

Association of Marital and Family Therapy Regulatory Boards (AMFTRB)

Test Specifications for the Examination in Marital and Family Therapy

Practice Domains

Domain **The Practice of Marital and Family Therapy (22.5%)**

01

This domain encompasses tasks related to incorporating systemic theory and perspectives into practice activities, and establishing and maintaining ongoing therapeutic relationships with the client¹ system.

Domain **Assessing, Hypothesizing, and Diagnosing (22.5%)**

02

This domain encompasses tasks related to assessing the various dimensions of the client system, forming and reformulating hypotheses, and diagnosing the client system in order to guide therapeutic activities.

Domain **Designing and Conducting Treatment (32.5%)**

03

This domain encompasses tasks related to developing and implementing interventions with the client system.

Domain **Evaluating Ongoing Process and Terminating Treatment (7.5%)**

04

This domain encompasses tasks related to continuously evaluating the therapeutic process and incorporating feedback into the course of treatment, as well as planning for termination.

Domain **Maintaining Ethical, Legal, and Professional Standards (15%)**

05

This domain encompasses tasks related to ongoing adherence to legal and ethical codes and treatment agreements, maintaining competency in the field, and professionalism.

¹The term client refers to the individual, couple, family, group, and other collaborative systems that are a part of treatment.

Task Statements

01 The Practice of Marital and Family Therapy

- 01.01 Practice therapy in a manner consistent with the philosophical perspectives of the discipline.
- 01.02 Maintain consistency between systemic theory and clinical practice.
- 01.03 Integrate individual treatment approaches within systemic treatment approaches.
- 01.04 Demonstrate sensitivity to the client's context(s) (e.g., spirituality, gender, sexuality, culture, class, and socio-economic condition).

- 01.05 Establish an atmosphere of acceptance and safety by attending to the physical environment, language, and client's needs.
- 01.06 Establish therapeutic relationship(s) with the client system.
- 01.07 Attend to the interactional process between the therapist and client (e.g., therapeutic conversation, transference, and counter-transference) throughout the therapeutic process.

02 Assessing, Hypothesizing, and Diagnosing

- 02.01 Assess client's verbal and non-verbal communication to develop hypotheses about relationship patterns.
- 02.02 Identify boundaries, roles, rules, alliances, coalitions, and hierarchies by observing interactional patterns within the system.
- 02.03 Assess system dynamics/processes.
- 02.04 Assess how individual members of the client system understand their relational issues.
- 02.05 Formulate and continually assess hypotheses regarding the client that reflect contextual understanding.
- 02.06 Review background, history, context, client beliefs, external influences, and current events surrounding the origins and maintenance of the presenting issue(s).
- 02.07 Identify client's attempts to resolve the presenting issue(s) and the individuals in the family, community, and professional systems involved in the problem resolution process.
- 02.08 Assess client's level of economic, social, emotional, and mental functioning.
- 02.09 Assess the family life cycle stage of the client.
- 02.10 Assess the relationship between the individual developmental stage and the family life cycle stage.
- 02.11 Assess developmental stage of members of the client system for impact on problem formation, maintenance, and resolution.
- 02.12 Assess strengths and resources available to client.
- 02.13 Assess level of mental or physical risk or danger to the client (e.g., suicide, domestic violence, elder abuse).
- 02.14 Administer and review data from standardized and/or non-standardized tests.
- 02.15 Assess and diagnose client in accordance with formal diagnostic criteria (e.g., DSM and ICD) while maintaining a systems perspective.
- 02.16 Integrate diagnostic impressions with system(s) perspective/assessment when formulating treatment hypotheses.
- 02.17 Assess influence of individual diagnosis on the client system.
- 02.18 Assess influence of biological factors and medical conditions on the client system.
- 02.19 Identify external factors (events, transitions, illness, trauma, etc.) affecting client functioning
- 02.20 Determine need for evaluation by other professional systems.
- 02.21 Collaborate with client, professional, and community systems, as appropriate, in establishing treatment priorities.

03 Designing and Conducting Treatment

- 03.01 Create therapeutic contracts.
- 03.02 Define short- and long-term goals by organizing and interpreting assessment information, in collaboration with client as appropriate.
- 03.03 Develop a treatment plan reflecting a contextual understanding of presenting issues.
- 03.04 Develop and monitor safety plan to address identified risk (domestic violence, suicide, elder abuse).
- 03.05 Develop consensus on the definition of presenting issues.
- 03.06 Choose interventions based on application of theory and research (individual, couple, group, and

family).

- 03.07 Construct rationale for selecting a therapeutic intervention.
- 03.08 Determine sequence of treatment processes and identify which members of the client system will be involved in specific tasks and stages.
- 03.09 Choose therapeutic modalities and interventions while considering the uniqueness of each client.
- 03.10 Integrate multiple types and sources of information while conducting therapy.
- 03.11 Collaborate with collateral systems, as appropriate, throughout the treatment process.
- 03.12 Use genograms and/or family mapping as therapeutic interventions when appropriate.
- 03.13 Facilitate change through restructure and reorganization of the client system.
- 03.14 Identify and explore competing priorities for client issues to be addressed in treatment.
- 03.15 Assist client(s) in developing decision-making and problem-solving skills.
- 03.16 Assist client(s) in developing appropriate verbal and non-verbal emotional communication in their relational context(s).
- 03.17 Attend to the homeostatic process and its impact on the system's ability to reach therapeutic goals.
- 03.18 Assist client to change perspective of the presenting issues to facilitate appropriate solution(s).
- 03.19 Influence behavior and/or perceptions through use of techniques such as metaphor, re-framing, inventiveness, creativity, humor, and prescribing the symptom.
- 03.20 Enable client to attempt new/alternate ways of resolving problems.
- 03.21 During treatment planning, identify criteria upon which to terminate treatment.

04 Evaluating Ongoing Process and Terminating Treatment

- 04.01 Use relevant theory and/or research data in the ongoing evaluation of process, outcomes, and termination.
- 04.02 Evaluate progress of therapy in collaboration with client and collateral systems as appropriate.
- 04.03 Modify treatment plan with client and collateral systems as appropriate.
- 04.04 Collaboratively plan for termination of treatment.
- 04.05 Terminate therapeutic relationship as appropriate.

05 Maintaining Ethical, Legal and Professional Standards

- 05.01 Adhere to ethical codes of relevant professional organizations and associations.
- 05.02 Adhere to relevant statutes, case law, and regulations affecting professional practice.
- 05.03 Practice in accordance with one's own area of expertise (i.e., education, training, and experience).
- 05.04 Maintain awareness of the influence of the therapist's own issues (e.g., family-of-origin, gender, culture, personal prejudice, value system, life experience, supervisor, etc.).
- 05.05 Maintain continuing competencies essential to the field (e.g., continuing education, critical reading of professional literature, attendance at workshops and professional meetings, supervision, and consultation).
- 05.06 Demonstrate professional responsibility and competence in forensic and legal issues (e.g., court-ordered cases, testimony, expert witness, custody hearings, etc).
- 05.07 Adhere to treatment agreements with clients.
- 05.08 Respect the rights and responsibilities of clients.
- 05.09 Assist clients in making informed decisions relevant to treatment (e.g., filing third-party insurance claims, collateral systems, alternative treatments, limits of confidentiality).
- 05.10 Consult with colleagues and other professionals as necessary regarding clinical, ethical, and legal issues and concerns.
- 05.11 Respect the roles and responsibilities of other professionals working with the client.
- 05.12 Maintain accurate, timely, and thorough record keeping.

05.13 Integrate technology (e.g., Internet, fax, telephone, email) into the treatment process, as appropriate.

Knowledge Statements

- 01 Foundations of marital therapy and family therapy (e.g., Sullivan, Jackson, Ackerman, Bowen, Bateson, Weakland, Haley, Satir)
- 02 History of the marital and family therapy field
- 03 Family studies and science (e.g., step families, remarriage, blended families)
- 04 Marital studies and science
- 05 General Systems Theory
- 06 Models of family therapy and their clinical application
- 07 Individually based theory and therapy models (e.g., person-centered, Gestalt, RET, behavioral)
- 08 Impact of couple dynamics on the system
- 09 Family belief systems and their impact on problem formation and treatment
- 10 Family homeostasis as it relates to problem formation and maintenance
- 11 Family life cycle stages and their impact on problem formation and treatment
- 12 Human development throughout the lifespan (e.g., physical, emotional, social, psychological, spiritual, cognitive)
- 13 Human sexual anatomy, physiology, and development
- 14 Sexually transmitted diseases
- 15 Theories of personality
- 16 Child, adolescent, and adult psychopathology
- 17 Impact of developmental disorders (e.g., child and adolescent, geriatrics) on system dynamics
- 18 Trauma (e.g., historical, current, and anticipatory trauma)
- 19 Risk factors for and patterns of abuse, (abandonment, physical, emotional, verbal, sexual)
- 20 Risk factors, stages, and patterns of grief response for loss (death, sudden unemployment, runaway children)
- 21 Risk factors and relational patterns of endangerment (rape, domestic violence, suicide, self-injurious behavior)
- 22 Behaviors, psychological features, or physical symptoms that indicate a need for medical, educational, psychiatric, or psychological evaluation
- 23 Diagnostic interviewing techniques
- 24 Diagnostic and Statistical Manual of Mental Disorders (DSM) and International Statistical Classification of Diseases & Related Health Problems (ICD)
- 25 Standardized psychological assessment tests (e.g., MMPI)
- 26 Non-standardized assessment tests (e.g., genograms, family maps, scaling questions)
- 27 Relational diagnostic tests (e.g., Dyadic Adjustment Scale, Marital Satisfaction Inventory, FACES, Prepare/Enrich, etc.)
- 28 Dynamics of and strategies for managing transference and counter-transference (use of self of therapist, handling/control of the process of therapy)
- 29 Reference materials regarding medication side effects and classification
- 30 Effects of non-prescription substances (e.g., over the counter medications, herbals) on the client system
- 31 Pre-marital education and treatment
- 32 Divorce
- 33 Child custody
- 34 Infertility
- 35 Adoption
- 36 Infidelity
- 37 Trauma intervention models

- 38 Crisis intervention models
- 39 Sex therapy
- 40 Sexual abuse treatment for victims, perpetrators, and their families
- 41 Sexual behaviors and disorders associated with Internet and other forms of technology (e.g., Internet and cybersex)
- 42 Effect of substance abuse & dependence on individual and family functioning
- 43 Effects of addictive behaviors (e.g., gambling, shopping, sexual) on individual and family system
- 44 Addiction treatment modalities (e.g., 12-step programs, individual, couple, marital and family therapy)
- 45 Spiritual and religious beliefs (e.g., eastern and western philosophies) and the impact on the system in treatment
- 46 Impact of loss and grief on the client (e.g., death, chronic illness, economic change, roles, and sexual potency)
- 47 Research literature and research methodology (including quantitative and qualitative methods) sufficient to critically evaluate assessment tools and therapy models
- 48 Methodologies for developing and evaluating programs (e.g., parenting, grief workshops)
- 49 Statutes, case law and regulations (e.g., clinical records, informed consent, confidentiality and privileged communication, privacy, fee disclosure, mandatory reporting, professional boundaries, mandated clients)
- 50 Codes of ethics
- 51 Business practices (e.g., storage and disposal of records, training of office staff, work setting policies, collections, referrals, advertising, and marketing, management of the process of therapy)
- 52 Use of technology (e.g., cell phones, fax machines, electronic filing of claims, Internet therapy)
- 53 Diversity studies (e.g., race, ethnicity, class, gender, gay & lesbian issues)
- 54 Neuropsychology
- 55 Community systems (schools, human service agencies)
- 56 Group mandated (e.g., anger management, domestic violence treatment, sexual offender programs) or voluntary (divorce recovery, parenting) treatment programs