Interprofessional collaboration is considered pivotal for safe and effective healthcare. Few people will contest the 'why?' of interprofessional collaboration. Interprofessional education (IPE) exists when students of two or more professions learn with, from and about other professions, to improve collaboration and the quality of care.

Implementing IPE is not for the faint-hearted: when IPE is not carefully developed and implemented, existing negative stereotypes among students and their educators can be enhanced. Engaging students in IPE and thus influencing their attitudes towards interprofessional collaboration (IPC) is important, because negative attitudes can stand in the way of learning.

In this thesis, Interprofessional Education is placed in the context of three frameworks concerning motivation in education. The three frameworks all concern the optimal alignment of teacher guidance and student's self-guidance at different stages of the training.

- The framework for Learning-Oriented Teaching (LOT model) is related to the facilitators of IPE at the individual, curricular and cultural level. The LOT model is concerned with the 'What? Why? and How?' of learning for students and teachers.
- The continuum of quality of motivation, described by Self-determination Theory is used to explain how IPE wards can become an autonomy-supportive learning environment by which students can incorporate IPE in their value system.
- The scaffolding of clinical reasoning of students from all professions is related to an existing Scaffolding framework, which is then used to explain the pedagogical approach.

Finally, for interprofessional decision making, the ability to communicate with other professionals about one's professional perspective is considered an important factor. The place for each professional perspective is indicated as connecting the communication skills (horizontal bar) with the profession specific skills (vertical bar) within the concept of 'T-shaped professionals'.
Interprofessional collaboration is considered pivotal for safe and effective healthcare. Few people will contest the ‘why?’ of interprofessional collaboration. Interprofessional education (IPE) exists when students of two or more professions learn with, from and about other professions, to improve collaboration and the quality of care.

Implementing IPE is not for the faint-hearted: when IPE is not carefully developed and implemented, existing negative stereotypes among students and their educators can be enhanced. Engaging students in IPE and thus influencing their attitudes towards interprofessional collaboration (IPC) is important, because negative attitudes can stand in the way of learning.

In this thesis, Interprofessional Education is placed in the context of three frameworks concerning motivation in education. The three frameworks all concern the optimal alignment of teacher guidance and student’s self-guidance at different stages of the training.

• The framework for Learning-Oriented Teaching (LOT model) is related to the facilitators of IPE at the individual, curricular and cultural level. The LOT model is concerned with the ‘What? Why? and How?’ of learning for students and teachers.
• The continuum of quality of motivation, described by Self-determination Theory is used to explain how IPE wards can become an autonomy-supportive learning environment by which students can incorporate IPE in their value system.
• The scaffolding of clinical reasoning of students from all professions is related to an existing Scaffolding framework, which is then used to explain the pedagogical approach.

Finally, for interprofessional decision making, the ability to communicate with other professionals about one’s professional perspective is considered an important factor. The place for each professional perspective is indicated as connecting the communication skills (horizontal bar) with the profession specific skills (vertical bar) within the concept of ‘T-shaped professionals’.