

Family Therapy Student Handbook

Marriage and Family Therapy Program

2012-2013

VALDOSTA STATE UNIVERSITY



TABLE of CONTENTS

EQUAL OPPORTUNITY AND AFFIRMATIVE ACTION STATEMENT	4
ABOUT THIS HANDBOOK	4
STUDENT RESPONSIBILITY TO BE INFORMED AND STAY UP TO DATE	4
MFT PROGRAM OVERVIEW	5
<i>MFT Program Mission Statement</i>	5
MFT PROGRAM ACCREDITATION	6
<i>Program Goals</i>	6
<i>Program Objectives</i>	6
<i>Program Outcomes</i>	6
<i>Faculty Outcomes</i>	6
<i>Student Learning Outcomes</i>	7
STRATEGIC PLANNING	7
<i>MFT Strategic Planning Process Flow Chart</i>	8
ADMISSION REQUIREMENTS	9
ACADEMIC MFT PROGRAM REQUIREMENTS	10
<i>Required Grade Point Average for Graduation</i>	11
<i>Retention Policy</i>	11
<i>Deficiency Point Policy</i>	11
<i>Readmission After Dismissal for Academic Deficiencies</i>	12
<i>Program Time Limit: Seven Year Rule</i>	12
<i>Required Course Work</i>	12
<i>Course Descriptions</i>	13
<i>Supervised Clinical Practice</i>	15
<i>Elective Courses</i>	15
<i>Academic Evaluation</i>	16
CLINICAL READINESS FOR ENROLLMENT IN CLINICAL PRACTICA	16
COMPREHENSIVE EXAM REQUIREMENT	17
COMPREHENSIVE EXAM, PART I	17
COMPREHENSIVE EXAM, PART II	18
<i>Comp II Sample Cover Page</i>	19
<i>Evaluation of the Comprehensive Exam II</i>	20
<i>MFT Program Academic Assignment Evaluation Guide</i>	20
GRADUATION PROCEDURES – ADVISING AND REGISTRATION	22
<i>Changes to Your Advising Plan</i>	22
<i>Registration</i>	22
<i>Registration Calendar and Enrollment Policies</i>	22
<i>Admission and Readmission</i>	24
<i>Appeal of Dismissal from Graduate School</i>	24

<i>Graduate School Policies and Related Forms</i>	24
GRADUATION PROCEDURES – APPLICATION FOR GRADUATION	24
CLINICAL READINESS FOR RELEASE TO WORK OUTSIDE THE PRACTICUM	25
PRACTICA SIZE	25
<i>Establishing an Internship</i>	25
ACCRUAL OF CLIENT CONTACT AND SUPERVISION HOURS	25
<i>Malpractice Insurance</i>	26
FAMILY THERAPY PRACTICUM AND INTERNSHIP HANDBOOK	26
MFT PROGRAM STUDENT ADVISORY COMMITTEE (PSAC)	26
GRIEVANCE AND APPELLATE PROCEDURES	27
<i>Grade Appeals</i>	27
<i>Appealing Denials, Dismissals, and the 7-Year Rule</i>	28
<i>Other Appeals</i>	28
<i>BOR Appeals Information</i>	29
<i>Grievance Policy and Procedure</i>	29
MEMBERSHIP IN AAMFT	30
GEORGIA LICENSURE AS AN MFT	30
ETHICAL CONDUCT	31
<i>AAMFT Code of Ethics</i>	31
GEORGIA RULES (GEORGIA CODE OF ETHICS)	40
APPENDIX A – LICENSING REQUIREMENT BY STATE	46

Equal Opportunity and Affirmative Action Statement

Valdosta State University is an equal opportunity educational institution. It is not the intent of the institution to discriminate against any applicant for admission or any student or employee of the institution based on the sex, race, religion, color, national origin, disability, or sexual orientation of the individual. It is the intent of the institution to comply with the Civil Rights Act of 1964 and subsequent Executive Orders as well as Title IX, Equal Pay Act of 1963, Vietnam Era Veterans Readjustment Assistance Act of 1974, Age Discrimination in Employment Act of 1967, and the Rehabilitation Act of 1973.

The Americans with Disabilities Act, Public Law 101-336, extends the prohibition against discrimination on the basis of disability in Section 504 to all programs, activities, and services provided or made available by state and local governments, regardless of whether those entities receive federal financial assistance. Section 504 of the Rehabilitation Act of 1973 states that no otherwise qualified disabled individual can be denied access to or participation in any federally funded activity or program solely on the basis of disability.

About this Handbook

This handbook is intended to supplement, not override the VSU Graduate School Catalog, which takes precedence over the *Family Therapy Student Handbook* in the case of conflict. The handbook is revised continually on an “as necessary” basis. If you, the reader, notices useful additions or revisions that could be made, do let us know. A thorough and comprehensive review and revision occurs every year during the faculty annual strategic planning retreat.

Student Responsibility to Be Informed and Stay Up to Date

The University and the MFT Program reserve the discretionary right to dismiss any student who does not meet academic requirements or fails to maintain acceptable standards of conduct consistent with the University’s Student Code of Ethics or the American Association of Marriage and Family Therapy Code of Ethics. The *Valdosta State University Graduate Catalog*, the *Valdosta State University Graduate Student Handbook*, the *Valdosta State University Student Handbook*, the *Family Therapy Practicum and Internship Handbook*, and the *FamilyWorks Policy and Procedure Manual* all provide important information about the policies and procedures and the pursuit of graduate study in the Marriage and Family Therapy Program. Students are expected to familiarize themselves with the information in each of these publications and conduct themselves accordingly.

MFT Program Overview

The Marriage and Family Therapy (MFT) program at Valdosta State University has an exclusive focus: to prepare clinicians to provide therapeutic services to individuals, couples, families, and groups in ways that emphasize the ecological contexts, interpersonal relationships, and unique meaning systems held by each client. This relational, systemic perspective is underpinned by the belief that careful attention to the many contexts that shape and give meaning to clients' perspectives, values, and experiences is imperative to excellent therapeutic practice.

MFT Program Mission Statement. The mission of the Valdosta State University Marriage and Family Therapy Program is to provide students the academic and clinical training required to practice relationally informed clinical work and ready graduates for work in a variety of mental health settings.

The Master of Science in Marriage and Family Therapy trains students to be highly qualified therapists able to be thoughtful and creative clinicians who are prepared to become leaders in the field of Marriage and Family Therapy. Through coursework, practica, and internships, our dedicated and accessible faculty members emphasize the value of diversity and individual uniqueness, the development of compassion for people and their environments, and a striving for social justice. The program orients students toward developing the posture of reflective practitioners—professionals committed to lifelong learning, the continual improvement of clinical practice through thoughtful innovation, and the critical evaluation of psychotherapeutic scholarship.

MFT Program Philosophy: The philosophy of the Valdosta State University Marriage and Family Therapy Program is guided by a commitment to diversity and the belief that the differences that make up the braid of humanity must be embraced and cherished; a relational understanding that all human behavior and meaning-making are context-dependent, and so a deep appreciation of each client's context is a prerequisite of respectful treatment; and the belief that students' uniqueness should be respected and developed through active, engaged learning with an accessible and supportive faculty.

The curriculum for the Marriage and Family Therapy program builds the knowledge base and skills necessary for practitioners to provide high-quality, effective therapy. It prepares students to use an active, positive, client-focused approach to therapy that will help individuals, couples, and families build on their strengths, improve their relationships, and generate solutions to problems.

The program takes a minimum of two years to complete. Three and four year plans are available.

MFT Program Accreditation

The Valdosta State University MFT Program has been accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) since 2006. As part of our accreditation process, the MFT faculty establishes and publishes MFT Program Educational Outcomes, which include the Valdosta State University mission, the MFT Program mission, philosophy, goals, and objectives (non-measurable variables) and outcomes for students, faculty, and the program as a whole (measurable variables). The Program goals and Objectives are as follows:

Program Goals

- G1. Recruit, train, and graduate students from diverse backgrounds
- G2. The program will educate students by promoting an understanding and respect for diversity.
- G3. The program will provide education from a relational perspective that values the importance of context in making sense of human behavior.

Program Objectives

- O1. Recruit, train, and graduate students from diverse backgrounds
- O2. Train graduates who report that the program helped them develop an understanding and respect for diversity.
- O3. Graduate students who embrace a professional identity as Marriage & Family Therapists
- O4. Graduate students who obtain licensure in MFT or related mental health field.
- O5. Graduate students who work in mental health careers that help individuals, couples, and families

What follows are specific and measurable Program, Faculty, and Student Learning Outcomes.

Program Outcomes

- PO1. Recruit, train, and graduate students from diverse backgrounds
- PO2. Graduates students who report that the program helped them develop an understanding and respect for diversity.
- PO3. Graduate students who claim the professional identity of Marriage & Family Therapist
- PO4. Demonstrate that at least 70% of graduates will be pursuing doctoral degrees or employed in a mental health field within three years of graduation
- PO5. Demonstrate that at least 70% of graduates will pass the AMFTRB or become licensed as a mental health professional.
- PO6. Demonstrate that at least 80% of enrolled students will graduated within the advertised length of program completion.

Faculty Outcomes

- FO1. Recruit, train, and graduate students from diverse backgrounds
- FO2. Participate in scholarly activities that contribute to the field of Marriage and Family Therapy in accordance with the university, college, and departmental requirements
- FO3. Establish and sustain a professional identity as an MFT as demonstrated by obtaining and maintaining licensure in the state of Georgia as a Marriage and Family Therapist or mental health provider (or associate licensure for not more than four years while working toward full licensure).
- FO4. Establish and sustain a professional identity as an MFT as demonstrated by obtaining and sustaining status as an AAMFT Approved Supervisor or an AS Candidate.
- FO5. Establish and sustain a professional identity as an MFT by regularly providing supervision that promotes and evaluates the following clinical skill areas: (1)the a relational assessment and conceptualization of client problems, (2) impement a systemic perspective, (3) develop interventions that reflect a relational understanding of human dilemmas (4) articulate a coherent therapeutic stance that is grounded in a variety of philosophical or theoretical informed frameworks, (5) discuss cases in ways that are informed by relevant contextual factors, and (6) demonstrate professionalism, including adherence to legal and

ethical standards as well as follow policies and procedures relevant to each clinical setting.
FO6. Faculty meetings, student admissions decisions, curriculum reviews, and/or special committees as needed (i.e., faculty/staff hiring interviews).

Student Learning Outcomes

SLO1. Practice from a culturally sensitive lens.

SLO2. Practice from a systemic lens.

SLO3. Be prepared to obtain entry-level employment in mental health agencies.

SLO4. Claim the professional identity of Marriage and Family Therapist

Strategic Planning

Each year, prior to the annual MFT Strategic Planning Retreat, the program director prepares the various databases that are used to assess the program's achievement of the Educational Outcomes. The flow chart on the following page provides a bird's eye view of our strategic planning process.

MFT Strategic Planning Process Flow Chart

The Professional MFT Principles

- MFT Educational Guidelines
- American Association of Marriage & Family Therapy Core Competencies
- Association of Marital & Family Therapy Regulatory Boards Examination Domains
- American Association of Marriage & Family Therapy Code of Ethics
- Georgia Licensure Law

Review & Revise VSU MFT Program Educational Outcomes

- VSU Mission
- Program Mission, Philosophy, Objectives, & Goals
- Program Outcomes (measurable)
- Faculty Outcomes (measurable)
- Student Learning Outcomes (measurable)

Inputs

- Choosing VSU Survey
- Student Demographics Database
- Exit Survey
- Alumni Survey (1 yr + 2 year)
- FamilyWorks Database
- Faculty Outcome Assessment
- Curriculum Map
- Comprehensive Exam Database
- 2012/13: Internship & Employer Satisfaction Survey
- 2012/13: FamilyWorks Client Satisfaction Survey

Assessments

- Program Outcomes Assessment
- Faculty Outcomes Assessment
- Student Learning Outcomes Assessment
- FamilyWorks Diversity Assessment
- Curriculum Map Assessment
- Infusion of Diversity into the Curriculum Assessment
- Comprehensive Exam Assessment
- 2012/13: Internship & Employer Satisfaction Assessment
- 2012/13: FamilyWorks Client Satisfaction Assessment

Update Strategic Plan

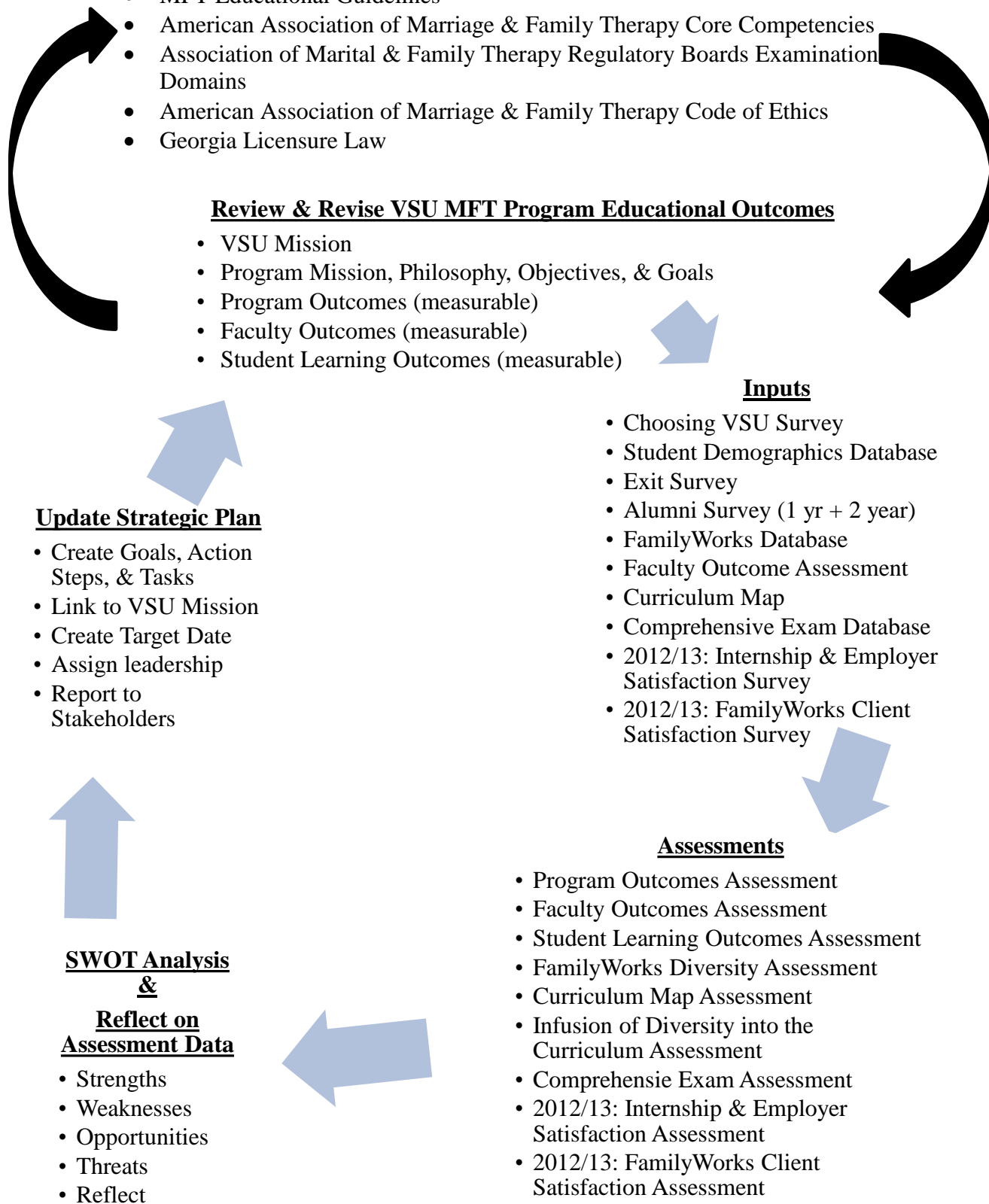
- Create Goals, Action Steps, & Tasks
- Link to VSU Mission
- Create Target Date
- Assign leadership
- Report to Stakeholders

SWOT Analysis

&

Reflect on Assessment Data

- Strengths
- Weaknesses
- Opportunities
- Threats
- Reflect



Descriptive information about each database and how the data is collected and populated can be found on the Strategic Planning page of the website in the following documents: *Assessment Database Descriptions & Sources* and the *MFT Assessment Schedule*.

During the annual MFT Strategic Planning Retreat, the MFT faculty first juxtaposes the Professional MFT Principles with the VSU Mission and the MFT Program Educational Outcomes to be sure that our Educational Outcomes meet our purposes and that our aims are in concert with the overarching purposes and aims of our accrediting body, the Commission on Accreditation for Marriage & Family Therapy Education.

Next, the faculty use a variety of databases (*Choosing VSU Survey; Student Demographics & Achievement Database; Exit Survey; Alumni 1 year and 2 year surveys; FamilyWorks Database; MFT Faculty Outcome Database & Assessment; Curriculum Map & Assessment*) to inform the following assessments: *Program Outcome Assessment; Faculty Outcome Database & Assessment; Student Learning Outcomes Assessment; FamilyWorks Diversity Assessment; Curriculum Assessment; Infusion of Diversity into the Curriculum Assessment*). These assessments are analyzed to discern how well the program is achieving the Educational Outcomes and to determine any areas for improvement or enhancement.

Beginning in 2013, two additional surveys—*Internship Supervisor & Employer Satisfaction* and *FamilyWorks Client Satisfaction* (currently in preparation) will be added to the above listed databases.

Following this analysis, the faculty conducts a SWOT (strengths, weaknesses, opportunities, and threats) analysis to evaluate the program's position the inside the educational and mental health training landscape. This analysis is used to insure that the program remains competitive and responsive to changes in educational and employment environments.

The faculty reflects on what is learned through the analysis of the various assessments and the SWOT analysis. This reflection leads to the creation of specific goals, action steps, and tasks that are placed in the current Strategic Plan. A leader is assigned to every goal, and target dates for completion are entered into the plan. Each goal is linked to the VSU mission and the resources needed are noted.

Finally, in a variety of ways the faculty directly or indirectly reports to our stakeholders. We share the Strategic Plan with our Department Chair and place it on our Strategic Planning webpage where students, alumni, and perspective students, among others can access the information. We report indirectly to stakeholders as we pursue our goals and work to implement the plan.

Admission Requirements

The requirements for admission into the MFT Program at VSU include the following:

- ◆ A baccalaureate degree from an accredited college or university.
- ◆ An official copy of all college/university transcripts showing a baccalaureate from an accredited college or university.

- ◆ Previous coursework in human-services or mental health related areas, for example: human development, family dynamics, social and behavioral sciences, and statistics. Students lacking these prerequisites will be required to complete this coursework in addition to the required course work.
- ◆ A cumulative minimum undergraduate grade point average of 2.75.
- ◆ Entrance Tests: Minimum GRE 400 verbal or 3.5 analytical writing or a minimum MAT score of 393.
- ◆ Three letters of reference specifically addressing the candidate's qualifications to become a Marriage and Family Therapist.
- ◆ An essay describing the candidate's relevant experience (volunteer, professional, and/or academic), the desire to become a Marriage and Family Therapist, and his or her professional goals.
- ◆ A personal interview to insure the candidate possesses the combination of personal qualities and values that are considered essential for the professional practice of family therapy: maturity, strong verbal and analytic skills, openness to a variety of perspectives, and respect for a diverse clientele and experiences.

The policies that govern assessment of applicants' qualifications and admission into the program are published in the *VSU Graduate Catalog*, this *VSU Family Therapy Student Handbook*, the MFT program brochure, and the MFT web page <http://ww2.valdosta.edu/soc/mft/>

The Graduate School compiles each applicant's admission materials. When a file is complete, it is forwarded to the MFT faculty. Program faculty members are responsible for reviewing applications, interviewing applicants, and recommending all admissions into the program, according to the following process: Each faculty member examines each applicant's file and reviews each application. Applicants who meet admissions standards and show promise for Marriage and Family Therapy are invited to schedule an interview with at least two faculty members. Following the interview, the faculty discusses the applicant's qualifications and readiness for entry into the program. The faculty recommendation is forwarded to the Graduate Dean, who notifies the applicant of the final decision.

Academic MFT Program Requirements

The 60 credit Master of Science Degree in Marriage and Family Therapy prepares students for clinical membership in the American Association for Marriage and Family Therapy (AAMFT) and for licensure as a Marriage and Family Therapist in the State of Georgia and many other American states. Licensure requirements are similar across many USA states, so that requirements of this program will meet eligibility requirements for a number of other states. However, if you know that you will be seeking licensure in a state other than Georgia, we strongly recommend that you look up that state's licensure requirements now, while you are in school. See Appendix A for an overview of the differences between the various states' licensing requirements.

The VSU MFT curriculum, developed to meet the accreditation standards of the Commission for Accreditation of Marriage and Family Therapy Education, includes 42 semester hours of didactic coursework and 18 semester hours of supervised clinical practice. Students must graduate with a grade point average of 3.0 or above.

Students entering before Fall 2012 must complete a minimum of 500 hours of direct client contact and 100 hours AAMFT approved supervision during one consecutive year of enrollment in Practicum. Students entering on or after Fall 2012 must complete a minimum of 600 hours of direct client contact and 100 hours AAMFT approved supervision during one consecutive year of enrollment in Practicum. Practicum in Marriage and Family Therapy provides live individual and small group supervision during weekly meetings where students provide therapy to clients while observed by a faculty supervisor. The details surrounding client and supervision contact requirements can be found in the *Family Therapy Practicum and Internship Handbook*.

Theory and practice are linked throughout training. For students who entered the program before Fall 2012, at least half the supervised practice (250 hours) must be with couples or families. Students who entered on or after Fall 2012 will accrue a significant portion of their client contact hours at FamilyWorks, the MFT program university-based family therapy clinic. The remainder can be obtained in internships through cooperative arrangements with provider agencies in communities throughout the region.

Each student must pass the Comprehensive Examination prior to graduation. The comprehensive exam ensures that students understand the theory and practice of MFT from a systemic/relational perspective as well as demonstrate student mastery of other essential academic components of the curriculum.

Required Grade Point Average for Graduation

The Graduate School administers graduate programs at Valdosta State University. Requirements for retention and graduation, in addition to the requirements listed in this MFT Student Handbook, are listed in the *Graduate School Catalog*.

For graduation, the cumulative graduate grade-point average must be 3.0 or higher on a 4.0 scale. Throughout their program, students' performance must be acceptable on a continuing basis. Students must at all times maintain an overall grade-point average of not less than 2.5. No grade below C will be credited toward a graduate degree. The MFT Program adheres to the policies for academic standards and regulations established by the Graduate School. These policies and standards are published in the Graduate Catalog.

Retention Policy

Earning grades below "B" in graduate courses result in the following consequences: Students will be dismissed from the M.S. Marriage and Family Therapy Program if they accumulate 3 or more academic deficiency points. A grade of "C" (while it will be credited toward the M.S. degree) equals one deficiency point. A grade of "D," "WF" or "F," or "U" (none of which will be credited toward the M.S. degree) equals two deficiency points.

Deficiency Point Policy

Beginning in the Fall of 2011, a deficiency point system was implemented for students in graduate programs: in which an accumulation of four or more academic deficiency points results in dismissal from the program.

Students will be dismissed from the program if they accumulate four or more academic deficiency points. A grade of "C" (while it will be credited toward the M.S. degree) equals one deficiency point. A grade of "D" (which will not be credited toward the M.S. degree) equals two

deficiency points. A grade of “F” or “WF” (neither of which will be credited toward the M.S. degree) equals three deficiency points. Warning letters will be issued to students for each earned deficiency point. If enough deficiency points are accumulated to warrant dismissal, the student will be informed by letter. (Note: If grades are later changed in the student’s favor, deficiency points may be retracted.)

This information can be found on the Graduate School website, <http://www.valdosta.edu/academics/graduate-school/our-programs/retention-dismissal-readmission-policies.php#m-f-t1>

If you are unable to access the above link, go to the Graduate School website, click on “Our Programs,” scroll down and click on the MFT Program, scroll down and click on MFT Progression, Retention

Readmission After Dismissal for Academic Deficiencies

A student must apply for readmission, which is not guaranteed. A student must wait a minimum of two semesters before applying for readmission. If readmitted, the student must retake only courses with deficiencies until the number of deficiency points is fewer or equal to two. A student cannot take a class more than twice or apply for readmission more than once.

Program Time Limit: Seven Year Rule

As soon as a student starts work on any graduate degree, the seven-year clock starts ticking. Students have a total of seven years to complete their graduate degrees. If students are transferring courses into their graduate degree, those courses must be no older than seven years. Please bear in mind that six or seven year old courses that are transferred in will most probably expire before the degree is completed and will need to be retaken. See the *VSU Graduate Catalogue*.

Required Course Work

Area I: Theoretical Foundations

MFTH 7101: Family Systems Theories	3 hrs
MFTH 7103: Advanced Theories Seminars	2 hrs

Area II: Clinical Practice

MFTH 7102: Interventions in MFT	3 hrs
MFTH 7400: Psychopathology & Pharmacology	3 hrs
MFTH 7601: Treatment Issues in Family Therapy	3 hrs
MFTH 7602: Couples & Sex Therapy	3 hrs
MFTH 7700: Assessment in MFT	3 hrs

Area III: Individual Development & Family Relations

MFTH 6700: Family Sociology	3 hrs
MFTH 7500: Development in the Family System	3 hrs
MFTH 7050: Class, Gender, & Ethnic Issues	3 hrs

Area IV: Professional Identity & Ethics

MFTH 6800: Orientation to MFT	3 hrs
MFTH 7350: Legal Issues in MFT	1 hr

MFTH 7880: Professional Ethics Seminar	1 hr
<u>Area V: Research</u>	
MFTH 7200: Research in MFT	3 hrs
<u>Area VI: Electives, 5 credits minimum, may be selected from the following:</u>	
SOCI 7021: Statistical Applications in Sociology	3 hrs
MFTH 7510: Human Sexuality & Gender	3 hrs
MFTH 7550: Family Stress & Crisis	3 hrs
MFTH 7650: Special Topics in MFT (may be repeated twice)	1 hr
Other electives may be approved on a case by case basis	
<u>Area VII: Supervised Clinical Practice</u>	
MFTH 7600: Practicum in MFT (1 year, minimum 500 hours direct client contact)	18 hrs
TOTAL CREDITS (minimum)	60 hrs

Course Descriptions

Required Courses

MFTH 6700: Family Sociology (3 credits).

The social context of contemporary issues facing families. Includes family history, cross-cultural issues, research and theory regarding changing gender roles, family violence and abuse, divorce, single parenting, working families, sexual orientation, non-traditional families, and other relevant issues. *Cross-listed with SOCI 6500.*

MFTH 6800: Orientation to MFT Practice and Ethics (3 credits).

Introduces students to the basic epistemological issues in marriage and family therapy, history of the field and current developments, professional socialization and organizations, ethics and values associated with the practice of MFT. Self-awareness critical to practice is also addressed.

MFTH 7050: Class, Gender, & Ethnic Issues in Applied Settings (3 credits). *Prerequisite: Orientation to MFT or Sociology in Applied Settings*

An in-depth study of the sensitivities needed by family therapists and other social science practitioners to the issues of social class, gender, and ethnicity. Addresses the interface between professional responsibilities and ethics and the social and political context of treatment. A multi-cultural perspective is to be developed by each student. *Cross-listed with SOCI 7053.*

MFTH 7101: Family Systems Theories (3 credits). *Prerequisite: MFTH 6800*

An in-depth study of family systems theory. Emphasis on the major schools of thought included in a systems analysis of the family and current issues and ideas within family systems discourse.

MFTH 7102: Interventions in MFT (3 credits). *Pre or Co-requisite: MFTH 7101*

A review of the various intervention techniques employed by the major theoretical approaches to MFT. Emphasis on skill development, video and role-play demonstrations, and linking practice and theory with appropriate treatment goals.

MFTH 7103: Advanced Theories Seminar (1 credit each; may be repeated; students must take at least two). *Prerequisite: MFTH 7102 and clinical experience.*

A series of seminars that allow students to develop an in-depth understanding of at least two theoretical approaches to MFT. Examples of offerings include structural/strategic, family of origin, narrative/constructivism, and solution-oriented.

MFTH 7200: Research in Marriage and Family Therapy (3 credits). *Prerequisite: a statistics course*

Quantitative and qualitative methods for research design and data analysis in marriage and family therapy. Emphasis on current outcome and process studies and on critical evaluation and application of research data.

MFTH 7350: Legal Issues in MFT (1 credit). *Prerequisite: MFTH 6800*

Legal responsibilities and liabilities in the practice of family therapy. Addresses issues such as limits of confidentiality, therapist liability, and client privilege. Includes working with the legal system and relevant aspects of family law.

MFTH 7400: Psychopathology & Pharmacology in MFT (3 credits). *Prerequisite: MFTH 6800*

Psychological, biological, medical issues in the practice of MFT, and an introduction to pharmacology. Emphasis on DSM IV diagnosis within a systemic context and collaboration with other mental health professionals.

MFTH 7500: Development in the Family System (3 credits).

Human growth and development within the family system. Includes theories of individual development, developmental tasks over the family life cycle, normative and non-normative change, processes of divorce and remarriage, and social, economic, and ethnic influences on the family life cycle. Implications for practice are emphasized. *Cross-listed with SOCI 7500.*

MFTH 7601: Treatment Issues in Family Therapy (3 credits). *Prerequisite: MFTH 7102*

Applications of family systems approaches to the treatment of issues facing families in crisis and transition. Addresses grief and loss, substance abuse, family violence and abuse, child and adolescent behavioral problems, and chronic physical and mental illness. Emphasis on conceptualization and treatment planning.

MFTH 7602: Couples and Sex Therapy (3 credits). *Prerequisite: MFTH 7102*

Treatment techniques for intimate relationships. Emphasis on premarital and commitment issues, anger and conflict, gender and intimacy, and techniques for treating sexual dysfunctions.

MFTH 7700: Assessment in Marriage and Family Therapy (3 credits). *Prerequisites: MFTH 7101 & MFTH 7500*

How to assess family processes within a developmental context. Models for assessing family functioning and use of individual and family assessment instruments will be included.

MFTH 7880: Professional Ethics Seminar (1 credit).

Addresses professional issues in the workplace. Includes marketing oneself, politics in the workplace, professional licensure and clinical membership, working in interdisciplinary teams, professional wellness, and the ethics, values, and decision-making associated with current practice issues.

Supervised Clinical Practice

MFTH 7600: Practicum in Marriage and Family Therapy (6 credits, repeated for a total of 18 credits). *Prerequisite: MFTH 7102 and approval of the MFT faculty.*

Supervised experience in the practice of marriage and family therapy. Includes practice and live supervision at the Marriage and Family Therapy Training Clinic as well as experience in community internship sites. Requires a minimum of 20 hours per week. Must be taken three successive semesters for a total of 500 hours direct client contact.

Elective Courses

MFTH 7510: Human Sexuality and Gender (3 credits).

The cultural, social, physical, psychological, and interpersonal aspects of human sexuality and gender. Includes gender role socialization and the development of gendered identities, sexual functioning and attraction, sexual orientation, and problems related to sex and gender.

MFTH 7550: Family Stress and Crisis (3 credits).

Understanding normative and catastrophic stress, trauma, and crisis across the lifespan from a family systems perspective. Focus on approaches to prevention and intervention with families, agencies, and communities.

MFTH 7650: Special Topics in MFT (1 credit each, may be repeated).

A rotating series of seminars addressing important contemporary issues in the field of marriage and family therapy. Examples of topics include working with children, working with adolescents, spirituality, family violence, and substance abuse.

MFTH 7980: Internship in Marriage and Family Therapy (1-5 credits; *Does not apply toward degree.*).

Supervised experience in the practice of marriage and family therapy in a community placement or FamilyWorks.

SOCI 7021: Statistical Applications in Sociology (3 credits).

Evaluation of social statistics and data management for applied research problems. Students will gain skills in determining which statistics to use for particular research problems and designs, which statistics provide the most practical means for reading and interpreting data, and what computer software is available to facilitate data analysis in sociology.

MFTH 7990: Directed Study in Marriage and Family Therapy (1-3 credits). *Requires consent of instructor*

Specialized study in an area of Marriage and Family Therapy under the direction of a faculty member.

SOCI 6000: Sociology of Mental Health (3 credits).

Introduces students to the history and causes of mental illness as well as the language of the Diagnostic and Statistical Manual. The relationship between mental illness and the major sociological variables, such as social class, race, gender, age, and marital status will be analyzed. Students will evaluate mental illness from the institutional and client points of view.

SOCI 6130: Social Gerontology. (3 credits).

Study of the social phenomenon of the aging process, the life cycle, and patterns that include social roles, medicalization of aging and death, and the values, norms, and beliefs related to these phenomenon. Emphasis on the social changes that have occurred as medical technology and science impact on the culture and institutional patterns related to aging and death. Study of the process of dying will include the entire life cycle and new efforts to deal with this complex social phenomenon.

CRJU 7500: Seminar in Criminal Behavior and Personality (3 credits).

An advanced study of specific criminal behavior types emphasizing violent offenders, sexual deviants, the anti-social personality, and the criminally insane.

Academic Evaluation

Throughout your time in the MFT program, you will, of course, write papers, create poster sessions, do projects, make presentations, and take exams. Some professors include rubrics in their syllabi, which show you how a given assignment is graded. Other professors use the Academic Assignment Evaluation Tool (for papers, presentations, and poster sessions) and the Exam Evaluation Tool (for exams). We invite you to learn how you are evaluated on course assignments by viewing these evaluation tools on the MFT webpage, under the “Resources for Students” link.

Clinical Readiness for Enrollment in Clinical Practica

During the time that you are in this program and especially during your first year of didactic work, faculty members will be getting to know you and gauging your strengths and weaknesses as people who will soon be working with the public. Among others, faculty will be noticing such things as your ability to manage responsibility, integrate the core concepts necessary for clinical practice, behave with honesty and integrity, interact with others in a professional, sensitive, and compassionate manner, your willingness to learn, and your ability to exercise self-responsibility. Group projects are an area, for example, that can test students’ ability to work as a team, manage stress and responsibility, and resolve differences in a professional manner. These categories of personal maturity reflect something about your academic readiness to work clinically with people and your ability to manage peer and faculty interactions in a clinical setting.

If, during your first academic year and prior to submission of the *Comprehensive Exam I - Application to Clinical*, a faculty member has concerns about your ability to work with the public, he or she will proceed through the following process:

- 1.) Talk with you informally about his or her concern. At this point no paperwork is generated.
- 2.) If the problem(s) is not resolved, the faculty member will meet with you, discuss the problem and possible solutions, and generate an email documenting this meeting. This email will be placed in your academic file
- 3.) If the problem(s) continues, the faculty member will again meet with you, discuss the possibility that without resolution, your *Comprehensive Exam I - Application to Clinical Practicum* is at risk of being denied, and how you might choose to handle this. This meeting will also be documented and the documentation placed in your academic file.

In addition, students are formally screened for personal and academic readiness to work with clients. Prior to beginning clinical practicum, students must apply by submitting the

Comprehensive Exam I - Application to Clinical Practicum. Students are screened again during the first or second practicum, when the supervisor decides whether to release a student to work alone (outside of practicum), thus allowing the student to place him- or herself on the rotation list and see clients at FamilyWorks without a supervisor immediately present. This decision is based on the supervisor's judgment as to whether the student can meet a minimal criteria of "do no harm." And students are tested a third time through the *Comprehensive Exam II*, a written paper delineating their understanding of the art and science of change.

1. Faculty judgment that the student will "do no harm." Even though the faculty does not expect that entering practicum students are able to facilitate therapeutic change, we do assume that any student allowed into practicum will not cognitively or emotionally harm a client.

Comprehensive Exam Requirement

In order to graduate with a Master's degree in Marriage and Family Therapy, each student must pass Parts I and II of the comprehensive examination. Part I of the Comprehensive Exam is used by the clinical faculty to determine students' preparedness to enter and successfully complete, *MFTH 7600 Practicum in Marriage and Family Therapy*. In addition, the exam allows students to demonstrate their ability to think critically and to utilize and integrate what they have learned in their coursework.

The Comprehensive Exam II was developed to ensure that students who graduate from the program understand the MFT field from a systemic/relational perspective. The exam requires students to demonstrate mastery and integration of a systemic approach to MFT, accurate knowledge about the field of MFT, the ability to link theory and practice as well as articulate complex family therapy ideas with depth and detail.

Comprehensive Exam, Part I

The MFT faculty reviews the *Comprehensive Exam I - Application to Clinical Practicum & Internship* and evaluates the readiness of each student to enter a year of practica. The MFT Program basis of readiness for clinical practicum is based on the following:

2. Faculty assesses and discusses class performance, personal, and professional interactions with colleagues, faculty, staff, and administration. When students are first admitted to the program, during the initial new student orientation, all students sign the *MFT Clinical Training and Personal Disclosure Policy* (online), which informs students, along with other points, that they can be **terminated from the program or barred from participation in internships or practica for non-academic reasons.**
3. Students eligible to work clinically with clients will have demonstrated personal integrity, ability and willingness to take personal responsibility for their own behavior and decisions, and appropriate behavior and dress in classes, internships, and interactions with colleagues, faculty, staff, and administration. Students are informed that they may be terminated from the program or barred from participation in internships or practica for non-academic reasons.
4. Student must have successfully passed Comprehensive Exam, Part I also known as the *Application to Clinical Practicum & Internship*. Students who have failed Part One of the

Comprehensive Exam cannot enroll in *MFTH 7600 Practicum in Marriage and Family Therapy* until they have successfully passed it. If a student fails Part One of the Comprehensive Exam and he or she has already registered for *MFTH 7600 Practicum in Marriage and Family Therapy*, the student must drop the class.

The *Comprehensive Exam I - Application to Clinical Practicum* can be found on the MFT website under “Resources for Students.”

Comprehensive Exam, Part II

At the end of the second semester in *MFTH 7600 Practicum in Marriage and Family Therapy*, students submit a Statement of Orientation to Therapy. This statement is a description of the student’s philosophy of therapy with specific attention to how the student understands therapeutic change. A description of the content that must be addressed in the Statement as well as the required writing conventions will be disseminated by the instructor of MFTH 7600 Practicum in Marriage and Family Therapy at the beginning of the semester.

Students are encouraged to discuss the development of the Statement of Orientation to Therapy with their professors. In addition, students may ask for formal feedback by turning in a draft on the Midterm date, (see graduate catalog or the Registrar’s Academic Calendar online for Midterm date). For the Summer term, the Midterm date for Summer Session II (also called Full Summer) will be used. Students who desire formal feedback should:

- 1.) Provide each faculty member with a hard copy of the draft
- 2.) Send each faculty member an electronic version of the document
- 3.) Provide each faculty member with contact information including email addresses and phone numbers. This draft will be evaluated by each MFT faculty member and returned with comments. Drafts turned in after this date will not be evaluated.

The final draft is due on the Last Class Day. This date is published every semester in the electronic version of the Registrar’s Academic Calendar. For the Summer term, the Last Class Day for Summer Session II (also called Full Summer) will be used.

A statement of your orientation to therapy is an articulation of your theory of therapeutic engagement and therapeutic change. Statements should reflect a cohesive, consistent theoretical orientation. Your writing should be succinct and clear. Whenever possible, include examples or case vignettes that illustrate your points. Your statement should:

1. Describe your clinical stance. Articulate the ways you relate to clients, and describe the kind of relationship you seek to establish with your clients.
2. What relational or systemic concepts inform your ideas about therapeutic problem formation? Your answer should include a description of what you consider to be important features of a therapeutic problem.
3. Discuss your ideas about how change occurs. Carefully cite those theorists and practitioners that inspire your philosophy of change.

Your Statement must be written in strict adherence with APA 6th conventions. Statements must be written in the first person. Carefully cite all ideas, theories, and concepts. Statements may not exceed 8 pages of text. In addition to 8 pages of text, all Statements of Orientation to Therapy must include an abstract, references, and a title page.

Comp Exam II Sample Cover Page

Students need to create a title for their statement of orientation, which should accurately reflect what the paper is: a philosophy or epistemology of therapy, of change, a way of working and thinking therapeutically. Below the title and student name the following text should occur (using, of course, the correct date). An example cover sheet can be found below:

Running Head: THINKING ABOUT CHANGE

1

Thinking About Change: A Statement of Orientation

Studios P. Student

A Statement of Orientation Presented to the Faculty of the Marriage and Family Therapy Program at Valdosta State University in Fulfillment of the Comprehensive Exam, Part II and Partial Fulfillment of the Requirements for the Master Degree of Family Therapy

Valdosta State University

2014

Evaluation of the Comprehensive Exam II

The Statement of Orientation to Therapy will be evaluated on a pass or fail basis. The student submits the Statement to his or her practicum supervisor, who will read and evaluate the Statement using the criteria set forth in the *MFT Program Academic Assignment Evaluation Guide* (see below). The evaluator may ask the student for major or minor revisions. After successful completion of these changes, the student will have successfully passed the Comprehensive Exam II.

If the supervisor finds that the statement is unacceptable, the statement will be given to the full MFT faculty for evaluation. If two or more faculty members find the Statement of Orientation to Therapy to be of unacceptable quality, the student does not pass Part Two of the Comprehensive Exam. Students who fail Part Two of the Comprehensive Exam must re-take it and enroll in an additional section of *MFTH 7600 Practicum in Marriage and Family Therapy*. Part Two of the Comprehensive exam can only be taken or re-taken while enrolled in MFTH 7600. Part Two of the Comprehensive Examination may be re-taken one time. Students who fail Part Two of the Comprehensive Exam twice will be dismissed from the program. The evaluation tool that faculty uses to assess the Comprehensive Exam II paper is this:

MFT Program Academic Assignment Evaluation Guide

The mechanism by which your paper, poster, or presentation is assessed is a score summed from the following six categories.

- **Overall coherence** (clarity, organization, thoughtfulness, comprehensiveness, flow and organization, logical connection between ideas).
- **Sophistication of the concepts presented** (integration and synthesis of information, accuracy of knowledge, the depth and detail used to describe your ideas)
- **Use of examples** (concrete illustrations of abstract concepts)
- **Mastery and integration of systems theory** (demonstrates a clear understanding and articulation of systems theory and clearly links conceptualization and practice)
- **Presentation of material**
 - ✓ Papers: Writing and organization of the material (correct use of APA 6th conventions, appropriate citations and references, grammar, punctuation, absence of excessive wordiness or jargon).
 - ✓ Presentations: Material is presented in a way that keeps audience interest and meets allocated time expectation. Presenters maintain eye contact, speak clearly, shows mastery of the topic, and talks to the audience (rather than reading from notes or the power point).
 - ✓ Posters: Material follows the guidelines required in the syllabus or class discussion; material illustrates your ideas well; material has aesthetic appeal and is able to capture the audience's attention (good use of white space and borders); material is polished.
- **Content** (the paper, presentation, or poster fulfills the assignment as outlined in the syllabus and/or discussed in class).

Each of the above six categories is given a score of 5 (excellent) to 1 (not workable):

5 Excellent. The assignment addresses this category consistently and well throughout.

4 Good. This category shows most of the time throughout but minor changes could be made for excellence.

3 Workable. The category is addressed infrequently and/or not well. Major revisions would be necessary to bring the assignment to the level needed to meet the expectation of this category.

1 or 2 Not workable. As it is, the category does not show at all in the assignment. Author would need to make significant revisions to meet the expectations of this category.

Total scores/Grades are determined by summing the scores (1-5) earned in each category.

30-27 (A) Excellent - meets all or most categorical expectations with high frequency and quality

26-24 (B) Good - consistently meets expectations of most categories with quality

23-21 (C) Adequate - meets some categorical expectations with quality but insufficiently meets other categorical expectations

20 or below Fail - insufficiently and frequently fails to meet all or most categorical (F or D) expectations.

Graduation Procedures - Advising and Registration

At the beginning of each Fall semester, new students complete an Individual Coursework Form and an MFT Graduation Plan. At this time, each student is assigned an advisor. During the orientation session, students are given the opportunity to register for classes.

Advisors retain the original copy of the Individual Coursework Forms and a MFT Graduation Plans. Students who make changes to their graduation plans should provide their advisor with revised copies of the Individual Coursework Form and a MFT Graduation Plan. A brief note explaining the change should accompany the new forms.

Changes to Your Advising Plan

Students are ultimately responsible for their advising plans, not the MFT faculty. Students who make changes to their graduation plans are encouraged to meet with their faculty advisor but they must provide their advisor with the following three items:

- Revised copy of the Individual Coursework Form
- Revised copy of the MFT Graduation Plan, and
- A brief note explaining the proposed changes and the reason the changes are necessary.

Remember, if your advisor *is not aware of alterations to your plan* and has not received revised advising forms and a note describing the changes and the reasons for them, he or she *will assume* that your last approved advising plan is in force, and, prior to the open registration period, your advising flag will be lifted so that you can register during open registration periods.

However, when routine review of your advising information or notification from the Registrar informs us that you have made changes to your advising plan, your advising flag will not be lifted until you meet with your advisor and submit revised advising forms.

Registration

It is the responsibility of each student to register for the proper coursework, to take the appropriate pre-requisites, and to meet graduate requirements. Students are encouraged to meet with the faculty advisor whenever they are considering making changes to the graduation plan, or whenever they have questions about the order and availability of coursework. When a student deviates from the advising plan, the advising flag will not be lifted until the student meets with the advisor and submits a revised plan.

Be aware that advisors use the MFT Graduation Plans to project class size. When there is more demand for a course than space or enrollment limits allow, students with outdated advising forms will be removed from the course in question.

Registration Calendar and Enrollment Policies

Formal time periods for registration for both new and continuing students are published in the *VSU Graduate Catalog*. In addition, registration procedures, late registration policies and fees, withdrawal policies, drop/add policies, policies for auditing classes, maximum course loads, and

other restrictions related to enrollment in the MFT graduate program are detailed in the *VSU Graduate Catalog*.

Admission and Readmission

Official acceptance or denial is verified by a letter from the Graduate School. Students can check the progress of their application by going to the Graduate School homepage at www.valdosta.edu/gradschool/ and selecting the application status feature. Students who were previously enrolled but have not been in attendance within the last three semesters must apply to the Graduate School for readmission. Former students who completed graduate degrees at VSU and who wish to seek another graduate degree at VSU must submit a new Graduate Application for Admission/Readmission and fee. In addition, they should check with the Graduate School to determine what, if any, previously submitted materials are on file. Students seeking to change graduate programs must submit a new application and fee.

Appeal of Dismissal from Graduate School

The form to appeal dismissal from the graduate school can be found at:

<http://www.valdosta.edu/academics/graduate-school/documents/dismissal-appeal-form.pdf>.

Graduate students who wish to appeal a dismissal must first discuss the issue with their advisor. Further appeals are then directed, in order, to their professor's Department Head, College Dean, Dean of the Graduate School, and the Vice President of Academic Affairs/Provost.

Graduate School Policies and Related Forms

The Graduate School has a number of policies concerning appeals, admission, readmission, the limits of graduate study, etc. These can be found on the [Graduate School website](#).

In addition, the Graduate School publishes a number of forms that are necessary for such things as appeals, readmission, etc. These can be found on the [Graduate School website](#) by clicking "Forms" under the Student Resources link or by clicking <http://www.valdosta.edu/academics/graduate-school/important-links-for-graduate-students.php>.

Graduation Procedures - Application for Graduation

Two semesters before their projected graduation date, students are required to fill out a MFT Graduation Checklist and an Application for Degree (obtained at the Registrar's Office). The Graduation Checklist is compared to the published list of graduation requirements. This Graduation Checklist is filed with the Registrar and updated by the student and the academic advisor as unmet graduation requirements are completed.

1. Obtain a Graduation Packet from the Registrar's office.
2. Fill out the Graduation Packet.
3. Fill out the MFT Graduation Checklist.
4. Bring the Application for Degree and MFT Graduation Checklist forms to your advisor to be completed and signed.
 - Note: It takes a great deal of time to review, complete, and sign your forms. Submit these to your advisor as early as possible. You will be contacted when they are ready for you to pick up.

5. Take completed and signed forms to the Bursary, pay the \$25 graduation fee, and get a receipt.
6. Make yourself a copy of all forms.
7. Take the receipt and all forms received from the Bursary to the Registrar's Office.

Several items on your MFT Graduation Checklist will not be complete at the time you first submit the form to the Registrar. Submit the form to the registrar anyway, and submit it *as soon as possible*. Request the MFT Program Director or the Director of Clinical Training to sign off on each remaining requirement as you complete it, and take an updated copy to the registrar. It is your responsibility to update the Graduation Checklist each time you complete another requirement. The registrar will not allow anyone with an incomplete MFT Graduation Checklist to graduate. *Do not delay*. As graduation grows closer, the registrar's office becomes busier and busier. If your materials have not been processed because they are incomplete, you may not be able to graduate.

Clinical Readiness for Release to Work Outside the Practicum

Sometime during the student's first and sometimes second practicum, his or her faculty supervisor makes a decision about whether the student can be released to work alone, outside the immediate presence of a faculty supervisor. The faculty judgment for this is based on the instructor's assessment that the student will "do no harm." Even though the faculty does not expect that first semester practicum students are necessarily able to facilitate therapeutic change, we do assume that any student allowed to work with the public will not cognitively or emotionally harm clients.

Practica Size

Practica are limited to six students per faculty instructor. Practica are filled on a first come, first served basis. The only exception to the first come, first served policy occurs in those cases in which a student has a class conflict with one or more of the practica offerings. In the circumstance in which a student limited by course schedule conflict must enroll in a practicum that is already full, the last person to register for that practicum must drop that section and enroll in another section that has openings. For this reason, students with class conflicts are encouraged to register early so as to avoid enrollment conflicts.

Establishing an Internship

The semester prior to your first practicum is the time to begin thinking about finding an internship. Refer to your *Family Therapy Practicum and Internship Handbook* for more details, and contact the Director of Clinical Training to begin exploring internship opportunities.

Accrual of Client Contact and Supervision Hours

Degree candidates for the Master of Science in Family Therapy are required to complete three consecutive semesters of *MFTH 7600 Practicum in Marriage and Family Therapy*.

To graduate, students must collect several hundred hours of direct client contact and supervision. The breakdown of these hours (where and how many of what kind) can be found in the *2013 FamilyWorks Practicum and Internship Handbook*. Students who have successfully completed their coursework but have not yet accrued the required number and ratio of client contact or

supervision hours, must enroll in *MFTH 7600 Practicum in Marriage and Family Therapy* (space permitting) or *MFTH 7980 Internship in Marriage and Family Therapy* and continue to collect client contact and supervision hours until the requirement is met. The student is responsible for the accurate recording and submission of these hours to the Director of Clinical Training at the end of each semester. For more detail and a specific breakdown of the required number and ratio of client contact and supervision hours, see the *2013 FamilyWorks Practicum and Internship Handbook*.

Malpractice Insurance

Students are required to have malpractice insurance prior to seeing clients in practica or internships. Before the first day of practicum or internship, students submit a copy of the Certificate of Proof of Insurance to the director of clinical training. Without and until a liability policy is on file, the student cannot attend the first or subsequent practicum meetings. As a part of their student membership dues in AAMFT, students are given a 1-year liability policy. When a student registers for more than three practica, the student must renew his or her student membership in AAMFT and a renewed liability policy follows. Students must print or email a copy of the renewed Certificate of Proof of Insurance to the director of clinical training.

Family Therapy Practicum and Internship Handbook

Policies and procedures for participation in practica and internships and definitions of client contact are detailed in the *FamilyWorks Practicum and Internship Handbook*. Once enrolled in *MFTH 7600 Practicum in Marriage and Family Therapy*, each student will be directed to read a copy of the *FamilyWorks Practicum and Internship Handbook* as well as the *FamilyWorks Policy & Procedure Manual*. The former will explain what client contact hours are, how many hours are needed, and what is needed to get them. It also discusses the forms needed to document client contact and supervision hours, describes the steps needed to establish an internship site, and outlines the policies and procedures for the conduct of therapy at FamilyWorks and at internship placements.

MFT Program Student Advisory Committee (PSAC)

Beginning Fall 2012, the program initiated a Student Advisory Committee. The objective of this committee is to provide a formal avenue through which students can be involved in the governance of the program.

Charge: Provide student perspective-driven counsel to the MFT faculty on various issues affecting the MFT graduate experience. This group is to act as a sounding board, provide thoughtful feedback, identify issues needing attention, provide a student perspective on academic services and policies, and make recommendations for new services and policies. PSAB is charged with using the MFT program's Educational Outcomes to guide the focus of their feedback to the faculty as well as guide the charge of the committee. To this end, the committee is tasked with reviewing and evaluating the adequacy and appropriateness of the Education Outcomes at least one time per year.

Membership: Composed of 6 to 10 students, including representation from both 1st and 2nd year students

Frequency: Meets monthly or as needed

Process: The MFT faculty will select the first advisory committee, which will meet to achieve the following: **1.)** Write PSAC by-laws. **2.)** Decide how future committee members will be selected. **3.)** PSAC is tasked with an annual review and evaluation of the MFT program Educational Outcomes. This review will result in submission of a report offering comment, analysis, and recommendations of the [Program Mission](#), [Philosophy](#), [Goals & Objectives](#), [Program Outcomes](#), and [Student Learning Outcomes](#). A PSAC representative will present this report at the annual MFT Strategic Planning Retreat (usually held in the summer), where it will be discussed in full. **4.)** The committee may select a representative to attend some portion of monthly faculty meetings as necessary. **5.)** The committee will share its monthly meeting minutes with the faculty. **6.)** PSAC will be given program support to formulate a self-replicating structure, with sufficient resources to support the charge of the PSAC (i.e., meeting space, office supplies, and web page space).

Faculty contact: Dr. Martha Laughlin, Director of Clinical Training or Kate Warner, Program Director

Grievance and Appellate Procedures

Grade appeals and grievances are two different procedures with different policy guidelines.

Grade Appeals

According to the Grade Appeal policy, the evaluation of academic work is the prerogative of the instructor and the rules for determining final course grades should be established by the instructor and given to the students in a course syllabus at the beginning of the semester. A student who believes grounds exist for an appeal of a final course grade must first consult informally with the instructor.

The grade appeal procedure is not to be used to review the judgment of an instructor in assessing the quality of a student's work. Possible grounds for an appeal are items such as the following:

- (a) An obvious error in the calculation of the grade.
- (b) The assignment of a grade to a particular student by application of more exacting requirements than were applied to other students in the course.
- (c) The assignment of a grade to a particular student on some basis other than performance in the course.
- (d) The assignment of a grade by a substantial departure from the instructor's previously announced standards.

Students who believe they have a case that meets these grounds must read the following information and follow the process as outlined. A grade appeal must begin within 30 working days after the registrar's office has posted final grades. Once the appeal process is initiated, the burden of proof is on the student. The appeal process proceeds as follows:

1. First discuss your appeal with the instructor who assigned the grade. If the matter is not resolved, the student must fill out a Grade Appeal form and submit it to the instructor. After the instructor has had the chance to review the appeal, the instructor and the student should

meet again to discuss it. If the appeal is not resolved at this level, the appeal moves to the next levels.

2. The instructor's Department Head.
3. Dean of the College in which the course was taught.
4. Dean of the Graduate School (for graduate courses)
5. Office of the Vice President for Academic Affairs.

The policy for appealing grades can also be found in the Graduate School Handbook at <http://www.valdosta.edu/academics/graduate-school/documents/graduate-school-handbook.pdf>.

Appealing Denials, Dismissals, and the 7-Year Rule

Students may find information and forms about appealing denials, dismissals, and the 7-Year Rule at <http://www.valdosta.edu/academics/graduate-school/appeals.php>.

Other Appeals

All other appeals are governed by policies established by the Board of Regents of the University System of Georgia. Valdosta State University has established appellate procedures consistent with Board policy. The policy may be found at Appellate Procedures in the *Graduate School Handbook*. Students must appeal decisions in the following order: 1. Department, 2. College, 3. Dean of the Graduate School, 4. Vice President for Academic Affairs, and 5. President of the University.

Appeals made to the Dean of the Graduate School must be in writing and must include written documentation from each stage of the appellate process. Upon receipt of a written appeal, the Dean of the Graduate School will first determine if the appeal is appropriate for the Graduate School to hear. If it is, the Dean may choose to discuss the issue with the parties involved in an attempt to reach a satisfactory resolution of the problem, or the Dean may appoint a committee to hear the appeal. If the Dean chooses to discuss the issue with the parties involved, and no satisfactory resolution of the problem is reached, the Dean must appoint an ad hoc Appeal Committee to hear the appeal. The ad hoc Appeal Committee will consist of three members selected from the Graduate Executive Committee, one of whom will be appointed by the Dean to serve as chair. Two members of the committee must come from outside the College involved in the appeal.

The written appeal along with all supporting documentation must be provided to each member of the committee at least one week prior to the date of a hearing. The committee chair is responsible for providing all interested parties with a notice of the date, time, and location of the hearing.

The student initiating the appeal and all other parties with a salient interest in the appeal have a right to appear before the committee. The student may bring one additional person to provide advice and counsel.

Upon completion of the hearing, the ad hoc Appeal Committee must submit its recommendation, in writing, to the Dean of the Graduate School within one week after the hearing. The Dean of the Graduate School will make a decision on the appeal and then notify all parties of the disposition of the appeal, in writing, within one week. Copies of all decisions, recommendations,

and other materials involved in the appeal will be forwarded to the Vice President for Academic Affairs.

If no satisfactory resolution of the appeal has been reached at the level of the Graduate School, the appellant has the right to carry the appeal to the Vice President for Academic Affairs. Such an appeal must be provided in writing to the Office of the Vice President for Academic Affairs no later than thirty (30) calendar days after the student has received the decision of the ad hoc Appeal Committee.

All forms and letters related to student complaints are placed in the student's file. Student complaints are reviewed by the faculty during regular faculty meetings beginning with the initiation of the complaint and continuing through to the resolution. Any complaint that appears to be caused by or aggravated by the policies, procedures, or infrastructure of the program will also be reviewed during the next MFT Strategic Planning retreat.

BOR Appeals Information

The Georgia Board of Regents Policy on Appeals can be found at the BOR Policy Manual <http://www.usg.edu/policymanual/section4/C333> and in the BOR Bylaws at <http://www.usg.edu/regents/bylaws/#appeals>:

The Bylaws read as follows:

Any student or employee in the University System aggrieved by a final decision of the president of an institution may apply to the Board of Regents for a review of the decision. The Board's review shall be limited to the record from the institutional appeal process. Nothing in this policy shall be construed to extend to any employee or student substantive or procedural rights not required by federal or state law. This policy shall not be construed to extend to employees or students any expectation of employment, admission, or additional due process rights.

Each application for review shall be submitted in writing to the Board's Office of Legal Affairs within a period of twenty days following the decision of the president. It shall state the decision complained of and the redress desired. A hearing before the Board (or a Committee of or appointed by the Board) is not a matter of right but is within the sound discretion of the Board.

Appeals brought by students shall be governed by [Policy 4.7.1](#) of The Policy Manual of the Board of Regents. Appeals brought by employees shall be governed by [Policy 8.2.21](#) of The Policy Manual of The Board of Regents.

The Board may at its discretion refer a matter for mediation, arbitration, or evaluation of settlement options. If an application for review is granted, the Board, a Committee of the Board, a Committee appointed by the Board, or a hearing officer appointed by the Board shall investigate the matter thoroughly and report its findings and recommendations to the Board. The decision of the Board shall be final and binding for all purposes

Grievance Policy and Procedure

If, during the course of enrollment in or employment by the institution, a student feels that he or she has been discriminated against or harassed in violation of the University's affirmative action and/or sexual harassment policies, the following action should be taken:

- A. A conference should be immediately scheduled with the Office of Social Equity and the appropriate individual will advise the student of his/her rights with respect to the nature of the complaint.
- B. A determination will be made as to whether the complaint warrants a formal investigation with requires filing an official complaint by the student. A record of the findings will be retained in the Office of Social Equity.
- C. In the case of a student employee, the procedure outlined in the regular staff handbook will be followed. The Office of Social Equity will make this information available to the student.

While it is expected that students with complaints of an academic nature will file such complaints through normal channels (faculty member, department head, dean, vice president for academic affairs and Provost, President), any violation relative to affirmative action or harassment should be reported immediately to the Office of Social Equity. (VSU Student Handbook, <http://ww2.valdosta.edu/studentaffairs/StudentHandbook.shtml>)

Membership in AAMFT

The MFT faculty strongly recommends that you join AAMFT as a student member immediately after you start your first semester. You can apply online at <http://www.aamft.org>. As you explore the AAMFT website, notice that after you graduate and progress through various stages of your career, you can apply to apply to upgrade your membership from student to Associate and on up to Clinical Fellow.

Georgia Licensure as an MFT

Students who graduate from the VSU Marriage and Family Therapy Track have fulfilled the academic requirements required by the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family (hereafter referred to as The Board) to apply to take the national licensing exam.

MFT graduates can take two routes to licensure in the State of Georgia:

- (1.) Graduates can become a Licensed Associate Marriage and Family Therapist (LAMFT) by successfully completing the national licensing examination immediately after graduation. Applicants for the LAMFT license must fill out an application, pay fees, and have their academic course of study approved by the Board and be granted state approval in order to sit for the licensing examination. Once the exam has been passed, you are given an LAMFT, which carries with it all the same privileges and responsibilities as the full LMFT license. LAMFTs must collect 2,000 before applying for full licensure. After successful accrual of 2,000 hours of post-graduate client contact and 100 hours of post-graduate supervision over a minimum period of two years and a maximum period of five years, the client contact and supervision, a LAMFT can apply to become a Licensed Marriage and Family Therapist (LMFT).
- (2.) Graduates may opt to take the licensing examination after the collection of their 2,000 hours of post-graduate client contact and 100 hours of post-graduate supervision. The client contact and supervision hours must be collected during a minimum period of two years and a maximum period of five years from the date the master's degree is awarded. In this case,

after the fee is paid and the application is approved—including Board approval of their academic course of study and acceptance of the client contact and supervision hours—applicants can take the licensing examination. After passing the exam, applicants are granted the status of Licensed Marriage and Family Therapist (LMFT).

Contact the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists to obtain more information about licensure:

Georgia Composite Board of Professional Counselors,
Social Workers, and Marriage and Family Therapists

237 Coliseum Drive

Macon, GA 31217-3858

Phone: 478-207-1670

Fax: 478-207-1676

Email: slstubbs@sos.state.ga.us

Webpage: <http://www.sos.state.ga.us/plb/>

Ethical Conduct

Students are expected to comply with and behave in accordance with the VSU Student Code of Ethics (found in the *VSU Student Handbook*), the Code of Ethics of the American Association of Marriage and Family Therapy (below), the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists Rules & Regulations Code of Ethics (below), and the State of Georgia's Professional Counselors, Social Workers, and Marriage and Family Therapists Licensing Law, Official Code 43-10A. A copy of Georgia Code 43-10A can be obtained from the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists. Failure to maintain and uphold the Codes of Ethics listed above may result in a referral to the Department, College, and/or University Ethics Committees and ultimately in dismissal from the program.

The AAMFT Code of Ethics can be viewed here:

American Association of Marriage & Family Therapy Code of Ethics

Preamble

The Board of Directors of the American Association for Marriage and Family Therapy (AAMFT) hereby promulgates, pursuant to Article 2, Section 2.013 of the Association's Bylaws, the Revised AAMFT Code of Ethics, effective July 1, 2001.

The AAMFT strives to honor the public trust in marriage and family therapists by setting standards for ethical practice as described in this Code. The ethical standards define professional expectations and are enforced by the AAMFT Ethics Committee. The absence of an explicit reference to a specific behavior or situation in the Code does not mean that the behavior is ethical or unethical. The standards are not exhaustive. Marriage and family therapists who are

uncertain about the ethics of a particular course of action are encouraged to seek counsel from consultants, attorneys, supervisors, colleagues, or other appropriate authorities.

Both law and ethics govern the practice of marriage and family therapy. When making decisions regarding professional behavior, marriage and family therapists must consider the AAMFT Code of Ethics and applicable laws and regulations. If the AAMFT Code of Ethics prescribes a standard higher than that required by law, marriage and family therapists must meet the higher standard of the AAMFT Code of Ethics. Marriage and family therapists comply with the mandates of law, but make known their commitment to the AAMFT Code of Ethics and take steps to resolve the conflict in a responsible manner. The AAMFT supports legal mandates for reporting of alleged unethical conduct.

The AAMFT Code of Ethics is binding on Members of AAMFT in all membership categories, AAMFT-Approved Supervisors, and applicants for membership and the Approved Supervisor designation (hereafter, AAMFT Member). AAMFT members have an obligation to be familiar with the AAMFT Code of Ethics and its application to their professional services. Lack of awareness or misunderstanding of an ethical standard is not a defense to a charge of unethical conduct.

The process for filing, investigating, and resolving complaints of unethical conduct is described in the current Procedures for Handling Ethical Matters of the AAMFT Ethics Committee. Persons accused are considered innocent by the Ethics Committee until proven guilty, except as otherwise provided, and are entitled to due process. If an AAMFT Member resigns in anticipation of, or during the course of, an ethics investigation, the Ethics Committee will complete its investigation. Any publication of action taken by the Association will include the fact that the Member attempted to resign during the investigation.

Principle I Responsibility to Clients

1. Responsibility to Clients

Marriage and family therapists advance the welfare of families and individuals. They respect the rights of those persons seeking their assistance, and make reasonable efforts to ensure that their services are used appropriately.

- 1.1.** Marriage and family therapists provide professional assistance to persons without discrimination on the basis of race, age, ethnicity, socioeconomic status, disability, gender, health status, religion, national origin, or sexual orientation.
- 1.2** Marriage and family therapists obtain appropriate informed consent to therapy or related procedures and use language that is reasonably understandable to clients. The content of informed consent may vary depending upon the client and treatment plan; however, informed consent generally necessitates that the client: (a) has the capacity to consent; (b) has been adequately informed of significant information concerning treatment processes, procedures, risks and benefits; (c) has freely and without undue influence expressed consent; and (d) has provided consent that is appropriately documented. When persons,

due to age or mental status, are legally incapable of giving informed consent, marriage and family therapists obtain informed permission from a legally authorized person, if such substitute consent is legally permissible.

- 1.3** Marriage and family therapists are aware of their influential positions with respect to clients, and they avoid exploiting the trust and dependency of such persons. Therapists, therefore, make every effort to avoid conditions and multiple relationships with clients that could impair professional judgment or increase the risk of exploitation. Such relationships include, but are not limited to, business or close personal relationships with a client or the client's immediate family. When the risk of impairment or exploitation exists due to conditions or multiple roles, therapists take appropriate precautions.
- 1.4** Sexual intimacy with clients is prohibited.
- 1.5** Sexual intimacy with former clients is likely to be harmful and is therefore prohibited for two years following the termination of therapy or last professional contact. In an effort to avoid exploiting the trust and dependency of clients, marriage and family therapists should not engage in sexual intimacy with former clients after the two years following termination or last professional contact. Should therapists engage in sexual intimacy with former clients following two years after termination or last professional contact, the burden shifts to the therapist to demonstrate that there has been no exploitation or injury to the former client or to the client's immediate family.
- 1.6** Marriage and family therapists comply with applicable laws regarding the reporting of alleged unethical conduct.
- 1.7** Marriage and family therapists do not use their professional relationships with clients to further their own interests.
- 1.8** Marriage and family therapists respect the rights of clients to make decisions and help them to understand the consequences of these decisions. Therapists clearly advise the clients that they have the responsibility to make decisions regarding relationships such as cohabitation, marriage, divorce, separation, reconciliation, custody, and visitation.
- 1.9** Marriage and family therapists continue therapeutic relationships only so long as it is reasonably clear that clients are benefiting from the relationship.
- 1.10** Marriage and family therapists assist persons in obtaining other therapeutic services if the therapist is unable or unwilling, for appropriate reasons, to provide professional help.
- 1.11** Marriage and family therapists do not abandon or neglect clients in treatment without making reasonable arrangements for the continuation of such treatment.
- 1.12** Marriage and family therapists obtain written informed consent from clients before videotaping, audio recording, or permitting third-party observation.

- 1.13** Marriage and family therapists, upon agreeing to provide services to a person or entity at the request of a third party, clarify, to the extent feasible and at the outset of the service, the nature of the relationship with each party and the limits of confidentiality.

Principle II Confidentiality

2. Confidentiality

Marriage and family therapists have unique confidentiality concerns because the client in a therapeutic relationship may be more than one person. Therapists respect and guard the confidences of each individual client.

- 2.1** Marriage and family therapists disclose to clients and other interested parties, as early as feasible in their professional contacts, the nature of confidentiality and possible limitations of the clients' right to confidentiality. Therapists review with clients the circumstances where confidential information may be requested and where disclosure of confidential information may be legally required. Circumstances may necessitate repeated disclosures.
- 2.2** Marriage and family therapists do not disclose client confidences except by written authorization or waiver, or where mandated or permitted by law. Verbal authorization will not be sufficient except in emergency situations, unless prohibited by law. When providing couple, family or group treatment, the therapist does not disclose information outside the treatment context without a written authorization from each individual competent to execute a waiver. In the context of couple, family or group treatment, the therapist may not reveal any individual's confidences to others in the client unit without the prior written permission of that individual.
- 2.3** Marriage and family therapists use client and/or clinical materials in teaching, writing, consulting, research, and public presentations only if a written waiver has been obtained in accordance with Subprinciple 2.2, or when appropriate steps have been taken to protect client identity and confidentiality.
- 2.4** Marriage and family therapists store, safeguard, and dispose of client records in ways that maintain confidentiality and in accord with applicable laws and professional standards.
- 2.5** Subsequent to the therapist moving from the area, closing the practice, or upon the death of the therapist, a marriage and family therapist arranges for the storage, transfer, or disposal of client records in ways that maintain confidentiality and safeguard the welfare of clients.
- 2.6** Marriage and family therapists, when consulting with colleagues or referral sources, do not share confidential information that could reasonably lead to the identification of a client, research participant, supervisee, or other person with whom they have a confidential relationship unless they have obtained the prior written consent of the client,

research participant, supervisee, or other person with whom they have a confidential relationship. Information may be shared only to the extent necessary to achieve the purposes of the consultation.

Principle III Professional Competence and Integrity

3. Professional Competence and Integrity

Marriage and family therapists maintain high standards of professional competence and integrity.

- 3.1** Marriage and family therapists pursue knowledge of new developments and maintain competence in marriage and family therapy through education, training, or supervised experience.
- 3.2** Marriage and family therapists maintain adequate knowledge of and adhere to applicable laws, ethics, and professional standards.
- 3.3** Marriage and family therapists seek appropriate professional assistance for their personal problems or conflicts that may impair work performance or clinical judgment.
- 3.4** Marriage and family therapists do not provide services that create a conflict of interest that may impair work performance or clinical judgment.
- 3.5** Marriage and family therapists, as presenters, teachers, supervisors, consultants and researchers, are dedicated to high standards of scholarship, present accurate information, and disclose potential conflicts of interest.
- 3.6** Marriage and family therapists maintain accurate and adequate clinical and financial records.
- 3.7** While developing new skills in specialty areas, marriage and family therapists take steps to ensure the competence of their work and to protect clients from possible harm. Marriage and family therapists practice in specialty areas new to them only after appropriate education, training, or supervised experience.
- 3.8** Marriage and family therapists do not engage in sexual or other forms of harassment of clients, students, trainees, supervisees, employees, colleagues, or research subjects.
- 3.9** Marriage and family therapists do not engage in the exploitation of clients, students, trainees, supervisees, employees, colleagues, or research subjects.
- 3.10** Marriage and family therapists do not give to or receive from clients (a) gifts of substantial value or (b) gifts that impair the integrity or efficacy of the therapeutic relationship.

- 3.11** Marriage and family therapists do not diagnose, treat, or advise on problems outside the recognized boundaries of their competencies.
- 3.12** Marriage and family therapists make efforts to prevent the distortion or misuse of their clinical and research findings.
- 3.13** Marriage and family therapists, because of their ability to influence and alter the lives of others, exercise special care when making public their professional recommendations and opinions through testimony or other public statements.
- 3.14** To avoid a conflict of interests, marriage and family therapists who treat minors or adults involved in custody or visitation actions may not also perform forensic evaluations for custody, residence, or visitation of the minor. The marriage and family therapist who treats the minor may provide the court or mental health professional performing the evaluation with information about the minor from the marriage and family therapist's perspective as a treating marriage and family therapist, so long as the marriage and family therapist does not violate confidentiality.
- 3.15** Marriage and family therapists are in violation of this Code and subject to termination of membership or other appropriate action if they: (a) are convicted of any felony; (b) are convicted of a misdemeanor related to their qualifications or functions; (c) engage in conduct which could lead to conviction of a felony, or a misdemeanor related to their qualifications or functions; (d) are expelled from or disciplined by other professional organizations; (e) have their licenses or certificates suspended or revoked or are otherwise disciplined by regulatory bodies; (f) continue to practice marriage and family therapy while no longer competent to do so because they are impaired by physical or mental causes or the abuse of alcohol or other substances; or (g) fail to cooperate with the Association at any point from the inception of an ethical complaint through the completion of all proceedings regarding that complaint.

Principle IV Responsibility to Students and Supervisees

4. Responsibility to Students and Supervisees

Marriage and family therapists do not exploit the trust and dependency of students and supervisees.

- 4.1** Marriage and family therapists are aware of their influential positions with respect to students and supervisees, and they avoid exploiting the trust and dependency of such persons. Therapists, therefore, make every effort to avoid conditions and multiple relationships that could impair professional objectivity or increase the risk of exploitation. When the risk of impairment or exploitation exists due to conditions or multiple roles, therapists take appropriate precautions.

- 4.2 Marriage and family therapists do not provide therapy to current students or supervisees.
- 4.3 Marriage and family therapists do not engage in sexual intimacy with students or supervisees during the evaluative or training relationship between the therapist and student or supervisee. Should a supervisor engage in sexual activity with a former supervisee, the burden of proof shifts to the supervisor to demonstrate that there has been no exploitation or injury to the supervisee.
- 4.4 Marriage and family therapists do not permit students or supervisees to perform or to hold themselves out as competent to perform professional services beyond their training, level of experience, and competence.
- 4.5 Marriage and family therapists take reasonable measures to ensure that services provided by supervisees are professional.
- 4.6 Marriage and family therapists avoid accepting as supervisees or students those individuals with whom a prior or existing relationship could compromise the therapist's objectivity. When such situations cannot be avoided, therapists take appropriate precautions to maintain objectivity. Examples of such relationships include, but are not limited to, those individuals with whom the therapist has a current or prior sexual, close personal, immediate familial, or therapeutic relationship.
- 4.7 Marriage and family therapists do not disclose supervisee confidences except by written authorization or waiver, or when mandated or permitted by law. In educational or training settings where there are multiple supervisors, disclosures are permitted only to other professional colleagues, administrators, or employers who share responsibility for training of the supervisee. Verbal authorization will not be sufficient except in emergency situations, unless prohibited by law.

Principle V

Responsibility to Research Participants

5. Responsibility to Research Participants

Investigators respect the dignity and protect the welfare of research participants, and are aware of applicable laws and regulations and professional standards governing the conduct of research.

- 5.1 Investigators are responsible for making careful examinations of ethical acceptability in planning studies. To the extent that services to research participants may be compromised by participation in research, investigators seek the ethical advice of qualified professionals not directly involved in the investigation and observe safeguards to protect the rights of research participants.
- 5.2 Investigators requesting participant involvement in research inform participants of the aspects of the research that might reasonably be expected to influence willingness to

participate. Investigators are especially sensitive to the possibility of diminished consent when participants are also receiving clinical services, or have impairments which limit understanding and/or communication, or when participants are children.

- 5.3** Investigators respect each participant's freedom to decline participation in or to withdraw from a research study at any time. This obligation requires special thought and consideration when investigators or other members of the research team are in positions of authority or influence over participants. Marriage and family therapists, therefore, make every effort to avoid multiple relationships with research participants that could impair professional judgment or increase the risk of exploitation.
- 5.4** Information obtained about a research participant during the course of an investigation is confidential unless there is a waiver previously obtained in writing. When the possibility exists that others, including family members, may obtain access to such information, this possibility, together with the plan for protecting confidentiality, is explained as part of the procedure for obtaining informed consent.

Principle VI Responsibility to the Profession

6. Responsibility to the Profession

Marriage and family therapists respect the rights and responsibilities of professional colleagues and participate in activities that advance the goals of the profession.

- 6.1** Marriage and family therapists remain accountable to the standards of the profession when acting as members or employees of organizations. If the mandates of an organization with which a marriage and family therapist is affiliated, through employment, contract or otherwise, conflict with the AAMFT Code of Ethics, marriage and family therapists make known to the organization their commitment to the AAMFT Code of Ethics and attempt to resolve the conflict in a way that allows the fullest adherence to the Code of Ethics.
- 6.2** Marriage and family therapists assign publication credit to those who have contributed to a publication in proportion to their contributions and in accordance with customary professional publication practices.
- 6.3** Marriage and family therapists do not accept or require authorship credit for a publication based on research from a student's program, unless the therapist made a substantial contribution beyond being a faculty advisor or research committee member. Coauthorship on a student thesis, dissertation, or project should be determined in accordance with principles of fairness and justice.
- 6.4** Marriage and family therapists who are the authors of books or other materials that are published or distributed do not plagiarize or fail to cite persons to whom credit for original ideas or work is due.

- 6.5 Marriage and family therapists who are the authors of books or other materials published or distributed by an organization take reasonable precautions to ensure that the organization promotes and advertises the materials accurately and factually.
- 6.6 Marriage and family therapists participate in activities that contribute to a better community and society, including devoting a portion of their professional activity to services for which there is little or no financial return.
- 6.7 Marriage and family therapists are concerned with developing laws and regulations pertaining to marriage and family therapy that serve the public interest, and with altering such laws and regulations that are not in the public interest.
- 6. Marriage and family therapists encourage public participation in the design and delivery of professional services and in the regulation of practitioners.

Principle VII

Financial Arrangements

7. Financial Arrangements

Marriage and family therapists make financial arrangements with clients, third-party payors, and supervisees that are reasonably understandable and conform to accepted professional practices.

- 7.1 Marriage and family therapists do not offer or accept kickbacks, rebates, bonuses, or other remuneration for referrals; fee-for-service arrangements are not prohibited.
- 7.2 Prior to entering into the therapeutic or supervisory relationship, marriage and family therapists clearly disclose and explain to clients and supervisees: (a) all financial arrangements and fees related to professional services, including charges for canceled or missed appointments; (b) the use of collection agencies or legal measures for nonpayment; and (c) the procedure for obtaining payment from the client, to the extent allowed by law, if payment is denied by the third-party payor. Once services have begun, therapists provide reasonable notice of any changes in fees or other charges.
- 7.3 Marriage and family therapists give reasonable notice to clients with unpaid balances of their intent to seek collection by agency or legal recourse. When such action is taken, therapists will not disclose clinical information.
- 7.4 Marriage and family therapists represent facts truthfully to clients, third-party payors, and supervisees regarding services rendered.
- 7.5 Marriage and family therapists ordinarily refrain from accepting goods and services from clients in return for services rendered. Bartering for professional services may be conducted only if: (a) the supervisee or client requests it, (b) the relationship is not

exploitative, (c) the professional relationship is not distorted, and (d) a clear written contract is established.

- 7.6** Marriage and family therapists may not withhold records under their immediate control that are requested and needed for a client's treatment solely because payment has not been received for past services, except as otherwise provided by law.

Principle VIII Advertising

8. Advertising

Marriage and family therapists engage in appropriate informational activities, including those that enable the public, referral sources, or others to choose professional services on an informed basis.

- 8.1** Marriage and family therapists accurately represent their competencies, education, training, and experience relevant to their practice of marriage and family therapy.
- 8.2** Marriage and family therapists ensure that advertisements and publications in any media (such as directories, announcements, business cards, newspapers, radio, television, Internet, and facsimiles) convey information that is necessary for the public to make an appropriate selection of professional services. Information could include: (a) office information, such as name, address, telephone number, credit card acceptability, fees, languages spoken, and office hours; (b) qualifying clinical degree (see subprinciple 8.5); (c) other earned degrees (see subprinciple 8.5) and state or provincial licensures and/or certifications; (d) AAMFT clinical member status; and (e) description of practice.
- 8.3** Marriage and family therapists do not use names that could mislead the public concerning the identity, responsibility, source, and status of those practicing under that name, and do not hold themselves out as being partners or associates of a firm if they are not.
- 8.4** Marriage and family therapists do not use any professional identification (such as a business card, office sign, letterhead, Internet, or telephone or association directory listing) if it includes a statement or claim that is false, fraudulent, misleading, or deceptive.
- 8.5** In representing their educational qualifications, marriage and family therapists list and claim as evidence only those earned degrees: (a) from institutions accredited by regional accreditation sources recognized by the United States Department of Education, (b) from institutions recognized by states or provinces that license or certify marriage and family therapists, or (c) from equivalent foreign institutions.
- 8.6** Marriage and family therapists correct, wherever possible, false, misleading, or inaccurate information and representations made by others concerning the therapist's qualifications, services, or products.

- 8.7** Marriage and family therapists make certain that the qualifications of their employees or supervisees are represented in a manner that is not false, misleading, or deceptive.
- 8.8** Marriage and family therapists do not represent themselves as providing specialized services unless they have the appropriate education, training, or supervised experience.

Georgia Rules (Georgia Code of Ethics)

- Rule 135-7-01: Responsibility to Clients.
 Rule 135-7-02: Integrity.
 Rule 135-7-03: Confidentiality.
 Rule 135-7-04: Responsibility to Colleagues.
 Rule 135-7-05: Assessment Instruments.
 Rule 135-7-06: Research.
 Rule 135-7-07: Advertising and Professional Representation.

135-7-.01 Responsibility to Clients.

- (1) A licensee's primary professional responsibility is to the client. The licensee shall make every reasonable effort to promote the welfare, autonomy and best interests of families and individuals, including respecting the rights of those persons seeking assistance, obtaining informed consent, and making reasonable efforts to ensure that the licensee's services are used appropriately.
- (2) Unprofessional conduct includes, but is not limited to, the following:
- (a) exploiting relationships with clients for personal or financial advantages;
 - (b) using any confidence of a client to the client's disadvantage;
 - (c) participating in dual relationships with clients that create a conflict of interest which could impair the licensee's professional judgment, harm the client, or compromise the therapy;
 - (d) undertaking a course of treatment when the client, or the client's representative, does not understand and agree with the treatment goals;
 - (e) knowingly withholding information about accepted and prevailing treatment alternatives that differ from those provided by the licensee;
 - (f) failing to inform the client of any contractual obligations, limitations, or requirements resulting from an agreement between the licensee and a third party payer which could influence the course of the client's treatment;
 - (g) when there are clear and established risks to the client, failing to provide the client with a description of any foreseeable negative consequences of the proposed treatment;

- (h) charging a fee for anything without having informed the client in advance of the fee;
- (i) taking any action for nonpayment of fees without first advising the client of the intended action and providing the client with an opportunity to settle the debt;
- (j) when termination or interruption of service to the client is anticipated, failing to notify the client promptly and failing to assist the client in seeking alternative services consistent with the client's needs and preferences;
- (k) failing to terminate a client relationship when it is reasonably clear that the treatment no longer serves the client's needs or interest;
- (l) delegating professional responsibilities to another person when the licensee delegating the responsibilities knows or has reason to know that such person is not qualified by training, by experience, or by licensure to perform them; and
- (m) failing to provide information regarding a client's evaluation or treatment, in a timely fashion and to the extent deemed prudent and clinically appropriate by the licensee, when that information has been requested and released by the client.

Authority O.C.G.A. 43-7A-5(d). Administrative History. Original Rule entitled "Responsibility to Clients" was filed on October 19, 1987; effective November 8, 1987. Repealed: New Rule, same title, adopted. F. Feb. 28, 2000; ef. Mar. 19, 2000.

135-7-.02 Integrity.

- (1) The licensee shall act in accordance with the highest standards of professional integrity and competence. The licensee is honest in dealing with clients, students, trainees, colleagues, and the public. The licensee seeks to eliminate incompetence or dishonesty from the profession.
- (2) Unprofessional conduct includes, but is not limited to:
 - (a) practicing inhumane or discriminatory treatment toward any person or group of persons;
 - (b) engaging in dishonesty, fraud, deceit, or misrepresentation while performing professional activities;
 - (c) engaging in sexual activities or sexual advances with any client, trainee, or student;
 - (d) practicing while under the influence of alcohol or drugs not prescribed by a licensed physician;
 - (e) practicing in an area in which the licensee has not obtained university level graduate training or substantially equivalent supervised experience;

- (f) failing either to obtain supervision or consultation, or to refer the client to a qualified practitioner, who faced with treatment, assessment or evaluation issues beyond the licensee's competence;
- (g) accepting or giving a fee or anything of value for making or receiving a referral;
- (h) using an institutional affiliation to solicit clients for the licensee's private practice; and
- (i) allowing an individual or agency that is paying for the professional services to exert undue influence over the licensee's evaluation or treatment of a client.

Authority O.C.G.A. 43-7A-5(d). History. Original Rule entitled "Integrity" was filed on October 19, 1987; effective November 8, 1987. Repealed: New Rule, same title, adopted. F. Feb. 28, 2000; eff. Mar. 19, 2000.

135-7-.03 Confidentiality.

- (1) The licensee holds in confidence all information obtained at any time during the course of a professional relationship, beginning with the first professional contact. The licensee safeguards clients' confidences as permitted by law.
- (2) Unprofessional conduct includes but is not limited to the following:
 - (a) revealing a confidence of a client, whether living or deceased, to anyone except:
 1. as required by law;
 2. after obtaining the consent of the client, when the client is a legally competent adult, or the legal custodian, when the client is a minor or a mentally incapacitated adult. The licensee shall provide a description of the information to be revealed and the persons to whom the information will be revealed prior to obtaining such consent. When more than one client has participated in the therapy, the licensee may reveal information regarding only those clients who have consented to the disclosure;
 3. where the licensee is a defendant in a civil, criminal, or disciplinary action arising from the therapy, in which case client confidences may be disclosed in the course of that action;
 4. where there is clear and imminent danger to the client or others, in which case the licensee shall take whatever reasonable steps are necessary to protect those at risk including, but not limited to, warning any identified victims and informing the responsible authorities; and
 5. when discussing case material with a professional colleague for the purpose of consultation or supervision;

- (b) failing to obtain written, informed consent from each client before electronically recording sessions with that client or before permitting third party observation of their sessions;
- (c) failing to store or dispose of client records in a way that maintains confidentiality, and when providing any client with access to that client's records, failing to protect the confidences of other persons contained in that record;
- (d) failing to protect the confidences of the client from disclosure by employees, associates, and others whose services are utilized by the licensee; and
- (e) failing to disguise adequately the identity of a client when using material derived from a counseling relationship for purposes of training or research.

Authority O.C.G.A. 43-7A-5(d). History. Original Rule entitled "Confidentiality" was filed on October 19, 1987; effective November 8, 1987. Repealed: New Rule, same title, adopted. F. Feb. 28, 2000; eff. Mar. 19, 2000.

135-7-.04 Responsibility to Colleagues.

- (1) The licensee respects the rights and responsibilities of professional colleagues and, as the employee of an organization, remains accountable as an individual to the ethical principles of the profession. The licensee treats colleagues with respect and good faith, and relates to the clients of colleagues with full professional consideration.
- (2) Unprofessional conduct includes but is not limited to the following:
 - (a) soliciting the clients of colleagues or assuming professional responsibility for clients of another agency or colleague without appropriate communication with that agency or colleague;
 - (b) failing to maintain the confidences shared by colleagues and supervisees in the course of professional relationships and transactions with those colleagues;
 - (c) when a supervisee is unlicensed, failing to inform the supervisee of the legal limitations on unlicensed practice;
 - (d) when a supervisor is aware that a supervisee is engaging in any unethical, unprofessional or deleterious conduct, failing to provide the supervisee with a forthright evaluation and appropriate recommendations regarding such practice; and
 - (e) taking credit for work not personally performed, whether by giving inaccurate information or failing to give accurate information.

Authority O.C.G.A. 43-7A-5(d). History. Original Rule entitled "Responsibility to Colleagues" was filed on October 19, 1987; effective November 8, 1987. Repealed: New Rule, same title, adopted. F. Feb. 28, 200; eff. Mar. 19, 2000.

135-7-.05 Assessment Instruments.

- (1) When using assessment instruments or techniques, the licensee shall make every effort to promote the welfare and best interests of the client. The licensee guards against the misuse of assessment results, and respects the client's right to know the results, the interpretations and the basis for any conclusions or recommendations.
- (2) Unprofessional conduct, includes but is not limited to the following:
 - (a) failing to provide the client with an orientation to the purpose of testing or the proposed use of the test results prior to administration of assessment instruments or techniques;
 - (b) failing to consider the specific validity, reliability, and appropriateness of test measures for use in a given situation or with a particular client;
 - (c) using unsupervised or inadequately supervised test-taking techniques with clients, such as testing through the mail, unless the test is specifically self-administered or self-scored;
 - (d) administering test instruments either beyond the licensee's competence for scoring and interpretation or outside of the licensee's scope of practice, as defined by law; and
 - (e) failing to make available to the client, upon request, copies of documents in the possession of the licensee which have been prepared for and paid for by the client.

Authority O.C.G.A. 43-7A-5(d). History. Original Rule entitled "Assessment Instruments" was filed on October 19, 1987; effective November 8, 1987. Repealed: New Rule, same title, adopted. F. Feb. 28, 2000; eff. Mar. 19, 2000.

135-7-.06 Research.

- (1) The licensee recognizes that research activities must be conducted with full respect for the rights and dignity of participants and with full concern for their welfare. Participation in research must be voluntary unless it can be demonstrated that involuntary participation will have no harmful effects on the subjects and is essential to the investigation.
- (2) Unprofessional conduct includes, but is not limited to:
 - (a) failing to consider carefully the possible consequences for human beings participating in the research;
 - (b) failing to protect each research participant from unwarranted physical and mental harm;
 - (c) failing to ascertain that the consent of the research participant is voluntary and informed;
 - (d) failing to treat information obtained through research as confidential;

- (e) knowingly reporting distorted, erroneous, or misleading information.

Authority O.C.G.A. 43-7A-5(d). History. Original Rule entitled "Research" was filed on October 19, 1987; effective November 8, 1987. Repealed: New Rule, same title, adopted. F. Feb. 28, 2000; eff. Mar. 19, 2000

135-7-.07 Advertising and Professional Representation.

- (1) The licensee adheres to professional rather than commercial standards when making known their availability for professional services. The licensee may provide information that accurately informs the public of the professional services, expertise, and techniques available.
- (2) Unprofessional conduct includes, but is not limited to:
 - (b) intentionally misrepresenting the licensee's professional competence, education, training, and experience, or knowingly failing to correct any misrepresentations provided by others;
 - (c) using as a credential an academic degree in a manner which is intentionally misleading or deceiving to the public;
 - (c) intentionally providing information that contains false, inaccurate, misleading, partial, out-of-context, or otherwise deceptive statements about the licensee's professional services, or knowingly failing to correct inaccurate information provided by others; and
 - (d) making claims or guarantees which promise more than the licensee can realistically provide.

Authority O.C.G.A. 43-7A-5(d). History. Original Rule entitled "Advertising and Professional Representation" was filed on October 19, 1987; effective November 8, 1987. Repealed: New Rule, same title, adopted. F. Feb. 28, 2000; eff. Mar. 19, 2000.

Appendix A - State Comparison Chart

AMFTRB State Licensure Comparison Chart					
(Compiled August 2009 - check individual state websites for details and for any changes to licensure laws)					
State *	Title(s)	Title Meaning	Experience Needed	Exam Needed	Currently Licensed
Alabama	LMFT, MFTI, MFTA	Licensed Marriage & Family Therapist, Marriage & Family Therapist Intern, Marriage & Family Therapist Associate	LMFT: Successful completion of 2 calendar years of work experience in marriage & family therapy under qualified supervision(30+ hrs per week), must have 200 hrs. post degree supervision in which 100 must be individual, you need 1,000 direct client hrs. in which 250 must be w/ couples/families MFTI: A student or graduate of a program in Marriage & Family Therapy MFTA: Completion of internship, 100 supervision hrs. and 500 direct client hrs.	Yes	LMFT: 218 Associates: 88 Interns: 5
Alaska	MFT, MFTA	Marriage & Family Therapist, Marriage & Family Therapist Associate	MFT: M.A. or doctoral degree in MFT or equivalent, 1,500 hrs. direct client contact with couples, individuals, and families and been supervised for at least 200 hrs. including 100 hrs. of individual supervision and 100 hrs. of group supervision, and have received training related to domestic violence MFTA: Completion of internship and supervision hrs.	Yes	MFT: 82 MFTA: 3
Arizona	MFT, LAMFT	Marriage & Family Therapist, Licensed Associate Marriage & Family Therapist	MFT: Must complete 3200 hrs. of supervised work experience that includes a min of 1600 hrs. direct client contact and a minimum of 1,000 of the 1,600 must be contact with couples & families & the remaining 600 hrs. may be with individuals and groups LAMFT: There is no supervised work experience requirement & they can't engage in independent practice unless under direct supervision.	Yes	MFT: 63 LAMFT: 1
Arkansas	LMFT, LAMFT	Licensed Marriage & Family Therapist, Licensed Associate Marriage & Family Therapist	LMFT: Received a graduate degree in either MFT or related field, have at least 5 yrs. clinical experience in the practice of marriage & family therapy or clinical membership in the AAMFT or NACFC or certification by an appropriate professional organization as defined by the board LAMFT: The board shall issue this license to each applicant who meets the requirements. You may petition the board for licensure review for LMFT provided all requirements have been met.	Yes	LMFT: 17
California	MFT, MFTI	Marriage & Family Therapist, Marriage & family Therapist Intern	MFT: 104 wks of Supervision & 52 wks must be in which applicant received at least 1 hr of one-on-one, individual supervision. 3,000 hours of supervised work experience is needed which includes a minimum of 500 hrs. with couples, family & children, and a max of 500 hrs. group therapy or counseling, 250 hrs. max telephone counseling, and 125 hrs. max telemedicine counseling & upon graduation must register with the Board as a MFT Intern.	Yes	MFT: 30,258 MFTI: 12,006
Colorado	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctoral degree from accredited school/college, has had at least 2 yrs. of post masters or 1 yr. postdoctoral practice in individual & MFT, including 1,500 hrs. face-to-face direct client contact.	Yes	627
Connecticut	LMFT	Licensed Marriage & Family Therapist,	LMFT: Successful completion of a graduate program specializing in MFT, successful completion of supervised practicum or internship w/ emphasis in MFT in which student received minimum 500 direct clinical hrs. to include 100 hrs. of clinical supervision, completion of at least 12 months postgraduate work experience to include at least 1000 hrs. direct client contact and 100 hrs. postgraduate clinical supervision provided by licensed MFT, of the 100 50 shall be individual supervision and remaining may be group supervision .	Yes	LMFT: 37
Delaware	MFT	Marriage & Family Therapist	MFT: Counseling experience must be not less than 3200 hrs. over at least 2 yrs., but not more than 4 yrs., of the 3200 at least 1600 must have been under professional direct supervision acceptable to the board. The 1600 must consist of a minimum 500 hrs. couple and family therapy and 500 individual. therapy. You also must meet w/ your supervisor directly for a minimum of 100 hrs. The remaining 500 may be split between couple and	Yes	MFT: 9

Appendix A - State Comparison Chart

District of Columbia	LMFT	Licensed Marriage & Family Therapist	LMFT: Must complete graduate degree in MFT, complete 1,500 face-to-face supervised, post-grad clinical hrs. doing MFT w/ couples and families, this experience must take place over at least 2 yrs. The supervision requirement must be at least 300 hrs. 150 of which must be individual and 200 must be by a "general supervisor."	Yes	LMFT: 40
Florida	LMFT	Licensed Marriage & Family Therapist	LMFT: Masters degree w/ major emphasis in MFT, minimum of one supervised clinical practicum, internship or field experience in a marriage and family counseling setting during which the student provided 180 direct client contact hrs. of MFT services, must have 2 yrs. postmasters supervised experience under the supervision of a LMFT with 5 yrs. of experience.	Yes	LMFT: 1,547
Georgia	MFT, AMFT	Marriage & Family Therapist, Associate Marriage & Family Therapist	AMFT: complete 1 yr. practicum in MFT under supervision before or after M.A. degree, practicum shall include 500 hrs. direct clinical experience in MFT & 100 in supervision of such experience and cannot practice as this longer than 5 years. MFT: Minimum of 2,000 hrs. direct clinical experience, 100 hrs. supervision which shall be completed w/ in 2 to 5 yrs.	Yes	AMFT: 43 MFT: 633
Hawaii	MFT	Marriage & Family Therapist	MFT: Has completed a master's degree or doctoral degree from an accredited educational institution in marriage and family therapy or in an allied field related to the practice of mental health counseling. Has one year practicum with three hundred hours supervised client contact. Completes one thousand hours of direct marriage and family therapy, and two hundred hours clinical supervision in not less than twenty-four months.	Yes	MFT: 250
Idaho	LAMFT LMFT	Licensed Associate Marriage & Family Therapist; Licensed Marital & Family Therapist	LAMFT: Completion of Practicum, successfully complete National MFT Exam LMFT: Complete 1 yr. practicum of supervised MFT experience consisting of a minimum 300 direct client contact hrs., 150 must be couples/families; 3,000 hrs. of supervised MFT w/ minimum 200 hrs. post-grad supervision.	Yes	LMFT: 277 LAMFT: 4
Illinois	LMFT AMFT	Licensed Marriage & Family Therapist, Associate Marriage & Family Therapist	LMFT: Must obtain a graduate degree, complete at least 3000 hrs. of professional work experience in not less than a 2 yr. period and not more than 5 yrs., which includes 1000 hrs. face-to-face client contact with individual, couples and families. At least 350 hrs. of the 1000 hrs. of face-to-face client contact must involve conjoint therapy. You must also complete 200 hrs. of clinical supervision of MFT, at least 100 shall be completed while fulfilling the clinical experience requirement the other 100 hrs. shall have been received as part of a practicum or internship and/or from an individual. who was a licensed MFT or equivalent. AMFT: M.A. or doctoral degree in MFT, must have completed a minimum of 48 semester hrs. of graduate coursework.	Yes	
Indiana	LMFT LMFTA	Licensed Marriage & Family Therapist, Licensed Marriage & Family Therapist Associate	LMFT: Completed a M.A. or doctoral degree MFT, 2 yrs. supervised clinical experience in MFT during which at least 50% of your clients received MFT services 2 yrs. of this experience must include 1,000 hrs. of post degree clinical experience and 200 hrs. of post degree clinical supervision of which 100 hrs. must be individual. supervision. LMFTA: Can work with a supervisor, but cannot practice without a license.	Yes	LMFT: 40 LMFTA: 22
Iowa	MFT	Marital & Family Therapist	MFT: Have completed a masters degree or doctoral degree in MFT or a field related to the practice, has 1 yr. practicum w/ 300 hrs. supervised client contact, competes 1000 hrs. of direct MFT and 200 hrs. clinical supervision in not less than 24 months.	Yes	MFT: 262

Appendix A - State Comparison Chart

Kansas	LMFT LCMFT	Licensed Marriage & Family Therapist, Licensed Clinical Marriage & Family Therapist	LMFT: Be over 21 yrs. of age, M.A. or Doctorate in MFT or related field w/ similar coursework, merits public trust as demonstrated by professional references LCMFT: If fully licensed as a LMFT before 7/1/00 you can transition your license to LCMFT if you already practice as a LMFT within the last 5 yrs., license or registration has not been revoked, and are competent to diagnose and treat mental disorders as documented by either 9 transcript grad hrs. in diagnosis and treatment or passing the clinical examination, or have 3 yrs. clinical experience in a community mental health center, state hospital or other settings with experience in diagnosis and treatment, also need 4000 hrs. supervised clinical experience.	Yes	LMFT: 271 LCMFT: 390
Kentucky	MFT	Marriage & Family Therapist	At least two (2) years experience in the practice of marriage and family therapy, acceptable to the board and subsequent to being granted a master's degree; and a minimum of two hundred (200) hours of clinical supervision acceptable to the board and subsequent to being granted a master's degree; and pass a written examination prescribed by the board by promulgation of administrative regulations.	Yes.	496 Active MFT's 130 Active MFT Associates
Louisiana	MFTI LMFT	Licensed Marriage & Family Therapist, Marriage & Family Therapist Intern	MFTI: intern before becoming a therapist LMFT: Must complete min 2 yrs post-grad experience in MFT, that includes at least 3000 hrs clinical services to individual, couples or families, 2000 hrs must be direct clinical services, 1000 may come from workshops, public relations, writing case notes, consulting w/referral sources, etc.	Yes	MFTI: 175 LMFT: 908
Maine	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctoral degree MFT, 2 yrs. Experience after obtainment of degree comprised of at least 1,000 hrs. direct client contact w/ couples and families and 200 hrs. of supervision at least 100 of which must be individual supervision.	Yes	LMFT: 20
Maryland	LCMFT	Licensed Clinical Marriage & Family Therapist	LCMFT: M.A. or doctoral degree in MFT, not less than 2 yrs. w/ minimum 2,000 hrs. supervised clinical experience in MFT, 1,000 of the hrs. must be face-to-face client contact, 100 must be face-to-face clinical supervision hrs. of which 50 shall be individual. and 50 be group clinical supervision.	Yes	As of 2007 the Number of LCMFT's was 202
Massachusetts	MFT	Marriage & Family Therapist	MFT: M.A./doctoral degree in MFT or related field w/ a minimum of 60 semester hrs., minimum of 2 yrs. full time or equiv. part-time(3360 hrs) post masters supervised clinical experience w/ individuals. family groups, couples for the purpose of assessment and intervention in clinic or hospital, 200 hrs. of supervision required and of the 200 100 must be individual. supervision, the 2 yrs. supervision must include minimum 1,000 hrs. face-to-face contact individuals., family groups, couples and minimum 500 hrs. face-to-face w/ couples, and families.	Yes	MFT: About 200
Michigan	MFT	Marriage & Family Therapist	MFT: M.A. or doctorate in MFT, 1,000 supervised direct client contact hrs. in MFT	Yes	MFT: 830
Minnesota	LMFT LAMFT	Licensed Marriage & Family Therapist, Licensed Associate Marriage & Family Therapist	LMFT: Licensure can be accomplished in one of two ways: 1) Must complete graduate academic work, supervised post degree experience, and pass the required national and state exams. The national exam may be taken as soon as the required academic work is completed. 2) May be licensed by reciprocity or endorsement and all candidates All reciprocity candidates must pass national exam (either at time of initial licensure or when applying for MN licensure) and must pass the state exam LAMFT: Persons who have completed the required academic work and passed the national exam can become a LAMFT while gaining their supervised post degree experience.	Yes	LMFT: 1,478 LAMFT: 346
Missouri	MFT	Marital & Family Therapist	MFT: M.A. or doctoral degree, 3,000 hrs. direct client contact in MFT in no less than 2 yrs. And no more than 5, 1,500 must be direct client contact in MFT and 1,500 must be related to MFT, 2 hrs. every 2 wks. Must be individual face-to-face supervision, multiple settings permitted and multiple supervisors permitted.	Yes	MFT: 209

Appendix A - State Comparison Chart

<p>Montana</p>	<p>LMFT</p>	<p>Licensed Marriage and Family Therapist</p>	<p>(1) An applicant for a license shall pay an application fee set by the board by rule. The board may provide a separate, combined fee for persons licensed by the board holding dual licenses. An applicant for a license under this section shall also complete an application on a form provided by the department and provide documentation to the board that the applicant:</p> <ul style="list-style-type: none"> (a) (i) has a master's degree or a doctoral degree in marriage and family therapy from a recognized educational institution or a degree from a program accredited by the commission on accreditation for marriage and family therapy education; or (ii) has a graduate degree in an allied field from a recognized educational institution and graduate level work that the board determines to be the equivalent of a master's degree in marriage and family therapy or marriage and family counseling; (b) has successfully passed an examination prescribed by the board; (c) has worked under the direct supervision of a qualified supervisor for at least 3,000 hours, including 1,000 hours of face-to-face client contact in the practice of marriage and family therapy, of which up to 500 hours may be accumulated while achieving the educational credentials listed in subsection (1)(a); and (d) is of good moral character. Being of good moral character includes in its meaning that the applicant has not been convicted by a court of competent jurisdiction of a crime described by board rule as being of a nature that renders the applicant unfit to practice marriage and family therapy. <p>(2) An applicant is exempt from the examination requirement in subsection (1)(b) if the board is satisfied that:</p> <ul style="list-style-type: none"> (a) the applicant is licensed, certified, or registered under the laws of a state or territory of the United States that imposes substantially the same requirements as [sections 1 through 5] and has passed an examination similar to that required by the board; (b) for applications received before July 1, 2011, the applicant is a clinical member of the American association for marriage and family therapy and is a current resident of this state; or (c) the applicant is licensed as a clinical social worker under Title 37, chapter 22, or as a clinical professional counselor under Title 37, chapter 23, and has practiced marriage and family therapy within the state for a period prescribed by the board. <p>(3) A person is exempt from licensure as a marriage and family therapist if the person practices marriage and family therapy:</p> <ul style="list-style-type: none"> (a) under qualified supervision in a training institution or facility or other supervisory arrangements approved by the board and uses the title of intern; (b) as part of the person's duties as a member of the clergy or priesthood; or (c) under a temporary permit that the board may issue under rules adopted to allow a 1-year temporary permit to an applicant for licensure pending examination for a license or processing of the application for a license. An applicant with a temporary permit under this subsection shall use the title of "licensed marriage and family therapy candidate". <p>(1) An applicant for a license shall pay an application fee set by the board by rule. The board may provide a separate, combined fee for persons licensed by the board holding dual licenses. An applicant for a license under this section shall also complete an application on a form provided by the department and provide documentation to the board that the applicant:</p> <ul style="list-style-type: none"> (a) (i) has a master's degree or a doctoral degree in marriage and family therapy from a recognized educational institution or a degree 	<p>Yes</p>	<p>—</p>
----------------	-------------	---	---	------------	----------

Appendix A - State Comparison Chart

Montana (continued)			<p>from a program accredited by the commission on accreditation for marriage and family therapy education; or</p> <p>(ii) has a graduate degree in an allied field from a recognized educational institution and graduate level work that the board determines to be the equivalent of a master's degree in marriage and family therapy or marriage and family counseling;</p> <p>(b) has successfully passed an examination prescribed by the board;</p> <p>(c) has worked under the direct supervision of a qualified supervisor for at least 3,000 hours, including 1,000 hours of face-to-face client contact in the practice of marriage and family therapy, of which up to 500 hours may be accumulated while achieving the educational credentials listed in subsection (1)(a); and</p> <p>(d) is of good moral character. Being of good moral character includes in its meaning that the applicant has not been convicted by a court of competent jurisdiction of a crime described by board rule as being of a nature that renders the applicant unfit to practice marriage and family therapy.</p> <p>(2) An applicant is exempt from the examination requirement in subsection (1)(b) if the board is satisfied that:</p> <p>(a) the applicant is licensed, certified, or registered under the laws of a state or territory of the United States that imposes substantially the same requirements as [sections 1 through 5] and has passed an examination similar to that required by the board;</p> <p>(b) for applications received before July 1, 2011, the applicant is a clinical member of the American association for marriage and family therapy and is a current resident of this state; or</p> <p>(c) the applicant is licensed as a clinical social worker under Title 37, chapter 22, or as a clinical professional counselor under Title 37, chapter 23, and has practiced marriage and family therapy within the state for a period prescribed by the board.</p> <p>(3) A person is exempt from licensure as a marriage and family therapist if the person practices marriage and family therapy:</p> <p>(a) under qualified supervision in a training institution or facility or other supervisory arrangements approved by the board and uses the title of intern;</p> <p>(b) as part of the person's duties as a member of the clergy or priesthood; or</p> <p>(c) under a temporary permit that the board may issue under rules adopted to allow a 1-year temporary permit to an applicant for licensure pending examination for a license or processing of the application for a license. An applicant with a temporary permit under this subsection shall use the title of "licensed marriage and family therapy candidate".</p>		
Nebraska	CMFT	Certified Marriage & Family Therapist	CMFT: M.A. or doctoral degree in MFT, 3,000 hrs. supervised experience direct client contact.	Yes	
Nevada	MFT, MFTI	Marriage & Family Therapist, Marriage & Family Therapist Intern	MFTI: Min of 1500 direct client contact hrs, 300 hrs of supervision including a min of 160 provided by an approved supervisor & a min of 40 hrs provided by a secondary supervisor.	Yes	
New Hampshire	MFT	Marriage & Family Therapist	MFT: (1) Have a 2-year master's degree or a doctoral degree in marriage and family therapy from a program accredited by the Commission on Accreditation for Marriage and Family Therapy Education; (2) Have a 2-year master's degree or a doctoral degree in a mental health field from a regionally accredited institution and have completed a post-graduate training program accredited by the Commission on Accreditation for Marriage and Family Therapy education; (3) Have a 2-year master's degree or a doctoral degree with a concentration in marriage and family therapy from a regionally accredited institution; or (4) Have a clinical membership in the American Association of Marriage and Family Therapy that was obtained through the "Traditional Track" of the American Association of Marriage and Family Therapy (AAMFT).	Yes	MFT: 91
New Jersey	MFT	Marriage & Family Therapist	MFT: At least a M.A. in social work, marriage or pastoral counseling, psychology, sociology of the family or another related field, 3 yrs. full-time counseling experience 2 of which must have been in MFT.	Yes	
New Mexico	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctoral degree in MFT or equivalent must first pass state exam and then complete 1,000 hrs of post graduate clinical experience, 200 hours individual clinical supervision.	Yes	LMFT: 105

Appendix A - State Comparison Chart

New York	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctoral degree in MFT, complete 1,500 client contact hrs. through either a practicum if you graduated from a MFT program, or post-degree experience if you graduated in a related field, you also need to complete the 2 hr. Department-approved course in child abuse identification and reporting or the exemption (Form 1CE)	Yes	LMFT: 644
North Carolina	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctorate in MFT, completed at least 1,500 hrs. of clinical experience not more than 500 obtained while in M.A. program and at least 1,000 of which were obtained after applicant was granted a degree in MFT.	Yes	LMFT: About 200
North Dakota	LMFT LAMFT	Licensed Marriage and Family Therapist; Licensed Associate Marriage and Family Therapist	2000 hours of experience, 1500 are direct clinical client contact, 500 are related experience hours	Yes	36
Ohio	MFT, Independent MFT	Marriage & Family Therapist, Independent Marriage & Family Therapist	The MFT license is based on education and no experience and is held while licensee is working on the 2 years, 1,000 client contact hours and 200 hours of face-to-face supervision hours.	Yes	MFT: 78, Independent MFT: 191
Oklahoma	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctoral degree in MFT, successful completion of 2 yrs. Work experience in MFT	Yes	
Oregon	MFT, MFTI	Marriage & Family Therapist, Marriage & Family Therapist Intern	MFT: Have 2000 post-degree hrs of supervised direct client contact work experience in MFT that meets criteria for setting, level of supervision and credentials of supervisor	Yes	MFT: 475, MFTI:110
Pennsylvania	LMFT	Licensed Marriage & Family Therapist	LMFT: Minimum 1 year, 300 hours of supervised direct client contact with individuals, couples and families. An independent marriage and family therapist or a marriage and family therapist may engage in the private practice of marriage and family therapy as an individual practitioner or as a member of a partnership or group practice.	Yes	LMFT: 419
Rhode Island	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctoral degree in MFT, has had a minimum of two (2) years of relevant postgraduate experience, including at least two thousand (2,000) hours of direct client contact offering clinical or counseling or therapy services with emphasis in marriage and family therapy subsequent to being awarded a master's degree or doctorate with a minimum of one hundred (100) hours of post-degree supervised case work spread over two (2) years.	Yes	LMFT: 538
South Carolina	LMFT	Licensed Marriage & Family Therapist	LMFT: Masters/specialist's or doctoral degree in MFT, minimum of 1500 hrs. of supervised clinical experience in the practice of MFT performed over a period of not less than 2 yrs. under the supervision of a LMFT. Supervisor or other qualified licensed mental health practitioner. Experience must include a minimum of 1500 hrs. direct client contact with individuals, couples, families, or groups of which a minimum of 150 hrs. spent in immediate supervision with LMFT supervisor, the 150 hours are to be 100 hours of individual and 50 hours of group or individual supervision.	Yes	233
South Dakota	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctoral degree, at least two years and at least 1,700 hrs. of professional supervised experience conducted in face-to-face contact with individuals, couples, and families including supervision in the diagnosis of individual pathology. Only supervised clinical contact may be credited for this requirement. At least 100 of the 200 hrs. must be individual supervision by a board approved supervisor.	Yes	LMFT: 93
Tennessee	LMFT	Licensed Marital & Family Therapist	LMFT: M.A. or doctoral degree, 2 yrs. of post-Master's clinical experience consisting of not less than 10 hours per week.	Yes	MFT: 576

Appendix A - State Comparison Chart

Texas	MFT	Marriage & Family Therapist	MFT: M.A. or doctorate degree, complete minimum 2 yrs. Work experience in MFT that includes at least 3,000 hours of clinical services to individuals, couples or families, at least 1,500 hours must be direct clinical services, 750 hours to couples or families, and the remaining 1,500 hours may come from related experiences, , no more than 500 hours may be transferred from a COAMFTE accredited doctoral program, at least 200 hrs. of supervision in which 100 must be individual supervision	Yes	MFT: 2,778
Utah	MFT	Marriage & Family Therapist	MFT: M.A. or doctoral degree, complete 4,000 hrs. supervised training in MFT in 2 yrs., 100 hrs. must be face-to-face, 1,000 hrs. be mental health therapy of which at least 500 are with couples/families	Yes	MFT: 1,338
Vermont	MFT	Marriage & Family Therapists	MFT: Have completed graduate degree in MFT or equivalent, have successfully completed 2 yr. work experience in MFT under supervision, 3000 hrs. supervised individual, couple, family or group therapy over 2 yr. period, 2,000 hrs. must be direct service 1,000 of this must be w/ couples/families, other 1,000 must be continued clinical practice or indirect services , 100 hrs. must be face-to-face and of the 100 hrs. 50 must be in an individual setting.	Yes	
Virginia	MFT	Marriage & Family Therapists	MFT: M.A. or doctoral degree, complete 2 yrs. Supervised experience with no less than 4,000 hours of supervised work experience, to include 200 hours of supervision with the supervisor in the practice of MFT, at least 2,000 hours must be acquired in direct client contact of which 1,000 hours shall be with couples or families or both.	Yes	MFT: 727
Washington	LMFT	Licensed Marriage & Family Therapist	LMFT: Min. of 2 yrs MFT, 100 hrs must be with LMFT with at least 5 years clinical experience, other 100 hours must be with an equally qualified LMHP; Min. of 3000 hours experience-1000 must be gained in diagnosing and treating couples & families, 200 hours qualified supervision with supervisor & at least 100 of the 200 must be 1 on 1.	Yes	LMFT: 1244
West Virginia	MFT	Marriage and Family Therapist	MFT: A master's or doctoral degree from an institution with a program accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), Council on Accreditation of Counseling and Related Educational Programs (CACREP), the North Central Association of Colleges and Schools (NCACS), the Southern Association of Colleges and Schools (SACS), or a comparable accrediting body as determined by the Board. Applicants must complete a minimum of 60 semester hours or 90 quarter hours of graduate course work inclusive of a masters or doctoral degree in marriage and family therapy. The applicant shall have a minimum of 3000 hours of supervised marriage and family therapy experience, after earning a master's degree in marriage and family therapy or its equivalent as determined by the Board; or have earned a doctoral degree in marriage and family therapy or its equivalent as determined by the Board and have a minimum of 1500 hours of supervised marriage and family therapy experience after earning the degree. All applicants must pass the MFT national exam.	Yes	—
Wisconsin	LMFT	Licensed Marriage & Family Therapist	LMFT: M.A. or doctoral degree in MFT, completed at least 3000 hours of marriage and family therapy practice in no less than 2 years, including at least 1000 hours of face-to-face client contact, under the supervision of a supervisor.	Yes	LMFT: 124
Wyoming	MFT	Marriage & Family Therapist	MFT: M.A. or doctorate in MFT, 3,000 hrs. supervised clinical experience including a minimum of 100 hrs. face-to-face individual. clinical supervision.	Yes	MFT: 110
* All states have informative websites.					