

VALDOSTA STATE UNIVERSITY

Marriage and Family Therapy Program

Family Therapy Student Handbook

2009-2010

Table of Contents

Program Overview	6
Admission Requirements	6
Program Requirements	7
Overview of the Requirements	7
Academic Program Requirements	8
Required Grade Point Average for Graduation	8
Retention Policy	8
Readmission After Dismissal for Academic Deficiencies	8
Program Time Limit: Seven Year Rule	9
Required Coursework	9
Course Descriptions	10
Practica, Supervision, and Client Contact Requirements	13
Application to and Continuation in Clinical Practica	13
Collecting Client Contact and Supervision Hours	13
Malpractice Insurance	14
Registration for Practica	14
Establishing an Internship	14
Family Therapy Practicum and Internship Handbook	14
Clinical Training and Personal Disclosure Policy	15
Preface	15
Academic Training	15
Self-Disclosure in Class	15
Confidential Material in Class	15
Clinical Practicum	15
Admission to Practicum	15
Internships	16
Liability Insurance	16
Leaving Clinical Practicum	16
Clinical Supervision	16
Self-of-the-therapist Concerns	16
Disclosure of Personal Information	17
Comprehensive Exam Requirement	18
Overview of the Comprehensive Exam	18
Part One of the Comprehensive Exam	18
Administration of the Comprehensive Exam, Part I	18
Evaluation of the Comprehensive Exam, Part I	18
Part Two of the Comprehensive Exam	19

Administration of the Comprehensive Exam, Part II	19
Evaluation of Comprehensive Exam, Part II	19
Sample Cover Page	19
Example Cover Sheet for Comprehensive Exam, Part II	21
Advising & Registration	22
Advising	22
Registration	22
Registration Calendar and Enrollment Policies	22
Application to Graduation	22
Grade Appeals, Disciplinary Processes, and Grievance Policies	23
Membership in American Association of Marriage & Family Therapy	24
Student AAMFT Membership	24
Associate and Clinical AAMFT Membership	24
Ethical Conduct	24
AAMFT Code of Ethics	24
Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists Rules and Regulations & Code of Ethics	34
Georgia Licensure	40

Appendix A

Clinical Training and Personal Disclosure Policy

Equal Opportunity and Affirmative Action Statement

Valdosta State University is an equal opportunity educational institution that does not discriminate against any applicant for admission or any student or employee on the basis of sex, race, religion, color, national origin or disability of the individual. It is the intent of the institution to comply with the Title VI of the Civil Rights Act of 1964 and subsequent executive orders, Title IX in Section 504 of the Rehabilitation Act of 1973, and the Americans with Disabilities Act. In addition, the Marriage and Family Therapy Program does not discriminate against any person on the basis of sexual orientation.

About this Handbook

It should be noted that this handbook is meant to supplement the VSU the Graduate School Catalog and is not meant to override any decisions made by the Graduate School. The VSU Graduate School Catalog takes precedence over the Family Therapy Student Handbook. Changes will occur from time to time in this Handbook, which is intended for general purposes only. The University and the MFT Program reserve the discretionary right to separate any student who does not meet academic requirements or 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 *Moore Street Clinic 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.

Program Overview

The Marriage and Family Therapy (MFT) program at Valdosta State University prepares 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' experience is imperative to excellent therapeutic practice.

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.

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 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. To make the program accessible to a broader range of students, most courses are scheduled in the evening.

Admission Requirements

- ◆ 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 2.5.
- ◆ Entrance Tests:
 - ◆ Prior to October 1, 2002:
Minimum 800 Graduate Record Examination (GRE) score when the verbal score is combined with the higher of the quantitative or analytical scores, or Miller Analogy Test (MAT) score of 44 or better.
 - ◆ After October 1, 2002:
Minimum GRE 400 verbal or 3.5 analytical writing, or, or MAT score of 393 or better.

- ◆ 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 applicant's qualifications and admissions into the program are published in the *VSU Graduate Catalog*, this *VSU Family Therapy Student Handbook*, the MFT program brochure, and on the MFT web page (<http://teach.valdosta.edu/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.

Program Requirements

Overview of the 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. The 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 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. The 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. Theory and practice are linked throughout training. At least half the supervised practice (250 hours) must be with couples or families. Most students collect a significant portion of their client contact hours through the Moore Street Clinic, operated by the University MFT

program. The remainder is 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 who graduate from the program understand the theory and practice of MFT from a systemic/relational perspective.

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*.

Academic Program Requirements

Required Grade Point Average for Graduation

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. Any student acquiring any combination of two grades D, F, WF, or U will be dismissed from the Graduate School and Marriage and Family Therapy Master of Science degree program. 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

Students will be dismissed from the M.S. Marriage and Family Therapy Program if they accumulate 4 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.

Readmission After Dismissal for Academic Deficiencies

A student must apply for readmission (readmission 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. This crucial information is found in the current VSU Graduate Catalogue. If students are transferring courses into their graduate degree, those courses must be seven years old or younger. Please bear in mind that if courses are transferred in that are just now six or seven years old, those courses will most probably expire before the degree is completed.

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

Area V: Research

MFTH 7200: Research in MFT	3 hrs
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Area VI: Electives, 5 credits minimum, may be selected from the following:

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	

Area VII: Supervised Clinical Practice

MFTH 7600: Practicum in MFT (1 year, minimum 500 hours direct client contact)	18 hrs
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TOTAL CREDITS (minimum) 60 hrs

Course Descriptions

Required

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.

Electives

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 at the Moore Street Clinic.

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.

Practica, Supervision, and Client Contact Requirements

Application to and Continuation in Clinical Practica

Students are screened for personal and academic readiness prior to enrollment in clinical practica. Each semester of participation, students must submit an Application to Clinical Practicum. The MFT faculty reviews these applications and evaluates the preparedness of each student to enter or continue in practica. Students must demonstrate professionally appropriate behavior in their internships, practica, and in all interactions with colleagues, faculty, staff, and administration. Students may be terminated from the program or barred from participation in internships or practica for non-academic reasons.

Students must pass Part One of the Comprehensive Exam before they can enroll in MFTH 7600 Practicum in Marriage and Family Therapy. Students who have failed any section of Part One of the Comprehensive Exam cannot enroll in MFTH 7600 Practicum in Marriage and Family Therapy until they successfully pass all sections. If a student fails any section of Part One of the Comprehensive Exam and they have already registered for MFTH 7600 Practicum in Marriage and Family Therapy, the student must drop the class.

Collecting 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. During this twelve-month clinical practicum, students must collect 500 hours of direct client contact, of which 250 must be relational (with couples and/or families) and 250 must occur at the Moore Street Clinic, and 100 hours of AAMFT approved supervision. Practicum experience is provided at the on-site Marriage and Family Therapy Clinic, the Moore Street Clinic (MSC), and through internships at community placements. During the time that students are enrolled in practicum, they will receive supervision during every week that they see cases, except for times that VSU and/or the clinic are closed. Students who do not successfully collect 500 hours of client contact (including 250 relational hours and 250 hours at the Moore Street Clinic) and/or 100 hours of Supervision during the year of Practicum cannot graduate, and 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.

Malpractice Insurance

Students must have malpractice insurance prior to seeing clients in practica or internships. Students give the practicum instructor proof of insurance each semester at the beginning of the first practicum meeting.

An excellent place to purchase this insurance is through AAMFT (www.aamft.org). Student membership provides access to low cost insurance. If not already a member, application for AAMFT membership can be made at the same time as application for student malpractice insurance (a student must be a member to apply for the insurance).

Registration for Practica

Practica are limited to six students per section. 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 those circumstances in which a student who is limited by course schedule conflicts must enroll in a practicum that is 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.

Family Therapy Practicum and Internship Handbook

Policies and procedures for participation in practica and internships and definitions of client contact are detailed in the Internship and Practica Handbook. Once enrolled in MFTH 7600 Practicum in Marriage and Family Therapy, each student will receive a disk containing a copy of the *Moore Street Clinic Policy and Procedure Manual* and the *Family Therapy Practicum and Internship Handbook*. The latter will explain what client contact hours are, how many hours are needed, and what is needed to get them. It also provides the student with 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 the Moore Street Clinic and in internship placements. At the end of the student's practica experience and before graduation, the disk must be returned to the Clinical Director.

Clinical Training and Personal Disclosure Policy

Preface

The M.S. in Marriage and Family Therapy program involves the student in a unique applied learning experience. Coursework focuses on developing the theoretical knowledge and practical skills necessary to function as a systems-based psychotherapist. Integrated into the program is a rich and extensive clinical experience. Because of the nature of clinically-focused training, the MFT program requires of students a level of commitment, dedication, and personal responsibility beyond that of a non-clinical graduate program offered by Valdosta State University. Because of the unique aspects of clinical training, this document is designed to describe aspects of the program of which the student might not otherwise be aware. This document should be read and used in conjunction with other documentation concerning the MFT specialization, such as the Graduate Catalog, The Family Therapy Student Handbook, The Family Therapy Practicum & Internship Handbook, and The Moore Street Clinic Policy & Procedure Manual.

Academic Training

Your approach to coursework provides faculty with an assessment of your ability to manage responsibility, integrate core concepts necessary for clinical practice, and interact with others in a sensitive and compassionate manner. Retention in the MFT program requires maintaining a “b” average. In addition, students must demonstrate professionally appropriate behavior and may be terminated from the MFT program for non-academic reasons. These reasons may include but are not limited to, disrupted behavior in any university associated activity and a demonstrated inability to manage peer and student-faculty interactions.

Self disclosure in class. As part of some classes, students are invited to offer self disclosures. Students are never required to make personal self disclosures during a class or for an assignment. If a student chooses to self disclose in class, faculty encourage other students to treat those disclosures as confidential; however, faculty cannot guarantee that other students will maintain that confidentiality. In addition, faculty members may share student disclosures with other MFT faculty and professional colleagues, administrators, or employers expressly for the purpose of assisting in the student’s development as a clinician.

Confidential material in class. As part of many classes, clinical material in the form of videotapes of therapy either from public sources or from clients at the Moore Street Clinic is viewed. All students in MFT classes are required to subscribe to the standards of the AAMFT Code of Ethics in regard to confidential material. Thus all clinical materials discussed or viewed in class must remain confidential.

Clinical Practicum

Students are required to complete a continuous 1 year clinical experience. Students participating in clinical practicum are expected to abide by the highest standards of professional behavior as elaborated in the AAMFT Code Of Ethics.

Admission to practicum. Students may not be admitted into MFTH 7600 Practicum in Marriage and Family Therapy (hereafter also called Practicum) until they have successfully passed Part One of the Comprehensive Examination. Part One of the Comprehensive Examination is administered at the end of the first Fall or Spring Semester in which the student completes the following five courses: MFTH 6800 Orientation to Marriage & Family Therapy

Practice and Ethics, MFTH 7500 Development in the Family System, MFTH 7101 Family Systems Theories, MFTH 7400 Psychopathology, and MFTH 7102 Interventions in Marriage and Family Therapy. To pass the exam, students must achieve a minimum score of 70% on each section. Students who fail any section of Part One of the Comprehensive Exam must re-take the failed section(s) of the exam during the following semester in which they are enrolled in the program. Students can re-take failed section(s) of the exam one time.

In addition to the successful completion of Part One of the Comprehensive Examination, students must have the permission of the MFT faculty to enroll in MFTH 7600 Practicum in Marriage and Family Therapy. Students are screened for personal and academic readiness prior to enrollment in the clinical practica. Once the student enrolls in Practicum, students must be continuously enrolled for one calendar year. If students have not accrued the required client contact or supervision hours at the end of the year, they must enroll in MFTH 7600 Practicum in Marriage and Family Therapy (space permitting) or MFTH 7980 Internship in Marriage and Family Therapy until the required therapy and supervision hours have been accrued. A minimum of 500 (at least 250 relational) client contact hours and 100 supervision hours are required for graduation. During the time that students are enrolled in practicum, they will receive supervision during every week that they see cases, except for times that VSU and/or the clinic are closed. 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.

Internships. Students may choose to participate in an off-campus internship. Students are responsible for providing their own transportation and for any expenses associated with these placements.

Liability Insurance. Students are required to obtain and pay for liability insurance before enrolling in a clinical practicum. Students must maintain continuous coverage while enrolled in MFTH 7600 Practicum in Marriage and Family Therapy (space permitting) or MFTH 7980 Internship in Marriage and Family Therapy. Low cost liability insurance can be obtained through AAMFT, if the student is a member.

Leaving clinical practicum. Learning to be a therapist is challenging and requires a high degree of commitment to clients, co-therapists, and supervisors. If at any time during the clinical portion of training a student determines that she/he does not want to complete his/her degree in MFT, the student must inform the program director in writing. In addition, the student will be expected to fulfill commitments to clients and co-therapists until the end of that semester. Students may be terminated from the program for behavior in clinical practicum that fails to meet the standards of the AAMFT Code of Ethics.

Clinical Supervision

The primary goals of supervision are the enhancement of the supervisee's professional competence and the assurance that high quality services are being provided to clients. Each student enrolled in Practicum must receive weekly individual and group supervision. A large portion of this supervision will be live observation or review of taped sessions. Supervisors vary in the degree to which they focus on theory, skills, and use of self. However, each of these issues will receive attention at some point in the program.

Self-of-the-therapist concerns. If the supervisor feels that personal material is interfering with the student's assessment or treatment of clients, the supervisor will bring that concern to the

attention of the student and may suggest that the student seek professional services to address the issue further. *Supervisors will not conduct personal therapy with supervisees nor will the program require a student to obtain personal therapy.* However, if personal issues appear to the faculty supervisors to continue to interfere with the student's behavior as a therapist, that difficulty will be reflected in the student's practicum grade and possibly in the student's progress through the program.

Disclosure of personal information. Students who choose to reveal personal information during clinical supervision deserve to have that information treated with respect. The American Association of Marriage & Family Therapy Code of Ethics, the Georgia Marriage and Family Therapy Code of Ethics, and the Rules of the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists will be followed in regards to confidentiality. Note that the AAMFT code of ethic addresses the confidentiality of supervisees:

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.

Disclosure that are pertinent to the training and development of the supervisee as well as disclosures pertaining to trainees' fitness to see clients may be with other faculty of professional colleagues who have a direct role in the clinician's training. In addition, supervisors routinely share information about general areas in which the student demonstrates strengths and areas of difficulty in the conduct of therapy with other faculty supervisors. End of semester evaluations are routinely forwarded to the student's next Practicum supervisor to assist in the continued supervision of the student. Students also receive a copy of this evaluation.

Students in a Practicum can expect to receive live supervision via video monitoring equipment, as well as supervision based on videotapes of sessions and case notes. Students can expect regular feedback on their progress in clinical practicum. This regular feedback will be verbal during the course of the semester, unless the faculty has reason to be especially concerned. In that case, a letter outlining the concern(s) will be sent to the student. End of semester evaluations will include a course grade, which goes on the student's transcript and a copy of the Practicum Evaluation from their supervisor. Clinical supervision is provided only by AAMFT Approved Supervisors. Co-therapists or fellow students may never serve as supervisors.

Students will be asked to sign a document that acknowledges that they have been provided this information during the initial orientation meeting at the beginning of their program of study.

Comprehensive Exam Requirement

Overview of the Comprehensive Exam

In order to graduate with a Master's degree in Marriage and Family Therapy, each student must pass a two-part comprehensive examination. This exam fulfills a number of purposes. The comprehensive exam has been developed, in part, 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. The exam is also used by the clinical faculty to determine students' preparedness to enter, and later, to 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.

Part One of the Comprehensive Exam

Administration of the Comprehensive Exam, Part I

Part One of the Comprehensive Exam is a closed book paper and pencil exam consisting of multiple choice and short answer questions. Part One is a timed exam and will be scheduled during final exam week at the end of the Fall or Spring semester.

Part One of the Comprehensive Examination is administered at the end of the first Fall or Spring Semester in which the student completes the following five courses: MFTH 6800 Orientation to Marriage and Family Therapy Practice and Ethics, MFTH 7500 Development in the Family System, MFTH 7101 Family Systems Theories, MFTH 7400 Psychopathology, and MFTH 7102 Interventions in Marriage and Family Therapy.

By the Midterm of the semester (see graduate catalog or the Registrar's Academic Calendar online for Midterm date), the faculty will publish the specific date and time of the exam as well as offer suggestions for exam preparation.

The exam will cover material corresponding to the following MFT classes:

- Section I: MFTH 6800 Orientation to Marriage & Family Therapy Practice and Ethics
- Section II: MFTH 7500 Development in the Family System
- Section III: MFTH 7101 Family Systems Theories & MFTH 7102 Interventions in Marriage & Family Therapy
- Section IV: MFTH 7400 Psychopathology & Psychopharmacology in MFT.

Evaluation of Part One of the Comprehensive Exam, Part I

To pass the exam, students must achieve a minimum score of 70% on each section. Students who fail any section of Part One of the Comprehensive Exam must re-take the failed section(s) of the test at the end of the following semester. If a student fails any portion of the exam for a second time, they must take and pass an essay exam that tests competency in MFTH 6800 Orientation to Marriage and Family Therapy Practice and Ethics, MFTH 7500 Development in the Family System, MFTH 7101 Family Systems Theories, MFTH 7400

Psychopathology, and MFTH 7102 Interventions in Marriage and Family Therapy. This essay examination will include both short and long answer questions. This test will be administered after the 6th but before the 8th week of the semester. It is the responsibility of the student to request and coordinate scheduling with the MFT Program Director. Students who fail Part I of the Comprehensive Exam for the 3rd time are dismissed from the program.

Students who have failed any section of Comprehensive Exam, Part One cannot enroll in MFTH 7600 Practicum in Marriage and Family Therapy until they successfully pass all sections of the Comprehensive Exam, Part One. If a student fails any section of the Comprehensive Exam, Part One, and he or she has already registered for MFTH 7600 Practicum in Marriage and Family Therapy, the student must drop the class.

Students who fail any section of Part One of the Comprehensive Exam are encouraged to meet with the faculty to discuss a plan that will help prepare them to re-take the test.

Part Two of the Comprehensive Exam

Administration of the 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 using a Word attachment, and
- 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 that are turned 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.

Evaluation of the Comprehensive Exam, Part II

The Statement of Orientation to Therapy will be evaluated on a pass or fail basis. The student's current Supervisor of MFTH 7600 Practicum in Marriage and Family Therapy will evaluate the Statement of Orientation to Therapy. Students who submit a passing statement will have successfully completed Part Two of the Comprehensive Examination.

If the supervisor finds that the statement is unacceptable, the statement will be referred 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 Part Two and enroll in an additional section of either MFTH 7600 Practicum in Marriage and Family Therapy or MFTH 7980 Internship in Marriage and Family Therapy. Part Two of the Comprehensive exam can only be taken or re-taken while enrolled in MFTH 7600 or MFTH 7980. 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.

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, p. 21.

Running Head: THINKING ABOUT CHANGE

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

2006

Advising & Registration

Advising

At the beginning of each Fall semester, new students complete and Individual Coursework Form and a 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.

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.

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*.

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 the MFT Program Director 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 all forms and the receipt 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.

Grade Appeals, Disciplinary Processes, and Grievance Policies

Students have the right to appeal grades. Students who have just cause to appeal the assignment of a grade must first discuss the problem with their professor. Further appeals are directed, in this order to their professor's Department Head, Dean, and the Vice President for Academic Affairs.

Students have the right to appeal the outcome of disciplinary processes. This appeal process is detailed in the *VSU Student Handbook*.

If, during the course of enrollment in or employment by the institution, a student feels that she or he has been discriminated against or harassed in violation of the Valdosta State University affirmative action and/or harassment policy, a grievance process is available to address the concern(s). Information about the equal opportunity and affirmative action statement, harassment, and detailed grievance procedures are published in the *VSU Student Handbook*.

Membership in the American Association of Marriage and Family Therapy

Student AAMFT Membership

It is highly recommended that you join AAMFT as a student member immediately after you start your first semester. You can apply online at <http://www.aamft.org>

Associate and Clinical AAMFT Membership

MFT graduates who are in the process of earning the clinical experience necessary to become a Licensed Marriage and Family Therapist can apply to the American Association of Marriage and Family Therapy to upgrade their membership from Student status to Associate status. Upon full licensure, Associate members can apply to the American Association of Marriage and Family Therapy to upgrade their membership from Associate status to Clinical membership.

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.

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 Composite Board of Professional Counselors, Social Workers,
and Marriage and Family Therapists Rules and Regulations
& 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 judgement, 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:
 - (a) intentionally misrepresenting the licensee's professional competence, education, training, and experience, or knowingly failing to correct any misrepresentations provided by others;
 - (b) 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.

Georgia Licensure

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).

Graduates of the VSU MFT program can take two routes to licensure in the State of Georgia:

- (1.) MFT 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 before they can take the licensing examination. LAMFTs must collect 2,000 hours of post-graduate client contact and 100 hours of post-graduate supervision during a minimum period of two years and a maximum period of five years before applying for full licensure. After successful collection of 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 masters 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/>

Appendix A

Clinical Training and Personal Disclosure Policy

**VALDOSTA STATE UNIVERSITY
MARRIAGE AND FAMILY THERAPY PROGRAM**

MFT Clinical Training and Personal Disclosure Policy

PREFACE

The M.S. in Marriage and Family Therapy program involves the student in a unique applied learning experience. Coursework focuses on developing the theoretical knowledge and practical skills necessary to function as a systems-based psychotherapist. Integrated into the program is a rich and extensive clinical experience. Because of the nature of clinically-focused training, the MFT program requires of students a level of commitment, dedication, and personal responsibility beyond that of a non-clinical graduate program offered by Valdosta State University. Because of the unique aspects of clinical training, this document is designed to describe aspects of the program of which the student might not otherwise be aware. This document should be read and used in conjunction with other documentation concerning the MFT specialization, such as the Graduate Catalog, The Family Therapy Student Handbook, The Family Therapy Practicum & Internship Handbook, and The Moore Street Clinic Policy & Procedure Manual.

ACADEMIC TRAINING

Your approach to coursework provides faculty with an assessment of your ability to manage responsibility, integrate core concepts necessary for clinical practice, and interact with others in a sensitive and compassionate manner. Retention in the MFT program requires maintaining a “b” average. In addition, students must demonstrate professionally appropriate behavior and may be terminated from the MFT program or barred from participation in internships or practica for non-academic reasons. These reasons may include but are not limited to, disruptive behavior in any university associated activity and a demonstrated inability to manage peer and student-faculty interactions.

Self disclosure in class. As part of some classes, students are invited to offer self disclosures. Students are never required to make personal self disclosures during a class or for an assignment. If a student chooses to self disclose in class, faculty encourage other students to treat those disclosures as confidential; however, faculty cannot guarantee that other students will maintain that confidentiality. In addition, faculty members may share student disclosures with other MFT faculty and professional colleagues, administrators, or employers expressly for the purpose of assisting in the student’s development as a clinician.

Confidential material in class. As part of many classes, clinical material in the form of videotapes of therapy either from public sources or from clients at the Moore Street Clinic is viewed. All students in MFT classes are required to subscribe to the standards of the AAMFT Code of Ethics in regard to confidential material. Thus all clinical materials discussed or viewed in class must remain confidential.

CLINICAL PRACTICUM

Students are required to complete a continuous 1 year clinical experience. Students participating in clinical practicum are expected to abide by the highest standards of professional behavior as elaborated in the AAMFT Code Of Ethics.

Admission to practicum. Students may not be admitted into MFTH 7600 Practicum in Marriage and Family Therapy (hereafter also called Practicum) until they have successfully

passed Part One of the Comprehensive Examination. Part One of the Comprehensive Examination is administered at the end of the first Fall or Spring Semester in which the student completes the following five courses: MFTH 6800 Orientation to Marriage & Family Therapy Practice and Ethics, MFTH 7500 Development in the Family System, MFTH 7101 Family Systems Theories, MFTH 7400 Psychopathology, and MFTH 7102 Interventions in Marriage and Family Therapy. To pass the exam, students must achieve a minimum score of 70% on each section. Students who fail any section of Part One of the Comprehensive Exam must re-take the failed sections of the test during the following semester in which they are enrolled in the program. Students can re-take failed sections of the exam two times.

In addition to the successful completion of Part One of the Comprehensive Examination, students must have the permission of the MFT faculty to enroll in MFTH 7600 Practicum in Marriage and Family Therapy. Students are screened for personal and academic readiness prior to enrollment in the clinical practica. Once the student enrolls in Practicum, students must be continuously enrolled for one calendar year. If students have not accrued the required client contact or supervision hours at the end of the year, they must enroll in MFTH 7600 Practicum in Marriage and Family Therapy (space permitting) or MFTH 7980 Internship in Marriage and Family Therapy until the required therapy and supervision hours have been accrued. A minimum of 500 (at least 250 relational) client contact hours and 100 supervision hours are required for graduation. During the time that students are enrolled in practicum, they will receive supervision during every week that they see cases, except for times that VSU and/or the clinic are closed. 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.

Internships. Students may chose to participate in an off-campus internship. Students are responsible for providing their own transportation and for any expenses associated with these placements.

Liability Insurance. Students are required to obtain and pay for liability insurance before enrolling in a clinical practicum. Students must maintain continuous coverage while enrolled in MFTH 7600 Practicum in Marriage and Family Therapy or MFTH 7980 Internship in Marriage and Family Therapy. Low cost liability insurance can be obtained through AAMFT, if the student is a member.

Leaving clinical practicum. Learning to be a therapist is challenging and requires a high degree of commitment to clients, co-therapists, and supervisors. If at any time during the clinical portion of training a student determines that she/he does not want to complete his/her degree in MFT, the student must inform the program director in writing. In addition, the student will be expected to fulfill commitments to clients and co-therapists until the end of that semester. Students may be terminated from the program for behavior in clinical practicum that fails to meet the standards of the AAMFT Code of Ethics.

CLINICAL SUPERVISION:

The primary goals of supervision are the enhancement of the supervisee's professional competence and the assurance that high quality services are being provided to clients. Each student enrolled in Practicum must receive weekly individual and group supervision. A large portion of this supervision will be live observation or review of taped sessions. Supervisors vary in the degree to which they focus on theory, skills, and use of self. However, each of these issues will receive attention at some point in the program.

Self-of-the-therapist concerns. If the supervisor feels that personal material is interfering with the student's assessment or treatment of clients, the supervisor will bring that concern to the attention of the student and may suggest that the student seek professional services to address the issue further. *Supervisors will not conduct personal therapy with supervisees nor will the*

program require a student to obtain personal therapy. However, if personal issues appear to the faculty supervisors to continue to interfere with the student's behavior as a therapist, that difficulty will be reflected in the student's practicum grade and possibly in the student's progress through the program.

Disclosure of personal information. Students who choose to reveal personal information during clinical supervision deserve to have that information treated with respect. The American Association of Marriage & Family Therapy Code of Ethics, the Georgia Marriage and Family Therapy Code of Ethics, and the Rules of the Georgia Composite Board of Professional Counselors, Social Workers, and Marriage and Family Therapists will be followed in regards to confidentiality. Note that the AAMFT code of ethic addresses the confidentiality of supervisees:

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.

Disclosures that are pertinent to the training and development of the supervisee as well as disclosures pertaining to trainees' fitness to see clients may be discussed with other faculty or professional colleagues who have a direct role in the clinician's training. In addition, supervisors routinely share information about general areas in which the student demonstrates strengths and areas of difficulty in the conduct of therapy with other faculty supervisors. End of semester evaluations are routinely forwarded to the student's next Practicum supervisor to assist in the continued supervision of the student. Students also receive a copy of this evaluation.

Students in a Practicum can expect to receive live supervision via video monitoring equipment, as well as supervision based on videotapes of sessions and case notes. Students can expect regular feedback on their progress in clinical practicum. This regular feedback will be verbal during the course of the semester, unless the faculty have reason to be especially concerned. In that case, a letter outlining the concern(s) will be sent to the student. End of semester evaluations will include a course grade, which goes on the student's transcript, and a copy of the Practicum Evaluation from their supervisor. Clinical supervision is provided only by AAMFT Approved Supervisors. Co-therapists or fellow students may never serve as supervisors.

I understand the nature of clinical training as described above and choose to enter the clinical practicum in marriage and family therapy.

Student

Date

MFT Director

Date