science of teamwork to adapt one's own role in a variety of team settings.

Terms, such as interdisciplinary have been used for a long time in healthcare. Interdisciplinary implies two or more professionals from a variety of disciplines (e.g., nurse, social worker, politician, administrator, faith-based leader, behavior scientist) aligning resources in educational, clinical, societal, and policy activities (Parse, 2015) among many others. An interdisciplinary relationship is complementary; however, the uniqueness of each discipline remains intact in process and implementation. While this may be more beneficial than setting and implementing isolated treatment goals, it may result in a hierarchical approach to treatment. In an interprofessional approach to treatment, all members of the treatment team (including the client/patient, family, community members) come together using a non-hierarchical, collaborative framework in which all team members' ideas, skills, knowledge, and training are equally valued. Another term, transdisciplinary, has been used to characterize a collaborative approach to research and problem-solving. It has been characterized as a wholistic way of seeing the world (see Rigolot, 2020) and often pertains to large societal concerns such as Diversity, Equity, Inclusion and Accessibility (DEIA) or issues facing persons disproportionately affected by air pollution or lack of financial and other resources (Darian-Smith & McCarty, 2016).

This special issue seeks to explore the potential importance of embracing an IPC model in behavior science and practice. We welcome submissions that address the practical implications of implementing a model of IPC in practice; the role of behavior scientists as part of interprofessional teams (see Summers et al., 2022); examinations of the benefits and barriers for the field, the practitioner, and/or patients/clients when an IPC model is incorporated in our practice; and data-based evaluations of the outcomes of implementation or use of an interprofessional model of care and/or practice. Scholarly recommendations for future directions in research and practice using an IPC approach will also be considered. Submissions including other collaborative approaches to practice, such as interdisciplinary or transdisciplinary are also encouraged. Because of the nature of this special section, contributions that involve collaboration with other disciplines are strongly encouraged.

Papers may be submitted via the *BSI* portal no later than December 15, 2024 (<https://www2.cloud.editorialmanager.com/bsis/default2.aspx>). Be sure to indicate the submission is for consideration in the special section on Interprofessional Collaboration.

## References

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