

# Reaching Across the Aisle: The Benefits of Interdisciplinary Work in Graduate School

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As most graduate students know, earning a master's or a PhD can be an isolating experience. Students take the same classes, from the same faculty, with the same cohort of students. Furthermore, the goal of advanced degrees is to develop a focused and specialized expertise in the field. As a result, many graduate students become entrenched in the I-O world and miss opportunities to step out of this specialization and experience the value offered by psychologists from different fields.

In the past, there has not been much discussion of the benefit of interacting with other psychologists. Generally, discussion has been limited to the benefits of clinical versus counseling versus I-O backgrounds on the outcomes of executive coaches (e.g. Brotman, Liberi, & Wasylshyn, 1998; Harris, 1999). There has been a recent uptick, however, in interest regarding bridging the gap between I-O psychologists and practitioners/researchers in other fields. For example, *The Industrial-Organizational Psychologist* added a feature on organizational neuroscience in 2013, which regularly incorporates interdisciplinary content. Similarly, in a recent article discussing I-O graduate education, Wiese and Fullick

(2014) emphasize the importance of having a solid understanding of other specializations. Discussion about the looming possibility of general licensure for I-O psychologists also emphasizes the importance of incorporating aspects of biological psychology, social psychology, and individual differences into training in the field (Kottke, Shoenfelt, & Stone, 2014). Furthermore, I-O psychologists' professional networks can be greatly enriched by forging connections with other professional psychologists, given that many people in the I-O field come from a social, clinical, or counseling background (Silzer & Parson, 2012). With the growing importance of biological and cognitive psychology, it is vital for I-O psychologists to stay abreast of current findings outside of I-O (Ward & Becker, 2013).

This is not to say that I-O students must start taking additional classes in other areas; although interdisciplinary coursework is helpful, time in graduate school lasts (hopefully) only a few years. Thus, one possible solution is to find applied experiences that can help graduate students in I-O connect to student colleagues in other specializations. In this article, we outline our own experiences

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with an interdisciplinary project we participated in at Minnesota State University, Mankato.

### **Background: MNSU Clinical and I-O Psychology Programs**

At MNSU, the clinical and I-O programs share a number of characteristics. Both programs are lockstep, so there are a limited number of opportunities for students from each program to interact. Specifically, the programs combine students only in statistics and psychometric courses. Although students may opt to take extra classes in other programs, this is not a common occurrence.

Although both programs offer master's degrees, the goals of these degrees differ. Students in the clinical program have an ultimate goal of going on to earn a PhD or PsyD (approximately 85% join a doctoral program the fall after graduation). Meanwhile, the I-O program is meant to be a terminal degree; only 5–10% of students choose to pursue a doctoral degree immediately after graduation. Both programs have a similar number of applicants and are roughly the same size (with about 10 students per cohort). Both the clinical and I-O program emphasize a balance between understanding theory and providing applied experiences.

Despite these similarities, socialization and collaboration across programs is rare; because students also compete for graduate assistantships and other resources, the relationship between

groups can be adversarial. Faculty members often discuss ways to help students interact more regularly. In the fall of 2013, Dr. Buchanan (from the clinical program) and Dr. Campana (from the I-O program) identified a consulting project that provided an excellent opportunity to encourage students in both programs to collaborate. We managed this project through the I-O department's consulting business, the Organizational Effectiveness Research Group (OERG).

The OERG is a student-run consulting organization that conducts projects locally, nationally, and internationally. During their 2 years in the I-O program, students attend client meetings, analyze data, and create reports and presentations under faculty supervision. Students typically work on 3 to 5 projects during their graduate training and thus have practical experience in consulting that they can leverage as they enter the job market. Because the projects taken on by OERG are so diverse, students and faculty sometimes need to find colleagues with relevant expertise to lend a hand on some projects.

### **Job Analysis Project: Initial Plans and Expectations**

Dr. Buchanan had been contacted by a local organization that owns several memory care facilities throughout the state. Specifically, the organization's COO was concerned that the staffing procedures used by each location were not standardized; as a result, some locations had nearly 100% turnover during the year, whereas others had almost no

turnover. Dr. Buchanan recognized the need for I-O psychology and referred the COO to the OERG. In initial joint meetings between the COO, Dr. Buchanan, and Dr. Campana it became clear that a job analysis would help the COO understand what was necessary for the job, if those requirements differed across locations, and what types of selection tools he might use in the future. However, we also recognized the specific terminology and demands associated with the job would be unfamiliar to I-O students. This presented a perfect opportunity to include interested clinical students to help develop initial checklists and to assist in interviews to better understand the duties and concerns of caretakers in these positions.

The faculty members solicited volunteers for the project. Ultimately, the team consisted of Chelsea (a second-year I-O student), Brittany (a first-year I-O student), Shelby (a first-year clinical student) and Tracy (a student who started her first year in the clinical program and moved into the I-O program at the beginning of her second year). The collaboration provided an exciting opportunity to see what each program could bring to the table and allowed us to reflect on the similarities and differences between our respective fields.

### **Learning About the Field of I-O: Tracy, Brittany, and Chelsea's Perspectives**

Because MNSU's master's program is heavily practice based, there is a strong focus on gaining real-world experiences to develop consulting skills. As part of their first semester, students in the

program must complete a job analysis; for convenience, the jobs we typically analyze for class are within a narrow spectrum of work and are in familiar areas, such as retail. This project is meant to give us a sense of how the job analysis process works while keeping the actual content of the job analysis relatively simple.

One of the surprises for this interdisciplinary project was the importance of the job context and how difficult this was to capture in the analysis. Reading job descriptions, studying O\*NET, and creating a checklist of KSAs for the project did not prepare us for what we heard from job incumbents about the difficulties of their job context. One particularly memorable example was a caretaker who said the most difficult part of her job was the guilt she felt when she had to come in while sick because of understaffing; a resident fell ill shortly thereafter, and the caretaker felt personally responsible for the condition of this resident. Although O\*NET indicated that stress tolerance was required for the job, this story vividly illustrated what these caretakers deal with on a daily basis.

This also served as a reminder that in the real world, nothing is "by the book," and capturing the human experience of work is less straightforward than it seems. Job analysis can seem like a dry and tedious process within the classroom; however, having an opportunity to see the nuances of a job that are difficult to capture using only KSAs underscores the importance and complexity of the process. Interviewing these caretakers about their jobs gave

us the opportunity to connect with the people we were serving and understand how our work would improve their quality of work life.

We also learned how our work would improve the quality of life for residents. High levels of turnover at these facilities can be extremely disorienting to residents. Helping to identify appropriate applicants would help these residents feel safe in their new home. In the I-O realm, the value of job analysis is communicated as an abstract statistical or monetary concept. In this case, we could see how effective organizational practices would have important effects on how comfortable these residents would be in their last years of life. Ultimately, these interviews provided us with context and personal insight that we would have missed by using other research techniques.

### **Learning About the Field of I-O: Shelby's Perspective**

As a clinical student, my exposure to I-O psychology had been fairly limited, and I was uncertain of how my clinical skills would play into the job analysis process. I felt concerned about the goals of the job analysis. My understanding of I-O suggested that their ultimate goal was to make organizations more efficient and profitable. A number of clinical students had negative attitudes about the ethical orientation of I-O psychology; being ethical and using psychology to improve quality of life are important values for me, and I was not willing to sacrifice these values to help an organization.

As we worked on the project, I realized that although making organizations efficient and effective is a main goal of I-O psychology, it is not necessarily motivated by profits. Once I immersed myself in the I-O experience of job analysis, I recognized the inaccuracy of some of my stereotypes of the I-O field. Specifically, I was surprised at how well-organized I-O methodology was. I had a general sense of how a job analysis might work in describing a job, but the methodology was more straightforward and practical than I expected.

In addition, just as I-O uses principles from other areas of study, I started to see how I-O principles might help me to do my own work more effectively. For example, it was interesting to see how nursing assistants interacted with residents while we visited the memory care facilities. Based on my clinical knowledge about individuals with cognitive impairment, it was alarming to see how ineffective and potentially offensive the caretakers' communication was with residents. Understanding how caretakers go about their jobs is beneficial to me in order to figure out how we can improve communication with residents to minimize their distress.

As we worked on the project, we saw a number of opportunities where I-O and clinical students could partner to use their specific skill sets to devise comprehensive interventions that could have important outcomes for memory care patients. For example, working together to develop effective training programs for caretakers on how to speak respectfully to residents

and redirect problematic behaviors would help these caretakers do their jobs more effectively. This, in turn, would have a huge impact on residents and their families. As a result of our collaboration, I started to recognize the value of I-O methodology and tools. I believe that, as a practitioner, this experience will help me to take a broader perspective when solving practical problems I encounter.

### **Learning About Clinical Work:**

#### **Tracy, Brittany, and Chelsea's Perspectives**

One important benefit of having Shelby on our team was the credibility she brought to our clients. Few of the job incumbents understood what I-O psychology was, and they were hesitant to speak openly about their jobs. Shelby's presence often helped our interviewees to open up about their daily experiences because Shelby was able to relate to the caretaking work they had done in a way we could not. Shelby also had more experience in active listening and counseling skills. It was helpful to see her approach to caretakers versus the way we communicated with managers and executives on other projects.

This project was also a lesson about the limitations of our training. Even though we might be experts in jobs in general, we need to know what our boundaries are and be ready to collaborate with people who might know more about the nuances of a particular job. It was also a helpful reminder about the influence of context. A nursing-home environment is different from the typical corporate-type job we learn about in our courses, and our

interviewing approach needed to mirror this environment to help put our subject matter experts at ease.

For example, during an interview, a caretaker identified that having knowledge about the nature of Alzheimer's and dementia in patients was helpful for new hires. One common problem he encountered with new hires was that they would say to residents "Remember, you are not supposed to do that." We noted this point, and during our ride home, Shelby provided us with some insight into why this approach was problematic. Many residents recognize that they have memory problems, and it is frustrating and humiliating to them to be told to remember something. Shelby explained that it is more effective to redirect residents' attention away from problematic behavior into a more constructive activity. Her insight emphasized the importance of good training for new employees who do not have experience working specifically in memory care centers. It also demonstrated the value of her clinical training in explaining why an approach was ineffective in a way that the caretaker was unable to articulate to us.

### **Learning About Clinical Work: Shelby's Perspective**

I learned a lot about clinical work through the narratives of certified nursing assistants and their experiences in a helping profession. Previously, I considered my "clients" to be patients. I never thought about the possibility of having employees who work with patients

as my intended target. Through this project, I realized how useful and helpful clinical skills could be when working in an occupational setting because employee distress and emotional strain can be such serious problems in helping professions. I also learned that clinical psychology is pertinent in helping residents of assisted living facilities. Not only can clinical psychology have a direct effect on residents by helping them adapt to their new living environment, but it can also support this adjustment by providing adequate services, staffing, and training to the caregivers who assist them on a daily basis. Overall, I valued having an opportunity to practice my clinical skills in a setting that is different from treatment sessions with patients.

### **Additional Benefits of Collaboration**

Ultimately, this project provided a number of benefits we hadn't initially expected. First, it was rewarding to get a fresh perspective on our own fields. This experience helped us appreciate what our field contributes to society and psychological science and how collaborating with people who have viewpoints that are different from our own can enrich and deepen our understanding of our own field.

We also gained a new respect for the skills sets possessed by students in other specializations. Because our clinical colleague will someday work in an organization, understanding I-O principles may prove useful in her career. Likewise, the I-O students benefitted from learning more about

using a clinical paradigm; given that many people in the I-O field come from a social, clinical, or counseling background, meeting other psychologists and understanding their perspective can support building a strong professional network.

We also appreciated the chance to get to know someone outside of our own programs. It is easy to become overly reliant on our own cohort for socialization in graduate school. This project gave us an opportunity to expand our support system. Given that depression and anxiety disorder rates are estimated to be about 13% among graduate students (compared to a 5% prevalence rate among most 18–39 year-olds), building a broad social-support network can support better mental health in graduate programs (Eisenberg, Gollust, Golberstein, & Hefner, 2007; El-Ghoroury, Galper, Swaqdeh, & Bufka, 2012; Pratt & Brody, 2008).

Also, as we found, associating with other students can help to break down stereotypes and lack of knowledge about graduate work in other specializations. Given that students within a program cooperate with their colleagues with research and classes, while competing with students from other programs for research and travel funding, working together can be one way to prevent or change negative stereotypes (Sherif, 1966).

Because I-O uses principles from so many psychological disciplines, it is easy to find overlap on topics. Even at MNSU, a new flight simulator in the aviation department is a way for I-O students to work with

cognitive psychologists on research. Similarly, a colleague with a background in social psychology is working on lie detection research, and we are planning on working with her to incorporate the job interview context into her next study. Taking the time to reach across the aisle and learn about what our colleagues do has definitely enriched our own graduate experiences.

## References

- Brotman, L. E., Liberi, W. P., & Wasylyshyn, K. M. (1998). Executive coaching: The needs for standards of competence. *Consulting Psychology Journal: Practice and Research*, 50, 40–46.
- Eisenberg, D., Gollust, S. E., Golberstein, E., & Hefner, J. L. (2007). Prevalence and correlates of depression, anxiety, and suicidality among university students. *American Journal of Orthopsychiatry*, 77, 534–542.
- El-Ghoroury, N. H., Galper, D. I., Swaqdeh, A., & Bufka, L. F. (2012). Stress, coping, and barriers to wellness among psychology graduate students. *Training and Education in Professional Psychology*, 6, 122–134.
- Harris, M. (1999). Practice network: Look it's an I-O psychologist...No it's a trainer... No it's an executive coach! *The Industrial-Organizational Psychologist*, 36(3), 38–48.
- Kottke, J. L., Shoenfelt, E. L., & Stone, N. J. (2014). Educating industrial-organizational psychologists: Lessons learned from master's programs. *Industrial and Organizational Psychology: Perspectives on Science and Practice*, 7, 26–30.
- Pratt, L. A., & Brody, D. J. (2008). Depression in the United States household population, 2005–2006. *NCHS Data Brief*, 7, 1–8. Retrieved from <http://www.cdc.gov/nchs/data/databriefs/db07.pdf>
- Sherif, M. (1966). *In common predicament: Social psychology of intergroup conflict and cooperation*. Boston, MA: Houghton Mifflin.
- Silzer, R., & Parson, C. (2012). Is SIOP inclusive? A review of the membership composition of Fellows, awards, appointments, and volunteer Committees. *The Industrial-Organizational Psychologist*, 49(3), 57–71.
- Ward, M. K., & Becker, B. (2013). Organizational neuroscience: A new TIP column. *The Industrial-Organizational Psychologist*, 51(1), 78–80.
- Wiese, C. W. & Fullick, J. M. (2014). The fantastic four years: Recommendations for industrial-organizational programs. *Industrial and Organizational Psychology: Perspectives on Science and Practice*, 7, 21–25.

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