



MICHIGAN STATE
UNIVERSITY

Program Manual

Couple and Family Therapy Program



Human Development and Family Studies
Version IX – August 2022

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SECTION I
PROGRAM OVERVIEW

AN OVERVIEW OF MAJOR STEPS IN THE CFT PROGRAM AT MSU

Academic Course Work

General Information. At entrance to the program, students will be assigned a temporary faculty advisor. This advisor may become your permanent advisor after a discussion related to permanency, or you may select another faculty in the department to be your permanent advisor. The HDFS Ph.D. Handbook (https://hdfs.msu.edu/sites/default/files/public/Doctoral_student_forms/HDFSPHDHandbook2021-20222021-06-30.pdf); AND MSU Graduate School Handbook (<http://grad.msu.edu/gsrr/>) provides detailed instructions about committee selection and timelines. Note that you are required, for accreditation, to have at least ONE member of the core CFT faculty as a member of your guidance committee. You will also need to **consult with the CFT Program Director about CFT specific courses** needed in your plan of study and to ensure that you are meeting the accreditation standards such as the master's level courses needed to meet the standard curriculum, and clinical hours approved for transfer into the program. Note, although your guidance committee is to be selected by you and your advisor (major professor) and approved by the Director of Graduate Studies by the beginning of the third semester of study, you should plan out a provisional program of study including CFT specific requirements by the end of your first semester in the program. Students must conform to the policies and rules of the Human Development and Family Studies Ph.D. Program, the Graduate School, and this CFT Program Manual.

The required courses in the curriculum for the Ph.D. in Human Development and Family Studies with a specialization in Couple and Family Therapy must be completed (see [Section IV](#), Plan of Study), along with required clinical contact hours (see [Section VI](#), Clinical Requirements), and internship/advanced experience (see [Section VII](#), Internship/Advanced Experience). Exceptions to these minimum requirements must be approved by the CFT Program Director and the HDFS Director of Graduate Studies, in consultation with the student's advisor and their guidance committee. Students who enter the doctoral program without a master's degree in CFT from a Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) accredited master's program must take any missing courses to obtain the equivalent of a master's degree in CFT ([Section IV](#), Plan of Study, the document titled "*MA in Couple and Family Therapy*"). Students in these situations need to work with the CFT Program Director to identify suitable courses to take. In some cases, if a course is not available, the student may need to take an independent study to meet the requirement.

Once the student has made the selection of a permanent advisor, the student will prepare a formal Plan of Study that will need to be approved by the guidance committee. The Plan of Study includes both courses to be taken and any courses that may be transferred to MSU. Transfer of courses from another institution is limited to 9 credit hours, and cannot be courses used towards the completion of another degree. Any decisions about course transfers, waivers, and substitutions will be made by the student's guidance committee and advisor, and must be approved by the CFT Program Director and HDFS Director of Graduate Studies before final submission of the Plan of Study to the Graduate School.

CFT students are expected to be full time in the program, moving toward their graduate degree in a timely fashion. Students should register for the number of credit hours reflecting the extent of their

involvement in the graduate degree program. This applies to research/individual study courses as well as to formally structured CFT classes. To complete the doctoral program in a timely fashion (approximately 4-5 years from entry into the Ph.D. program), a full course load is 9-10 credit hours in the Fall and Spring semester and 1-6 credit hours in the Summer semester. This reflects 1 credit hour each semester for practicum or internship (HDFS 993) plus additional multiple-credit hour courses. Teaching and research assistantships (.25 FTE or above) provide tuition remission for up to 9 credit hours in the Fall and Spring semesters. According to MSU regulations, minimum full time enrollment is as follows: doctoral level prior to completing comprehensive examinations = 6 credits/semester; doctoral level following completion of comprehensive examinations = 1 credit/semester. Students on assistantships are required to sign up for a full load of coursework. Please note that assistantships only cover 9 hours of tuition in the Fall and Spring and students need to plan in advance to cover any additional hours, such as a one credit hour required for HDFS 993 (clinic/internship); see TA Tuition Pool section below.

Students whose enrollment at MSU is interrupted for more than two consecutive semesters (including summer) must reapply for admission. The only exception would be a leave granted for health or family reasons by the CFT Program Director and HDFS Director of Graduate Studies in consultation with the CFT faculty.

Failure to achieve adequate progress (e.g., poor grades) in the program may result in a call for an Academic Progress Review (APR) by the HDFS Director of Graduate Studies, as described in the HDFS *Ph.D. Handbook*. In the APR, a plan of remediation will be developed. Failure to complete the plan of remediation will result in termination from the program.

TA Tuition Pool. During some semesters, students may need to enroll for 10 credit hours, which is one credit over the 9 credit hours covered by assistantships. Students need to plan in advance to cover the remaining 1 credit hour. Students serving as teaching assistants (TAs) during the same semester may be eligible to apply for a tuition credit award through the TA Tuition Pool. Please note that applications are due **before the semester begins**. In the past, application deadlines have been as follows: March for summer semester; June for fall semester; October for spring semester. More information is available at: <https://grad.msu.edu/TAtuitionpool>

Students taking 10 credits in a semester who are appointed as research assistants (RAs) or are otherwise ineligible for the TA Tuition Pool may consider reaching out to the Director of Graduate Studies to inquire if funding is available for this additional credit. Funding is not guaranteed.

Continuous Clinical Involvement. Until completion of the 1,000 hours of direct client contact (and 200 hours of appropriate supervision) required in the Ph.D. program, students are required to be clinically active as couple and family therapists under appropriate supervision—either in the MSU Couple and Family Therapy Clinic, at a practicum/internship site, or as a volunteer/employee/practitioner. Clinical involvement is defined as face-to-face client contact services or supervision of client therapy services. This requirement can extend beyond accruing the required 1,000 hours for graduation. If a student has a personal situation arise where they need a break from seeing clients, please petition the CFT Program Director in writing, who will make this determination in consultation with the CFT faculty.

AAMFT Membership and Liability Insurance. Students are required to be members (student or professional membership) of the American Association for Marriage and Family Therapy (AAMFT) to maintain professional liability insurance through AAMFT (or provide proof of such

insurance from another source). Liability insurance is provided as part of your AAMFT student membership.

Technology. Work in the CFT program entails a great deal of writing and working on a computer. All students are expected to either own their own computer or use one of the many computer labs on campus to complete written assignments.

Evaluations

First Year Evaluations

After one year in the CFT program, each first year student will meet with CFT faculty. The purpose of this meeting is to: (a) evaluate the student's initial progress in the program, (b) determine the degree of fit between the student and the program, (c) confirm that student has identified a permanent advisor reflecting their research interests and begun the process of developing a formal plan of study for the doctorate, (d) examine the student's progress in taking on clinical work and moving toward a theory of CFT practice, and (e) consider other matters of concern to the student and/or the faculty. Following this meeting, the CFT faculty will provide a recommendation regarding continuation in the program.

Annual Evaluations

The Department requires submission of a student-advisor evaluation of yearly progress, a yearly update on meeting the requirements of the HDFS doctoral portfolio, and, before graduation, a final version of the HDFS doctoral portfolio ([Section IV-Plan of Study](#); and HDFS Doctoral Handbook). Each spring, at the time your portfolio is submitted to the department, please submit a copy of your portfolio electronically to the CFT Program Director along with a copy of your latest curriculum vitae (CV). In your CV, please be sure to include the following items all in APA format:

- 1) Publications (peer review)
- 2) Publications (non peer-review, e.g., book chapters)
- 3) Presentations (international or national scientific meetings)
- 4) Presentations (state scientific meetings)
- 5) Presentations (other, e.g., at local religious group)
- 6) Teaching experiences, instructor of record (give dates for each)
- 7) Teaching experiences, teaching assistant (give dates for each)
- 8) Teaching experiences, list all guest lectures given and dates
- 9) Teaching credentials (e.g., a teaching certificate).
- 10) Licensure status (if you took the exam, please indicate the date)
- 11) Grant involvement (note your role on grants written)
- 12) Names and dates of college or university research seminars or trainings you attended each year while you were in the program. These can be grant writing workshops, scholarly speaker series, statistical workshops, college or university research colloquia series).
- 13) Service conducted including program, department, university, profession, community, and community outreach (note type of service and population served).
- 14) Membership in national and state organizations (e.g., AAMFT, NCFR).
- 15) Please also attach your Teaching Portfolio if it is completed

Practicum and Internship

The required number of client contact and supervision hours must be completed before graduation (for details, see [Section VII](#) on practicum and internship hour requirements). The program strongly recommends that eligible students apply for a Limited License as a Marriage and Family Therapist

(LLMFT) in the State of Michigan as soon as they are eligible (see <https://www.michigan.gov/lara/-/media/Project/Websites/lara/bpl/Marriage-and-Family-Therapy/Licensing-Info-and-Forms/MFT-Educational-Limited-Licensing-Guide.pdf?rev=c496886ef9e940ff9a925ccd9706d4b1&hash=326D9915BEEA58B5B2D7545E9B72EEE6>). Minimal requirements for the LLMFT are a master's degree in CFT (or equivalent) and completion of 300 hours of direct client contact, half of which must be relational. Full licensure (LMFT) requires completion of at least 1,000 hours of direct client contact, with appropriate supervision, along with completion of the equivalent of the Commission on Accreditation of Marriage and Family Therapy Education (COAMFTE) master's in CFT curriculum. It is possible to apply for full licensure before completing the Ph.D., once the 1,000 hour requirement is met. However, for the hours your accrue while in the program to count, you need to **apply early** for limited license, if you intend to pursue your license before you graduate.

Completion of Clinic Responsibilities

As a group, CFT faculty will review at least annually the clinical progress of students who are active in the CFT Clinic. Failure to achieve adequate progress in clinical work may result in a call for an Academic Progress Review (APR), as described in the HDFS *Ph.D. Handbook*. In the APR, a plan of remediation will be developed. Failure to complete the plan of remediation may result in termination from the program.

Once you complete 1,000 clinical hours, you may not yet have met the required hours and competencies for graduation. ***You need to continue to submit hour logs to the Clinic Coordinator so that your hours can be documented.*** Completing the required 1,000 clinical hours does not lead to automatic release from clinical involvement.

Once you have completed the minimum hours you are required to accrue in the CFT Clinic, as detailed in the form titled [Minimum Clinical Hour Requirements for the Doctoral Degree in Couple and Family Therapy](#), the student must verify their number of direct client contact, supervision hours, and student learning outcomes and receive permission from the CFT Program Director and the CFT Clinic Director to be released from clinical responsibilities and cleared for graduation. Please complete the form titled "[Clearance for Exit From Couple and Family Therapy Clinic](#)" The Clearance form must be signed by the Clinic Coordinator, Clinic Director, and CFT Program Director. The final signed form should be submitted electronically to the CFT Program Director for inclusion in your student file.

Research Activities

All students are strongly encouraged to conduct research in cooperation with MSU faculty and/or peers. Part of becoming a professional in couple and family therapy includes conducting research for presentations at professional meetings and publications in professional journals. Research involving human subjects (as opposed, for example, to an existing database) must have prior and continuing approval from the MSU Committee for the Protection of Human Subjects (IRB: <http://hrpp.msu.edu/>). A faculty member must be listed as the primary investigator on any research proposal sent to the IRB. The student's major professor or dissertation advisor will be responsible for assisting each advisee in identifying appropriate research opportunities. The HDFS doctoral portfolio includes a requirement that students document their research activities.

Doctoral Comprehensive Examination

The doctoral comprehensive examination, taken after the completion of 80% of the student's course work in the Plan of Study (not including dissertation credits) and demonstration of clinical

competence to the satisfaction of the CFT faculty, permits the student to integrate materials from a variety of different courses and their clinical experiences prior to beginning the dissertation. Following successful completion of the comprehensive examination, the student is officially admitted to candidacy for the Ph.D. degree. Details regarding the Comprehensive Examination can be found in the HDFS *Ph.D. Handbook*. The CFT program uses comprehensive examinations to evaluate key skills in students. The CFT program uses a unique approach to the oral exam. The oral exam focuses on your own specific theory of therapy. [Appendix 4](#) contains the description of the CFT oral exam. [Appendix 3](#) contains a rubric that CFT faculty use to evaluate your performance in the exams.

Doctoral Internship (Advanced Experience)

All students must complete an internship (two advanced experiences) as part of the doctoral program (see [Section VII](#) on Internship/Advanced Experience).

Dissertation (Doctoral Students)

All students in the doctoral program must complete a dissertation (see HDFS *Ph.D. Handbook* for full details of dissertation expectations and processes). All CFT students are encouraged to attend defenses of their peers. All dissertations published by students in the program should have a focus on couple or family therapy outcomes or processes and that include a section with implications for couple or family therapy and considerations for diverse couples and families.

Informed Acknowledgement of MFT Licensure and Regulatory Requirements

A Ph.D. from Michigan State University is recognized worldwide, and the university is accredited by the Higher Learning Commission. Licensure obtained in the state of Michigan may be transferred to some states but not to others. Each state in the United States has its own law and regulations about what is needed to become licensed as an LMFT in that state. This means that licensure requirements, including qualifying degree requirements, vary by state. These requirements also differ from country to country. The Association of Marital and Family Therapy Regulatory Boards provides a description of licensure requirements for each state. You can access this information at this link: <https://amftrb.org/resources/state-licensure-comparison/>

The curriculum for the Couple and Family Therapy (CFT) doctoral program at Michigan State University was designed to align with the MFT licensure requirements in the state of Michigan. Students graduating from the MSU CFT program may not be eligible for licensure in other states in the USA without first completing additional requirements. You can find more information about the state requirements for MFT licensure in Michigan [here](#). Further information can also be obtained from the [Michigan Board of Marriage and Family Therapy](#) website or by contacting BPLHelp@michigan.gov.

COAMFTE requires that this information be provided to students and acknowledged in writing, prior to students beginning a program's course of study. All students are required to complete an Informed Acknowledgement of MFT Licensure and Regulatory Requirements form before starting their Ph.D. program at MSU. A copy of this form is available in Appendix 6.

SECTION II

PROGRAM MISSION, GOALS, AND STUDENT LEARNING OUTCOMES

**COUPLE AND FAMILY THERAPY DOCTORAL SPECIALIZATION PROGRAM
MICHIGAN STATE UNIVERSITY**

CFT Program Mission

We are committed to advancing systemic interventions that support the well-being of individuals and families through excellence in clinically-relevant research, empirically-informed clinical practice, and education/outreach. Our activities are guided by our values of inclusion and diversity.

As part of this mission, the program maintains an ecological perspective that takes into account couples, families, and individuals in their historical context as well as their current contexts in homes, neighborhoods, cities, and wider society. The program is dedicated to the ideal that all human beings are of worth and value simply by virtue of their humanity. Therefore, program activities, whether in research, teaching, or clinical services, reflect an understanding of the need for cultural knowledge and sensitivity on the part of faculty and students and the importance of appropriate cultural adaptation of clinical services and community-based prevention and intervention programs to better meet the needs of our clients and communities.

The following table describes the program goals and student learning outcomes, as well as established targets and benchmarks for each.

Program Goals and Student Learning Outcomes

Program Goal 1: Clinically- relevant Research. Students will conduct research that is relevant to systemic interventions.		
SLO	Target	Benchmark
<u>SLO1A</u> Students will develop expertise in synthesizing literature and understanding theoretical frameworks relevant to their research area.	100% of students will satisfactorily complete (i.e., receive a rating equivalent to a passing score by doctoral committee) the theory/content section of their comprehensive exam rubric.	90% of students will satisfactorily complete (i.e., receive a rating equivalent to a passing score by doctoral committee) the theory/content section of their comprehensive exam rubric.
<u>SLO1B</u> Students will develop expertise in designing a research study using the best suited methodological approach to address their research question.	100% of students will receive satisfactorily complete (i.e., receive a rating equivalent to a passing score by doctoral committee) the research methods section of the comprehensive exam rubric.	90% of students will satisfactorily complete (i.e., receive a rating equivalent to a passing score by doctoral committee) the research methods section of the comprehensive exam rubric.
<u>SLO1C</u> Students will publish clinically-relevant scholarship (e.g.,	100% of students, by the time of graduation, will have three clinically-relevant manuscripts that	50% of students, by the time of graduation, will have three clinically-relevant manuscripts that are either

scientific journal article or book chapter).	are either “revise and resubmit”, “in press”, or published.	“revise and resubmit”, “in press”, or published.
SLO1D Students will prepare a grant proposal that is relevant to their research interests.	100% of students, by the time of graduation, will have written one grant proposal.	90% of students, by the time of graduation, will have written one grant proposal.

Program Goal 2: *Empirically-informed Clinical Practice.* Students will inform their clinical practice by empirical evidence.

SLO	Target	Benchmark
SLO2A Students will demonstrate knowledge in at least one empirically supported systemic intervention.	100% of students will prepare a manuscript on an empirically supported systemic intervention and receive a score of at least “satisfactory” on the rubric.	90% of students will prepare a manuscript on an empirically supported systemic intervention and receive a score of at least “satisfactory” on the rubric.
SLO2B Students will practice skilled clinical work in the following: Admission to treatment, clinical assessment and diagnosis, treatment planning and case management, use of supervision to achieve clinical effectiveness, and legal issues, ethics, and standards.	By the time of exit from the clinic, 100% of students will obtain an average score of 2.75 on the clinical evaluation (i.e., admission to treatment, clinical assessment and diagnosis, treatment planning and case management, use of supervision to achieve clinical effectiveness, and legal issues, ethics, and standards).	By the time of exit from the clinic, 90% of students will obtain an average score of 2.75 on the clinical evaluation (i.e., admission to treatment, clinical assessment and diagnosis, treatment planning and case management, use of supervision to achieve clinical effectiveness, and legal issues, ethics, and standards).

Program Goal 3: *Education and Outreach.* Students will share knowledge with students, practitioners, scholars, and/or community members.

SLO	Target	Benchmark
SLO3A Students will graduate with skills that will allow them to be effective instructors in higher education.	a) 100% of students will engage in at least one teaching experience (e.g., guest lecture, teaching assistant, or instructor of record). b) 100% of students will complete a teaching philosophy statement.	90% of students will engage in at least one teaching experience (e.g., guest lecture, teaching assistant, or instructor of record). 90% of students will complete a teaching philosophy statement.
SLO3B Students will be prepared to provide effective couple and family therapy supervision.	a) 100% of students will complete and pass an AAMFT approved supervision course.	90% of students will complete and pass an AAMFT approved supervision course.

	b) 100% of students will complete 90 hours of supervision of mentees and 18 hours of supervision of supervision by an AAMFT Approved Supervisor.	90% of students will complete 90 hours of supervision of mentees and 18 hours of supervision of supervision by an AAMFT Approved Supervisor.
SLO3C Students will conduct professional presentations at community, regional, national, or international events.	100% of students, by the time of graduation, will have conducted four or more presentations.	70% of students, by the time of graduation, will have conducted four or more presentations.
Program Goal 4: Inclusion and Diversity. Students will demonstrate a commitment to work that recognizes social locations, acknowledges power imbalances, and seeks to reduce disparities.		
SLO	Target	Benchmark
SLO4A Students will learn to attend to issues of inclusion and diversity in their scholarship.	100% of students will include an explicit discussion in their dissertation of their research in relation to diverse populations.	90% of students will include an explicit discussion in their dissertation of their research in relation to diverse populations.
SLO4B Clinically, students will demonstrate sensitivity to the social locations of their clients.	By the time of exit from the clinic, 100% of students will obtain an average score of 2.75 on the Social Justice Issues domain of clinical evaluations.	By the time of exit from the clinic, 90% of students will obtain an average score of 2.75 on the Social Justice Issues domain of clinical evaluations.

The CFT Program at Michigan State University (MSU) is committed to providing a balance among research, teaching, and clinical training in couple and family therapy to students who are committed to extending the practice and knowledge-base of couple and family therapy. To this end, we (1) recruit and train students who are capable of making unique contributions to the field of couple and family therapy through research, teaching, and other activities, (2) provide students with the training to function as couple and family therapists at a high level of clinical competence, and (3) strive to create a program atmosphere that values diversity and is committed to enhancing the lives of all persons. We view training excellent clinicians as a worthy objective for every accredited CFT program, and as a necessary, but not sufficient, objective for an accredited CFT training program at the doctoral level.

As an institution, MSU is committed to the principle that there shall be no difference in the treatment of persons because of gender, race, creed, national origin, sexual orientation, age, or disability, and that equal opportunity and access to facilities shall be available to all. Reflecting the University's commitment, a central objective of the MSU CFT Program is the creation of a context of self-examination, tolerance of differences, and a commitment to increasing social justice. In this context, students are encouraged to pursue lines of research that are personally, as

well as professionally, meaningful, relevant, and important. However, such lines of research should also fall within a training model in which each student works with their advisor as part of the gradual process of developing a program of research (obtaining funding, implementing studies, publishing, etc.). Thus, admission of a student into the program will be heavily influenced by the commitment of a CFT faculty member to working with that potential student in the context of common research interests.

Students seeking to graduate with a Ph.D. in CFT are required to complete additional course work beyond the master's curriculum and complete 1,000 hours of face-to-face therapy (at least 500 hours with couples or families). The total of 1,000 hours is comprised of hours accumulated in a prior master's program (assuming these hours meet certain standards), clinical work at the MSU Couple and Family Therapy Clinic, approved community placements outside the Couple and Family Therapy Clinic, alternative hours, and internship hours. [Section VI](#)-Clinical Experiences and [Section VII](#)-Internship/Advanced Experiences provide more complete information on the requirements for clinical hours.

In Michigan, graduation from a doctoral program accredited by the COAMFTE is one route to full licensure (i.e., without further specification of required academic courses). Full licensure as a CFT requires 1,000 hours of therapy experience. Completion of the master's curriculum (as defined by Michigan law) and 1,000 client contact hours is sufficient to apply for full licensure (which will also require a passing score on the test administered by the Association of Marital and Family Therapy Regulatory Boards). Thus, advanced Ph.D. students who have met the 1,000 hour requirement may choose to apply for full licensure before completing the doctorate and graduating. The MSU CFT program is not designed to meet the requirements for licensure in other professions (e.g., licensed professional counselor [LPC]).

Upon completion of the doctoral program in Couple and Family Therapy, we expect the student to have obtained:

- An ecological perspective that takes into account the client couple, family, and individual in the context of their own histories and life experiences, present context, and the context of their homes, neighborhoods, cities, and wider society. Such a perspective includes an understanding of the destructive impact of power imbalances and discrimination on clients' lives and on society.
- A comprehensive knowledge of couple and family theory and research.
- A comprehensive knowledge of the major approaches to couple and family therapy at the level necessary to teach others about these approaches.
- An ability to function at a professional level as a couple and family therapist, including:
 - a definite theory and practice of therapy,
 - an understanding of and commitment to the professional ethics and standards established by AAMFT,
 - an ability to
 - evaluate their own strengths and limitations as a clinician,
 - assess functional and dysfunctional family systems,
 - conduct original research relevant to the CFT field,
 - professional maturity, including a commitment to participating in relevant professional organizations and to representing the CFT profession to the broader community through ethical practice, education, policy making, and other activities,

- an articulated philosophy of supervision, and
- a commitment to a systemic orientation.

One of the imperatives for the MSU CFT program is to train students who have clinical and research experience in preparation to contribute to the generation of knowledge on couple and family therapy interventions. For example, our training curricula provides a strong emphasis on students learning evidence-based treatments and change processes, as well as students applying such knowledge in the development of their clinical skills and programs of applied research.

The MSU CFT faculty have achieved national and international recognition and have advanced the integration of human development and family studies with couple and family therapy by continually highlighting a systems theory perspective. The integration of the traditional research and theory approaches of human development and family studies with those of couple and family therapy can be observed in the integration of issues of development, family issues, and a systemic perspective in the graduate course syllabi of all CFT courses, the types of research questions asked by CFT faculty, and the broad integrative knowledge, both clinical and non-clinical of our doctoral students.

We view the coursework, research, and clinical portions of our program as equally important. Clinical training must proceed from a solid understanding of human development and couple and family processes. To be meaningful, however, we believe the formal knowledge and research understandings must be applied and tested by a knowledge that comes only by the experience of working directly with couples and families. Couple and family therapy is an enterprise that involves such direct contact. Because we do not think the clinical experiences, formal coursework, and research should be separated, all three are integrated and emphasized throughout the student's training.

As a faculty, we do not teach or adhere to a single theory or school or approach to couple and family therapy. Rather, we teach elements of the major approaches, including key evidence-based approaches, and expect the student to be willing to examine the value of various theories and approaches in their work with clients. We want the student to understand, compare, and evaluate the major approaches. The student's task is to integrate them into a personally meaningful and effective approach for the purpose of helping families change, and for the purpose of helping others understand families better through teaching and research. The faculty have a collective interest in helping students understand their own role in the clients' change process. They believe it is vital for students to recognize how their own actions, experiences, and values may facilitate or hinder clients' change by dealing with self-of-the-therapist issues.

The CFT Faculty are actively involved in all aspects of the student's education and training and provide extensive and sustained mentoring in both research and clinical work throughout the program.

Program Director

The CFT program is directed year round by the Program Director. Below is a description of the program director position.

PROGRAM DIRECTOR JOB DESCRIPTION

1. **Develop and maintain program curriculum to meet COAMFTE Standards**
 - Facilitate the review of the CFT curriculum with other core CFT faculty and bring any changes/recommendations to the department curriculum committee.
 - Formulate (with core CFT faculty) CFT courses and teaching assignments as needed for the department chair and graduate director.
 - Develop and implement necessary CFT Program policies and documents.
 - Schedule and chair CFT faculty retreats and meetings.
 - Keep data on graduates of the program.
 - Solicit feedback on the program from current students and past graduates.
 - Work to enhance the program based on input from current students, graduates of the program, and trends in the CFT field.
 - Oversee the preparation of the annual report for COAMFTE.
 - Rectify and respond to any concerns from COAMFTE.
 - Coordinate the self-study required for COAMFTE re-accreditation.
 - Coordinate the COAMFTE site visit.
 - Respond to COAMFTE regarding issues pertaining to accredited programs.
 - Register and coordinate the program's display at the COAMFTE showcase at the annual conference.

2. **Coordinate the CFT program within the HDFS Department**
 - Act as CFT program liaison with HDFS Department Chair.
 - Work with HDFS Department Chair to repair or upgrade program facilities and services.
 - Work with the Department's business office to track revenues and expenses.
 - Address CFT program issues as necessary in meetings of the HDFS faculty, Graduate Education Committee, and Administrative Committee.
 - Coordinate the promotion and advertisement of the CFT program, including the website.
 - Be involved in fundraising for the program.

3. **Work with student recruitment and current student issues**
 - Oversee recruitment activities for prospective CFT doctoral students in coordination with larger departmental graduate student recruitment efforts.
 - Coordinate and schedule the new CFT student orientation.
 - Coordinate meetings with students and core faculty.

4. **Oversee the CFT Clinic, Clinic Director, and Clinical Training**
 - Work with core CFT faculty to establish clinical training procedures for students.

- Manage the Clinic budget in collaboration with the Clinic Director and with input from the CFT faculty.
- Respond to emergency situations at the clinic, as needed.
- Lead the hiring of the Clinic Director.

5. **Other responsibilities**

- Organize all CFT area faculty meetings and prepare the agendas.
- Organize, with the help of the program RA, the election of student representatives each year.
- Organize and attend student-faculty meetings.

SECTION III
PROGRAM POLICIES REGARDING
DISCRIMINATION,
GRIEVANCE AND DISMISSAL,
CONFIDENTIALITY, HUMAN
DIGNITY AND DIVERSITY

ANTI-DISCRIMINATION POLICY

Michigan State University is committed to an active policy of no discrimination on the basis of race, creed, ethnic origin, sexual orientation, gender, or socio-economic status. All students should familiarize themselves with the Anti-Discrimination Policy and Procedures, and conduct themselves in accordance with the policy and procedures. The MSU Anti Discrimination Policy and Procedures is available at: https://hr.msu.edu/policies-procedures/university-wide/ADP_policy.html

GRIEVANCE AND DISMISSAL POLICIES AND PROCEDURES FOR GRADUATE STUDENTS

Grievance Policies and Procedures

Any grievance or appeal process begins at the level of the individuals immediately involved: with another student, if there is a concern about that person; the associated instructor, if an individual course is at issue; with the Program Director of the Couple and Family Therapy (CFT) Program, if a CFT policy is involved; with the clinical supervisor, if a clinical matter is involved, with the Director of Graduate Studies, if an HDFS graduate program policy is involved; with the Department Chair, if a departmental policy is involved, etc. Students may wish to consult with the MSU Ombudsman (ombudsman@msu.edu) regarding their rights and responsibilities.

Where satisfactory resolution has not been achieved at one level, the grievance or appeal of a decision can be taken to the next appropriate level of administrative authority. Thus, certain matters proceed from the CFT Program Director to the HDFS Director of Graduate Studies to the Associate Dean for Graduate Studies in the College of Social Science (Associate Dean) and then to the Dean of the College of Social Science. If the matter is not satisfactorily resolved within the College, it would be referred to the Graduate Dean, the Provost, or the Vice-President for Student Affairs (depending on the nature of the matters which are at issue) and then to the President of the University in whom final authority is vested. At any of these levels, there is a specified and explicit procedure for bringing a grievance or appealing a decision. Students may wish to consult the *HDFS Ph.D. Handbook* for further details about this process. Figure 1 is a visual representation of this process.

The established Program procedures have been developed in compliance with existing legislation and the associated procedures have been articulated in major documents, including the University catalog (on-line as *Academic Programs*, www.reg.msu.edu/ucc/ucc.asp), the Graduate School's *Guidelines for Graduate Student Advising and Mentoring Relationships*, the current *MSU Student Handbook and Resource Guide*, and other sources. Among the legislatively-based areas of University compliance are Titles VI and VII of the Civil Rights Act of 1964, Title IX of the Education Amendments of 1972 (45 CFR 86), and Sections 503 and 504 of the Rehabilitation Act of 1973 (all requiring nondiscrimination on the basis of race, color, national origin, religion, sex, or handicap) plus the Age Discrimination in Employment Act of 1957 and Section 402 of the Vietnam Era Veterans Readjustment Act of 1974 and Executive Order 11246 as amended (nondiscrimination due to age or toward disabled veterans of Vietnam era). This is not an exhaustive list, but each item encompasses a particular pattern of compliance with associated procedures for assuring accountability.

In almost all cases, it is preferable to handle a grievance informally at the level at which the grievance has arisen. Specifically with regard to students in the CFT Program, the individual with a grievance should attempt to resolve it directly with the other person or persons involved. If satisfactory resolution is not reached, the individual should bring the grievance to the CFT Program Director who will attempt to help the parties involved reach a satisfactory resolution. If there is a potential conflict of interest (e.g., the CFT Program Director is also the instructor against whom the student has a grievance), the process would proceed to the next higher level.

With both the informal and formal grievance process, it is crucial to proceed in a timely manner. Normally, the individual with a grievance would initiate the resolution process as soon as possible after the incident or incidents in question occurred, within 60 days at the latest. At each level, every effort should be made to attempt to resolve the grievance within 2 weeks.

In any grievance procedure, it is imperative that the individual bringing the grievance be protected from any negative consequences arising from the act of bringing a grievance. Fear of negative consequences is one of the reasons it is difficult to begin the grievance procedure at the level at which it must ideally begin—with the person(s) directly involved. This is especially difficult when the person with the grievance has less power than the other individual, for example, a student with a grievance against a clinical supervisor or a faculty member. By its very nature, however, a fair grievance procedure requires that difficult issues must be raised and all parties involved must be informed that the grievance exists. Every effort will be made to protect the rights of the person bringing the grievance against retaliation. The CFT Program faculty are committed to insuring that the grievance procedure is a fair one and that mechanisms are in place for protection and appeal.

Dismissal from the Couple and Family Therapy Program

The faculty of the Couple and Family Therapy program serve as gatekeepers to the profession of Couple and Family Therapy. Student success in the program is defined not only by academic competence but also by clinical competence, including ethical conduct. Please see the *HDFS Ph.D. Handbook* for policies regarding failure to demonstrate academic competence.

Failure to demonstrate clinical competence is the particular province of the CFT faculty. Students are required to demonstrate increasing levels of clinical performance over their time in the program. Further, students are required to adhere to the *AAMFT Code of Ethics*. A serious breach of the *Code of Ethics*, of state law regarding the practice of CFT, or of professional ethics in general would be grounds for the CFT Program Director to call for a Review of Academic Progress. Failure to meet the requirements coming from such a review would result in termination from the CFT program.

Performance in the Clinical Role

Students and faculty in the CFT Program must adhere to the *AAMFT Code of Ethics*, even if the individual is not a member of AAMFT. Complaints and grievances related to clinical supervision or the student's clinical role should first be discussed with the clinical supervisor. If the issue is not resolved, the grievance procedure should follow the steps outlined previously.

It is crucial that clinical training occur in a climate that is respectful of clients, therapists, and supervisors. In group or individual supervision settings, feedback on an individual's work should be made specifically and directly to the individual involved. It is important to state the positive aspects of the individual's performance as well as areas of needed change in a respectful manner, using specific examples.

If the grievance involves unethical behavior on the part of an AAMFT member, the individual bringing the grievance is also encouraged to report the alleged unethical behavior to the AAMFT Ethics Committee. The Michigan Board of Marriage and Family Therapy should be notified if the person who is alleged to have engaged in unethical conduct holds a limited or full MFT license (LLMFT or LMFT).

Publication Authorship Issues

In conducting research and in assigning authorship to publications, students and faculty in the CFT Program follow the relevant MSU regulations on conduct of research with human participants as well as the *AAMFT Code of Ethics*, and the guidelines provided in the *APA Publication Manual*. Assigning authorship credit follows the principle of assigning credit in proportion to each individual's contribution. It is very helpful to negotiate, in advance, responsibilities and authorship issues on joint research projects. A written contract agreed to by all parties prior to beginning a joint research project is highly recommended.

Co-authorship by a faculty member on student work done in a particular course or as part of the comprehensive examination by the student is not automatic. The faculty member's contribution would have to be substantial, going beyond editing or giving comments on papers at the level ordinarily provided by the instructor of a course. Similarly, students who conduct library research or data analyses for a faculty member as part of an assistantship, employment, or an independent study would not ordinarily receive co-authorship. Access to faculty-generated data is determined by the faculty member. In the event of substantial contributions, co-authorship by faculty members and students is warranted. For more details refer to the *AAMFT Code of Ethics* and the *APA Publication Manual*. Several articles in the literature address issues of authorship. The HDFS Department subscribes to the Vancouver Protocol for determining who meets criteria for authorship: <http://www.icmje.org/recommendations/browse/roles-and-responsibilities/defining-the-role-of-authors-and-contributors.html>. In most social science publications, authorship is determined by contribution, with the lead author listed first indicating primary contribution to the manuscript.

Other Matters of Concern

Access to Personal Records

Guidelines governing student access to personal records and the procedures for challenging information in these records are published in the *MSU Student Handbook and Resource Guide* (Graduate Student Rights and Responsibilities, Part II, Article 3).

Gender Discrimination

Title IX of the Higher Education Amendments of 1972 prohibits discrimination on the basis of sex/gender in student programs and activities. Complaints concerning any violation of Title IX should be directed to the Office for Civil Rights and Title IX Education and Compliance.

Sexual Harassment

Student concerns about sexual harassment which involve faculty or staff should be directed to the office of the Office of Institutional Equity. Harassment incidents among students should be reported to this office as well. Harassment concerns which arise out of a student's employment with the university are addressed in the section on employment.

Students with Disabilities

Students with grievances related to discrimination on the basis of the disability may contact the Office of the Vice President for Student Affairs and Services.

Grade Appeals

Students who wish to appeal a course grade should consult the Office of the Dean of the College of Social Science where copies of the grade appeals policy, procedures, and forms are available. Note that grades may be appealed through this process only when there is demonstrable evidence that prejudice, or arbitrary or capricious action on the part of the instructor has influenced the grade. A student who wishes to appeal the results of a comprehensive examination, alleged excessive requirements by an advisor or committee, and other matters relating strictly to graduate education, may appeal under procedures established by the Graduate School.

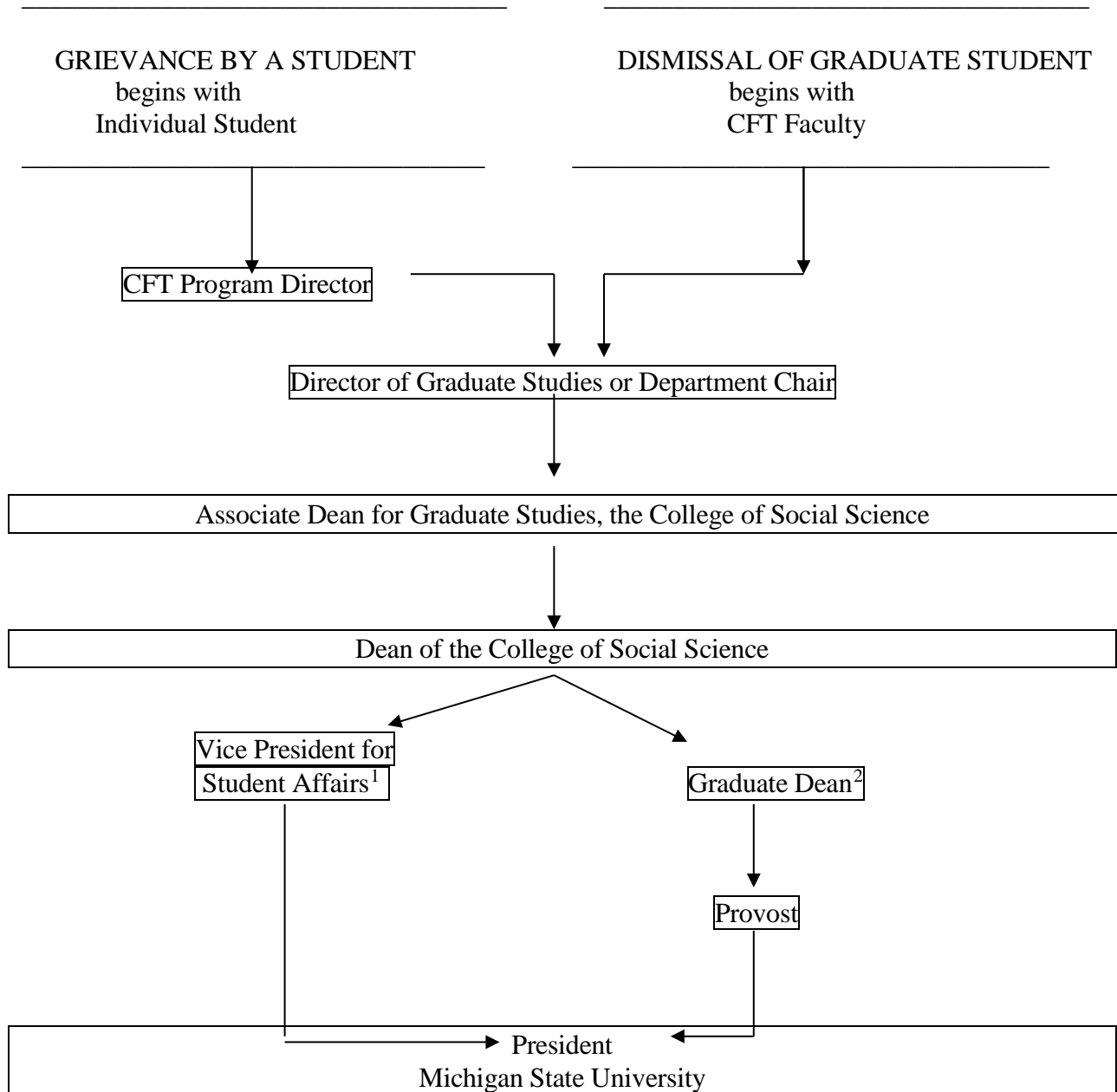
Appeals for Exceptions to Program Requirements

If the requirement at issue is a CFT program requirement, the student should present a written request to the CFT Program Director. The Director will consult with the CFT faculty, and respond in writing to the student. If the matter is not resolved at the program level, the student should follow the appeals procedure already outlined, beginning with the HDFS Director of Graduate Programs. Appeals for waivers of particular courses based on previous course work should be made to the CFT Program Director and the faculty member primarily responsible for the course in accordance with departmental procedures. However, waiver of a required course must be formally approved by the CFT and Director of Graduate Studies. If the student is not satisfied, the above grievance procedures apply.

Assignment to and Performance in Assistantship Role

Complaints and grievances related to employment within the department should first be discussed with the supervisor in charge of the position. If the issue is not resolved the student should present the matter in writing to the HDFS Director of Graduate Studies and/or Department Chair. If the student is still not satisfied, the University's grievance mechanism is to be invoked.

FIGURE 1
FORMAL APPEALS PROCESS



¹ Grievance involves access to personal records, sex discrimination, sexual harassment, discrimination based on disability.

²Grievance involves academic matters, ethical violations, dismissal, grade appeals, etc.

Suspension, Probation, and Dismissal

The University specifies the circumstances under which students may be put on probation, suspended, or dismissed for academic reasons. In addition, the CFT faculty may move to probate, suspend, or dismiss from the program any student who does not fulfill the academic requirements specified in the graduate student manual, whose clinical progress is deemed inadequate after attempts at remediation, or any student whose work over a period of time shows a demonstrable lack of progress toward their degree. Usually such action would be initiated by the CFT faculty and communicated in writing to the student, the student's advisory committee, Director of Graduate Studies, and the Department Chair. The Program Director or the student's advisor, through the Director of Graduate Studies, may call for a Review of Academic Progress to develop a plan of remediation as an alternative to moving for dismissal from the Program.

Because it is a clinical program, it may be necessary to dismiss a student from the CFT program for other than academic reasons. One of the most difficult tasks facing a faculty occurs when a student's behavior is deemed to be so inappropriate as to warrant major concern as to whether the person is emotionally, interpersonally, or ethically suited for entry into the profession of couple and family therapy. With regard to ethical matters, students are required to be familiar with and abide by the *AAMFT Code of Ethics*. The web address for this code is:

http://www.aamft.org/imis15/Content/Legal_Ethics/Code_of_Ethics.aspx.

The professional role is a decidedly sensitive one. Responsibility must be assumed by the CFT faculty to assure that those who might pose serious risks to clients and the standards of the profession (due to emotional instability or questionable ethical standards) are not allowed to enter the profession. Although such measures are most unpleasant, such decisions occasionally are necessary in considering the welfare of everyone involved. Such issues may transcend adjustments via feedback provided in day-to-day supervision and instruction. Accordingly, when such problems occur, the CFT faculty convenes to specify its concern in writing to the student and the student's advisor. Where possible, this statement specifies the particular behaviors in question, the desired changes and means of addressing them, and a time for re-evaluation of the concern where appropriate. If remedial action on the part of the student is not deemed feasible, the student should be informed about the reasons why he/she is regarded as unsuitable for this particular CFT training program.

The written statement will accompany full verbal feedback to the student, particularly from faculty or others with information from direct observations of the student. If the student feels the matter has been misrepresented, she/he will reply to these concerns and present their perspectives on the matter. The matter may be arbitrated at the level of the CFT program level or the recommended measures invoked (e.g., suspension from the program, pending a student's attempts to resolve the problem via therapy). At the end of the stated time or process, the matter would be reviewed and, in the absence of sufficient change in the desired direction, measures would be taken to dismiss the student from the program.

At any point in this process, the student has a right to appeal. Because these cases are unusually sensitive, students are reminded that they are not required to appeal and that the matter may be resolved without bringing it to the attention of the full CFT faculty. If the student does wish to appeal a decision of this type, he/she may do so, in writing, to the Director of Graduate Studies. From that point, the appeal procedure follows that already stated.

Usually students who would be dismissed under these circumstances would be dismissed from the graduate program of the department. However, under some circumstances, a dismissal decision may specify that the student retains the right to apply for admission to other graduate programs within the department.

Academic Conduct

Students are expected to hold themselves to high standards of ethical conduct in all phases of their academic work. Students should understand that such actions as plagiarism or cheating, or attempts to do so, are unethical and will not be condoned.

Papers cannot be submitted to fulfill requirements for more than one course. To do so constitutes academic misconduct. This is not meant to deter students from further development of a research or topical area through extension of previous work. Students should consult with the course instructor to be clear on the acceptability of papers that are based on prior coursework or other projects.

Academic misconduct may result in a course grade of F for coursework or, in some circumstances, dismissal from the program and suspension or dismissal from the University.

CONFIDENTIALITY IN SUPERVISION AND TRAINING

Couple and family therapists are under an ethical obligation to avoid exploiting the trust and dependency of students and supervisees (*AAMFT Code of Ethics*). Students are expected to share personal information about themselves and their families of origin in CFT classes and in supervision. We believe that dealing with such material is essential to the process of CFT training. Such information will be treated sensitively and will not be shared with anyone outside of fellow class members and the CFT faculty.

Section 4.7 of the *AAMFT Code of Ethics* defines the limits of confidentiality for supervisees. The Michigan State University Couple and Family Therapy Program has a clear responsibility to protect clients under the care of student therapists from unethical or incompetent practices (see *AAMFT Code of Ethics*). We have an additional responsibility to Michigan State University to protect the integrity and well-being of the Couple and Family Therapy program as well as an obligation to the State of Michigan and the profession of couple and family therapy to prevent unethical and/or incapacitated individuals from entering the profession.

In response to our ethical obligations to avoid exploiting students, any decision regarding the fitness of any student to continue training as a couple and family therapist must be made in consultation with the entire CFT clinical faculty. Comparative evaluations of students must be made among faculty members. Such information will not be shared with other students. For these

reasons, the CFT clinical faculty must operate as a confidentiality unit. A confidentiality unit means that information defined as sensitive will be retained within *the group*. The information gathered in supervision, classes, or individual conversations between students and faculty members, which is relevant to the well-functioning and ongoing evaluation of the student, must be shared among the CFT faculty. Students retain responsibility for those things which they choose to share with faculty members. This policy on supervisee confidentiality is in accordance with Section 4.7 of the *AAMFT Code of Ethics*.

One other confidentiality group consists of the mentors (advanced doctoral students) and the instructor in the supervision course and supervision practicum. These students and this instructor together supervise every doctoral student throughout the first year in the Program, regardless of prior experience. As Supervisors in Training, the mentors are learning about and experiencing supervision of more junior therapists. Of necessity, they must individually and collectively discuss first year students with the instructor and their colleagues in the class as part of both these courses. As with the faculty confidentiality unit, the mentors treat all information discussed as confidential.

Finally, if issues of clinical or academic performance necessarily involve a non-CFT faculty member or the Director of Graduate Studies, it would be possible to share that information. Should a student be required to enter personal therapy and/or cease doing therapy for remedial reasons, other faculty members outside of the CFT program, including administrators, will be informed only that the actions are being taken for personal reasons. No details of personal problems will be presented to the extent made possible by law and University policy. This will also be CFT policy should personal information concerning a student be related to dismissal of the student from the program. If a student appeals any decision regarding standing in the program, however, then confidentiality cannot be maintained in the appeal process. It is imperative that supervisee confidentiality be maintained within these outlined parameters.

This confidentiality statement is provided to help students understand the limits of confidentiality. Successful CFT training and supervision is, in large part, dependent on the quality of relationships between faculty and students. These relationships are built over time. The CFT faculty are committed to the respect and dignity of students. We feel that maintaining a faculty confidentiality unit is the most effective way of dealing with students' personal issues in a respectful manner, allowing us to fulfill our obligations to clients, Michigan State University, and the profession of couple and family therapy.

STATEMENT ON HUMAN DIGNITY

The Michigan State University Couple and Family Therapy Program is dedicated to the idea that all human beings are of worth and value simply by virtue of their humanity. We believe that all of our professional activities as family therapists and family therapy trainees should reflect this value and worth by according basic human dignity and respect both to our clients and to each other. This is a core value of our program.

The MSU Couple and Family Therapy program respects the expression of a wide diversity of personal values and behavior. As family therapists, we are aware that we will encounter clients, colleagues, and trainees with values and behaviors that are different from our own, perhaps even in opposition to our own. In our role as helping professionals, the accordance of dignity and respect to all humans requires us to help those who seek our expertise, regardless of how we might feel personally about their values, behaviors, and lifestyles.

Clearly, part of our role as helping professionals involves responding appropriately to illegal behavior or behavior that endangers vulnerable others who are not willful, knowledgeable participants. However, it is not our professional role to evaluate and respond to other people's behavior based on our own code of ethics and conduct. It is reflective of the devaluation and disrespect of humans when we behave in a judgmental manner toward those who conduct themselves in a manner that we might not find appropriate for our own moral or ethical code.

We recognize the right to freedom of conscience of each student; however, we expect each student to examine carefully the limits of that right with respect to clients and consult with faculty and peers before acting. This professional responsibility will be consistently highlighted by faculty in clinical supervision and clinical courses.

Automatically refusing to provide therapy services to any person(s) whose values and behavior do not reflect our own values and behavioral codes devalues and denigrates those human beings, and this refusal will not be tolerated. This principle also applies to lecturing to clients or moralizing about behavior that is different from our own, but which behavior is conducted in a manner that is reflective of the client's values. When in doubt regarding whether or how to treat a client in such situations, the trainee must consult with a supervisor, CFT faculty member, and/or the CFT Program Director.

We believe that an underlying concept in dealing with those whose values and behaviors are different from ours should be:

"If I do not respect the values and choices of others who are different, then how can I possibly expect others to respect me and the values and choices I have made?"

As a couple and family therapy program, we understand that personal values are very important. We also believe that the core values of tolerance and acceptance of others held by the Program and profession of couple and family therapy are important for those who wish to pursue the profession.

There may be times when personal values come into conflict with program and professional values. It seems very important for each of us to evaluate personal and professional values in an ongoing manner, and to seek guidance and advice from faculty members, peers, and other professionals when issues of client values and behaviors seem in conflict with our own.

We are under both a legal and ethical obligation to report suspected abuse or neglect of a minor child, an incapacitated person, or an elderly person to the proper authorities. If there is a threat of harm to self or others, we are under an obligation to act to protect the threatened person. It is better to err on the side of reporting rather than to imagine that there is no need to report suspected or actual abuse or neglect or threats to self or others. CFT faculty and supervisors should be consulted in such matters, if at all possible.

In research activities, it is equally imperative that faculty and students in the CFT program strive to value the dignity and worth of the participants in research, both in the way the research is conducted and in the ways the research is presented. When dealing with participants (or existing data sets) who are different from ourselves, we are obliged to examine our own knowledge (or lack thereof) regarding the context of the participants, seek further information, and carry out the research and data presentation in ways that demonstrate an understanding of context, history of discrimination and oppression, and personal histories of participants.

DEFINITION OF DIVERSITY

The program adheres to COAMFTE's definition of diversity as "being inclusive of race, age, gender, ethnicity, sexual orientation, relationship status, gender identity, socioeconomic status, disability, health status, religious or spiritual belief, religious or spiritual affiliation and national origin" (COAMFTE Accreditation Standards version 12.5, p. 9).

SECTION IV
PLAN OF STUDY

PLAN OF STUDY

Developing a Plan of Study

The setting up of a committee and developing a Plan of Study is fully described in the HDFS Ph.D. Handbook. CFT students have a prescribed set of courses, some of which should be taken in sequence. It is important that students plan well in advance for this sequence of courses. Some courses such as statistics fill up quickly. Other courses are only offered every two years. In order to meet the course requirements, students need to plan well in advance for their planned sequence of courses.

You should meet with your advisor regularly. You should also meet during the fall semester of your first year with the CFT Program Director to go over courses you took as a master's student and additional courses, if any, you might need to take to meet the masters requirements.

Doctoral-level students' guidance committees consist of the major professor (advisor), at least two additional HDFS faculty members, and at least one member from outside the department. At least one member of the committee must be a CFT faculty member.

Once the Plan of Study is approved by the advisor and the guidance committee, the advisor and CFT Program Director must review the proposed course curriculum to ensure that it meets the requirements for the doctorate with a focus on COAMFTE accreditation standards.

Annual Evaluations

In the Spring of each academic year, the student and their advisor meet to review progress toward the Ph.D. degree. The student must complete/update the HDFS doctoral portfolio documents and bring them to the annual evaluation meeting with the advisor. This set of documents provides the student with a dossier describing their accomplishments over the course of the Ph.D. Some portfolio requirements, such as attendance at college or university research seminars or training experiences, must be met each year by every student. Other requirements, such as presentations and/or posters at scholarly conferences, are met over the entire period leading to the doctorate. See the HDFS Ph.D. Handbook for more details about the portfolio and annual evaluation documents.

In addition to these evaluations, the student will be evaluated each year by the CFT faculty in terms of progress through the program. Because the CFT curriculum includes both clinical and classroom experiences, and because each faculty member knows only part of how the student is progressing, it is important for the CFT faculty to meet annually as a group to discuss student progress.

Ph.D in HDFS, Concentration in Couple and Family Therapy

Core Department Requirements (48 credit hours)

- HDFS 901 Contemporary Scholarship in Human Development and Family Studies (3)
- HDFS 999 Doctoral Dissertation Credits (24)
- Methodology and Statistics: 7 courses (21)
 - HDFS 982 Qualitative Research Methods (3)
 - HDFS 983 Advanced Methods in Intervention Research (3)
 - HDFS 892 Grant Writing in Human Development and Family Studies (3)
 - HDFS 880 Research Design and Measurement (3)
 - HDFS 881 Quantitative Methods in Human Development and Family Studies (3)
 - HDFS 960 Multivariate Data Analysis (3)
 - Elective in research design or statistics course approved by committee (3)

Core Couple and Family Therapy (CFT) Requirements (18 credit hours)

- HDFS 888 Diverse Families and Communities: Intervention Strategies (3)
- HDFS 910 Contemporary CFT Theories (3)
- HDFS 911 Outcome Research: What works in CFT Theories (3)
- HDFS 994 Advanced Evidence-Based Couple Therapy (3)
- HDFS 903 Evidence-Based CFT Intervention Programs (3)
- HDFS 995 Couple and Family Therapy Supervision (3)

Clinical Requirements (3-13 credit hours)

- HDFS 993 Internship in Marriage and Family Therapy (Practicum; 3-13)
- Doctoral students are required to complete a total of 1,000 hours of direct client contact before graduating (approved pre-doctoral and doctoral hours combined)
- In addition to clinical hours, students are required to complete an internship/advanced experience (see [Section VI.](#))

Minimum credits in the doctoral program: 69 required credit hours, including 24 dissertation credit hours and at least 3 credit hours of HDFS 993

NOTE: Students entering the doctoral concentration in Couple and Family Therapy will be required to meet the equivalent of the master's Standard (Foundational) Curriculum of the Commission on Accreditation of Marriage and Family Therapy Education ([COAMFTE](#)).

Suggested Doctoral Course Sequence: Incoming 2022-2023 Cohort

Semester year	CFT Courses	HDFS Courses	Practicum	Total Credit Hours Toward Ph.D.
Fall Year 1	HDFS 910 Contemporary CFT Theories (3)	HDFS 880 Research Design and Measurement (3)	HDFS 993 (3)	9
Spring Year 1	HDFS 994 Advanced Evidence-Based Couple Therapy (3)	HDFS 901 Proseminar in HDFS (3)	HDFS 993 (3)	9
Sum Year 1		Elective in HDFS, PSY, SOC, PSC, CEP or dissertation credits	HDFS 993(1)	1-4
Fall Year 2	HDFS 995 CFT Supervision (3)	HDFS 881 Quantitative Methods in Research (3) AND HDFS 999 Doctoral Dissertation Research (3)	HDFS 993 (if needed) (1)	9-10
Spring Year 2	HDFS 903 Evidence Based CFT Intervention Programs (3) AND HDFS 911 Outcome Research: What Works in CFT Theories	HDFS 960 Multivariate Data Analysis (3)	HDFS 993 (if needed) (1)	9-10
Summer Year 2		HDFS 999 Doctoral Dissertation Research (3-4)	HDFS 993 (if needed) (1)	1-4
Fall Year 3	HDFS 888 Diverse Families and Community	HDFS 983 Advanced Methods in Intervention Research (3) AND Research Elective (3)		9

Spring Year 3		HDFS 892 Grant Writing in Human Development and Family Studies (3) Comprehensive Examinations HDFS 999 Doctoral Dissertation Research (6)		9
Summer Year 3		HDFS 999 Doctoral Dissertation Research (3-4)		TBD
Fall Year 4		HDFS 982 Qualitative Research Methods (3) HDFS 999 Doctoral Dissertation Research (TBD)		TBD
Spring Year 4		HDFS 999 Doctoral Dissertation Research (TBD)		TBD

Suggested Doctoral Course Sequence: Future Cohorts

Semester year	CFT Courses	HDFS Courses	Practicum	Total Credit Hours Toward Ph.D.
Fall Year 1		HDFS 880 Research Design and Measurement (3) AND HDFS 881 Quantitative Methods in Research (3)	HDFS 993 (3)	9
Spring Year 1	HDFS 903 Evidence Based CFT Intervention Programs (even years) (3) OR HDFS 994 Advanced Evidence-Based Couple Therapy (odd years) (3)	HDFS 901 Proseminar in HDFS (3) AND HDFS 960 Multivariate Data Analysis (3)	HDFS 993 (1)	10
Sum Year 1		Elective in HDFS, PSY, SOC, PSC, CEP or dissertation credits	HDFS 993 _ (1)	4
Fall Year 2	HDFS 888 Diverse Families and Community (even years) AND HDFS 910 Contemporary CFT Theories (even years) (3) OR HDFS 995 CFT Supervision (odd years) (3)	HDFS 983 Advanced Methods in Intervention Research (even years) (3) OR HDFS 982 Qualitative Research Methods (odd years) (3) AND Research Elective (odd years) (3)	HDFS 993 (if needed) (1)	9-10
Spring Year 2	HDFS 903 Evidence Based CFT Intervention Programs (even years) (3) AND HDFS 911 Outcome Research: What Works in CFT Theories (even years)	HDFS 892 Grant Writing in Human Development and Family Studies (odd years) (3) AND/OR HDFS 999 Doctoral Dissertation Research (all years) (3)	HDFS 993 (if needed) (1)	9-10

	OR HDFS 994 Advanced Evidence-Based Couple Therapy (odd years) (3)			
Summer Year 2		HDFS 999 Doctoral Dissertation Research (3-4)	HDFS 993 (if needed) (1)	4
Fall Year 3	HDFS 888 Diverse Families and Community (even years) AND HDFS 910 Contemporary CFT Theories (even years) (3) OR HDFS 995 CFT Supervision (odd years) (3)	HDFS 983 Advanced Methods in Intervention Research (even years) (3) OR HDFS 892 Grant Writing in Human Development and Family Studies (odd years) (3) AND Research Elective (odd years) (3)		9
Spring Year 3	HDFS 911 Outcome Research: What Works in CFT Theories (even years)	HDFS 892 Grant Writing in Human Development and Family Studies (odd years) (3) Comprehensive Examinations (all years) HDFS 999 Doctoral Dissertation Research (all years) (6)		9
Summer Year 3		HDFS 999 Doctoral Dissertation Research (all years) (TBD)		TBD
Fall Year 4		HDFS 999 Doctoral Dissertation Research (all years) (TBD)		
Spring Year 4		HDFS 999 Doctoral Dissertation Research (all years) (TBD)		TBD

MA in Couple and Family Therapy
(Requirements to be met for students entering program without a master's degree
from a COAMFTE-accredited program)

Version 12.5 Standards

Doctoral degree programs must demonstrate that they offer course work and/or that students have completed course work, in all the areas contained in the Foundational Curriculum or that students demonstrate competence in those areas.

Below are the Foundational Curricula Areas that serve as prerequisites for all students entering into the Ph.D. CFT program at MSU. At the beginning of the first year, the Program Director will meet with each student, go over their transcript, and be sure that the requirements in each area of the Foundational Curriculum have been met. Students may be required to take additional coursework if these requirements are not satisfied.

*FCA 1: Foundations of Relational/Systemic Practice, Theories & Models (Minimum of **6 semester credits**/8 quarter credits/90 clock hours)*

This area facilitates the development of competencies in the foundations and critical epistemological issues of MFT. It includes the historical development of the MFT relational/systemic philosophy and contemporary conceptual foundations of MFT, and early and contemporary models of MFT, including evidence-based practice and the biopsychosocial perspective.

*FCA 2: Clinical Treatment with Individuals, Couples and Families (Minimum of **6 Credits**/8 quarter credits/90 clock hours)*

This area facilitates the development of competencies in treatment approaches specifically designed for use with a wide range of diverse individuals, couples, and families, including sex therapy, same-sex couples, working with young children, adolescents and elderly, interfaith couples, and includes a focus on evidence-based practice. Programs must include content on crisis intervention.

*FCA 3: Diverse, Multicultural and/or Underserved Communities (Minimum of **3 Credits**/4 quarter credits/45 clock hours)*

This area facilitates the development of competencies in understanding and applying knowledge of diversity, power, privilege and oppression as these relate to race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious, spiritual and/or beliefs, nation of origin or other relevant social categories throughout the curriculum. It includes practice with diverse, international, multicultural, marginalized, and/or underserved communities, including developing competencies in working with sexual and gender minorities and their families as well as anti-racist practices.

*FCA 4: Research & Evaluation (Minimum of **3 Credits**/4 quarter credits/45 clock hours)*

This area facilitates the development of competencies in MFT research and evaluation methods, and in evidence-based practice, including becoming an informed consumer of couple, marriage, and family therapy research. If the program's mission, goals, and outcomes include preparing students for doctoral degree programs, the program must include an increased emphasis on research.

*FCA 5: Professional Identity, Law, Ethics & Social Responsibility (Minimum of **3 Credits**/4 quarter credits/45 clock hours)*

This area addresses the development of a MFT identity and socialization and facilitates the development of competencies in ethics in MFT practice, including understanding and applying the AAMFT Code of Ethics and understanding legal responsibilities.

FCA 6: Biopsychosocial Health & Development Across the Life Span (Minimum of **3 Credits**/4 quarter credits/45 clock hours)

This area addresses individual and family development, human sexuality, and biopsychosocial health across the lifespan.

*FCA 7: Systemic/Relational Assessment & Mental Health Diagnosis and Treatment (Minimum of **3 Credits**/4 quarter credits/45 clock hours)*

This area facilitates the development of competencies in traditional psycho-diagnostic categories, psychopharmacology, the assessment, diagnosis, and treatment of major mental health issues as well as a wide variety of common presenting problems including addiction, suicide, trauma, abuse, intra-familial violence, and therapy for individuals, couples, and families managing acute chronic medical conditions, utilizing a MFT relational/systemic philosophy.

The following two areas must be covered in the curriculum in some way, though there are **no minimum credit** requirements.

FCA 8: Contemporary Issues

This area facilitates the development of competencies in emerging and evolving contemporary challenges, problems, and/or recent developments at the interface of Marriage and Family Therapy knowledge and practice, and the broader local, regional, and global context. This includes such issues as immigration, technology, same-sex marriage, violence in schools, etc. These issues are to reflect the context of the program and the program's mission, goals, and outcomes. Programs are encouraged to innovate in this FCA.

FCA 9: Community Intersections & Collaboration

This area facilitates the development of competencies in practice within defined contexts (e.g., healthcare settings, schools, military settings, private practice) and/or nontraditional MFT professional practice using therapeutic competencies congruent with the program's mission, goals, and outcomes (e.g., community advocacy, psycho-educational groups). It also addresses developing competency in multidisciplinary collaboration.

FCA 10: Preparation for Teletherapy Practice

This area facilitates the development of competencies in teletherapy. This may include such issues as emerging legal and ethical requirements, documentation, response to crises, awareness of the therapeutic space, joining, appropriate individual and systemic interventions (e.g., couples, play therapy), or other topics of importance to the context of the program and with diverse populations. Programs are encouraged to innovate in this FCA.

SECTION V
RESEARCH ACTIVITIES

RESEARCH ACTIVITIES

CFT Students and Research

The CFT doctoral program expects students to be involved in research activities from the beginning to the end of their graduate careers. As CFT students, you will be expected to conduct research and write about areas that are relevant to CFT theory and practice, including therapy practice and evaluation, change processes in therapy, and general issues of developmental processes, family processes, life-stage changes, etc. A program of research is something that is built over time, with false starts as opportunities for future growth.

CFT Applicable Research

The CFT program at MSU is focused on intervention research. We pride ourselves in making a contribution to our field and value research that places a focus on intervention. Student publications should ideally reflect a focus on applications to CFT and clinical work. All CFT student dissertations should include a section that describes applications to the CFT field and to clinical intervention, including for diverse populations.

The MSU Model of CFT Research Training

In this program, we have adopted an apprenticeship research training model. This model assigns primary responsibility for students' research training and achievements to the student's major professor. Thus, we consider the review of applications and the interview process for admittance to the CFT program to be of critical importance to identify a good research fit between students and faculty. Under the apprenticeship model, students work collaboratively with faculty on their individual research agendas and gradually develop the research skills (e.g., research design, publishing, grant writing) that will allow them to narrow down and refine their research interests. Although the apprenticeship model may be viewed initially as limiting, we consider that the apprenticeship model provides the following major benefits:

1. Establishes primary accountability in the CFT faculty for developing well-established programs of research through which students can develop various research skills. This ensures that students do not need to look for research opportunities on their own, which could lead to intense stress if such opportunities are not readily available to the student.
2. Makes individual faculty members become responsible for establishing regular research meetings with mentored students.
3. Allows for students to collaborate with fellow students who are mentored by the faculty and who have developed more sophisticated research skills.
4. Ensures that students will be actively involved with faculty in key research activities, such as implementation of research projects, co-authoring publishable articles, presenting at national conferences, and engaging in grant writing.
5. Facilitates the acquisition of research skills that will allow students to gradually develop an identity as independent investigators, particularly as students progress through their doctoral comprehensive examinations and dissertation research.

Getting Started

Research is far more satisfying (and probably of higher quality) when the researcher cares deeply about the research. Each student should take advantage of the multiple opportunities to discover their research interests. It is important for a student to identify a faculty research mentor/advisor early on, understanding that it is possible to change advisors later if necessary. Further, the doctoral guidance committee should be utilized in helping the student define their research program. Selecting that committee as early as possible will also be to the student's advantage.

There are several ways to approach research to identify that passion, and they are not mutually exclusive.

- Working closely with a research mentor/advisor, developing research studies and conducting research, writing papers or preparing conference submissions, and attending the regular research group meetings organized and led by that faculty member.
- In addition to the formal research group led by each faculty member, students can join or organize a formal or informal research group with fellow students and/or another faculty member. These groups provide additional opportunities to hear other students' ideas about their own research and to begin discussing the student's own ideas as well.
- Use class assignments to expand knowledge of the literature in areas of apparent interest. Once satisfied that the area is one of interest, continue to build on that knowledge base by expanding earlier papers in later classes.
- Review the online CVs of CFT and HDFS faculty members, paying close attention to the topics on which they publish. Ask for opportunities to interview the faculty who seem to share common interests.
- As self-of-the-therapist issues arise in your clinical training, consider how those issues can become self-of-the-researcher issues.
- Go online to [grants.gov](https://www.grants.gov) and review the abstracts of recently funded grants for ideas about your own research.
- Attend scholarly conferences, read the posters, attend the papers and workshops, and talk to colleagues attending.
- Find out about sources of data—faculty data sets, online datasets, clinic datasets, etc.
- Do not “go it alone,” conduct research with collaborators, seek feedback from peers and faculty, and learn from others. These are all critical factors in being successful in research.
- Understand that good research requires as much time, training, and energy as good therapy and be willing to commit that time, training, and energy to research.

SECTION VI
CLINICAL
REQUIREMENTS

HDFS 993

CLINICAL EXPERIENCES

Professional Standards and Professional Behavior

The leading national professional organization for couple and family therapists is the American Association for Marriage and Family Therapy. CFT faculty and students enrolled in the CFT program must adhere to AAMFT standards of ethical professional behavior in their therapy training, teaching, and research. The most current edition of the *AAMFT Code of Ethics* is online [here](#).

Violations of these standards must be reported to the CFT Program Director (See Grievance and Dismissal Procedures, [Section III](#)). Any violation may be reported also, in writing, to the AAMFT Committee on Ethics and Professional Practices and the Michigan Board of Marriage and Family Therapy.

Adherence to the AAMFT ethical standards includes carrying proper liability insurance to protect the clients and agencies involved in training students. Students are required to be members of AAMFT to obtain liability insurance which is part of student membership.

Professional conduct with clients, other students, CFT faculty, other faculty, and other agencies is an absolute requirement of the CFT Program. CFT faculty are expected to demonstrate appropriate models of such professional conduct, and students are expected to follow appropriate models of professional behavior.

Client Contact Hour Requirements

Prior to graduation from the CFT doctoral program, each student is required to complete at least 1,000 hours of direct client contact (face-to-face) under the supervision of an AAMFT Approved Supervisor (or equivalent). At least 500 hours of the 1000 hours must be with couples or families. Further, the student must document at least 200 hours of supervision of therapy by an AAMFT Approved Supervisor (or equivalent) with at least 100 of the 200 hours being individual supervision. The table on the following page summarizes minimum clinical hour requirements for the doctoral degree specialization in Couple and Family Therapy. As was noted earlier, completing the AAMFT requirements or the requirements laid out in that table does not guarantee that the student will be released from clinical duties. The CFT Program Director must accept a request to cease providing services in the CFT Clinic. The required form is included in the *CFT Clinic Manual*.

*Note: The title of the practicum course, “HDFS 993 Internship in CFT,” is misleading in that it does not mean that the student is actually completing an internship but rather clinic requirements.

The internship is formally defined in writing by the student and advisor, and records are maintained by the CFT program. Although students completing the actual internship may enroll in HDFS 993, most students in the COAMFTE-defined internship will be enrolled in “HDFS 999, Dissertation Credit Hours.”

Minimum Clinical Hour Requirements for the Doctoral Degree in Couple and Family Therapy

Starting Degree	Minimum Length of Time in Couple and Family Therapy Clinic	Maximum Length of Time in Couple and Family Therapy Clinic	Minimum Number of Direct Client Contact Hours to be Completed at CFTC (not including alternative hours)	Maximum Number of Alternative Hours Allowed	Maximum hours that can be transferred into CFT Doctoral Program	Total Clinical Contact Hours Required to Graduate (Including Up to 100 Alternative Hours ^c)
Non-Clinical Masters Degree ^d (e.g., Family Studies, Sociology, Psychology)	2 years (4 full semesters, 2 summers)* No outside practica in first year	4 years ^a (12 semesters)	300	100	N/A	1000 ^c
Clinical Masters Degree ^d (e.g., MSW, Counseling Psychology)	2 years (4 full semesters, 2 summers)* No outside practica in first year	3 years ^a (9 semesters)	300	100 ^e	500 (Hours must be approved by the Program Director)	1000 ^c
Masters from COAMFTE Program	1 year (2 full semesters, 1 summer)*	3 years ^a (9 semesters)	200	0	800 (Hours must be approved by the Program Director)	1000 ^c

*Enrolled in HDFS 993

^a Students who fail to make adequate progress toward completing the required number of direct clinical hours (including the requirement that 50% must be relational) in the Clinic will be required to enroll in practicum/internship until the requirement is met. “Adequate progress” will be taken to mean completing the required hours with appropriate level of therapy skills within the minimum time period.

^c In addition to accruing the minimum hours of direct clinical contact required for the doctoral degree, students are required to achieve an acceptable level of proficiency in clinical work as determined by practicum supervisors and the Couple and Family Therapy program faculty. Students will only be released from clinical requirements when CFT program faculty deem their work to be at an acceptable level.

Important Definitions and Information

- “Direct clinical contact hours” are defined by COAMFTE as “a therapeutic meeting of a therapist and client (individual, relational, or group) occurring in-person synchronously, either physically in the same location or mediated by technology.”
- Two therapists working together in the room with the clients is considered "direct contact" for both therapists.
- Observation of another therapist's work, although valuable, does not constitute "direct contact"; however, please note this activity may be eligible to count as teaming hours. See Alternative Client Contact Hours below.
- **Prior** approval by the Clinic Director is required to include alternative therapeutic contact and psychoeducation hours acquired away from the Couple and Family Therapy Clinic in the 1,000 hour requirement. (See “Alternative Client Contact Hours” in this section)
- Half of the 1,000 hours of client contact must be with couples or families (relational).

Teletherapy and Virtual Supervision

Clinical work may include the delivery of teletherapy. Clinic interns providing teletherapy services must act within their scope of practice and exercise the same standard of care applicable to traditional, in person services. Teletherapy practices must be compliant with relevant federal and state regulatory requirements. In Michigan, the [Department of Licensing and Regulatory Affairs Marriage and Family Therapy – General Rules](#) include the following stipulations specifically regarding telehealth:

- (1) A licensee shall obtain consent for treatment before providing a telehealth service under section 16284 of the code, MCL 333.16284.
- (2) A licensee shall keep proof of consent for telehealth treatment in the patient’s up-to date medical record and follow section 16213 of the code, MCL 333.16213.
- (3) A licensee providing any telehealth service shall do both of the following:
 - (a) Act within the scope of the licensee’s practice.
 - (b) Exercise the same standard of care applicable to a traditional, in-person health care service.

In the event that practicum must be shifted to remote teaching due to the COVID-19 pandemic or other reasons, you may receive virtual supervision, in compliance with federal and state regulatory requirements.

Practicum Hours for Doctoral Students (HDFS 993)

- (1) Ph.D. CFT students with a master’s degree in a nonclinical area (e.g., sociology, family studies) are required to complete the equivalent of a master’s degree from an accredited program.

Couple and Family Therapy Clinic

Students in this category will provide services in the Couple and Family Therapy Clinic on a continuous basis for a minimum of two (2) years and will complete a minimum 300 hours of direct client contact both in and out of the Clinic during that time (master’s equivalency). At least 150 of the 300 hours must be relational (i.e., couple and family therapy).

Students must be enrolled in HDFS 993 while providing direct client services in the Couple and Family Therapy Clinic or in an outside practicum. Students may choose to earn all of their first 300 hours in the Couple and Family Therapy Clinic.

For practical purposes, the student completing the equivalency then will follow the rules established for graduates of a COAMFTE-accredited program to complete the doctoral degree. All direct contact hours earned in the Clinic or elsewhere are counted toward the required 1,000 hours for the Ph.D. Up to 100 alternative hours may be counted toward the 1,000 required hours, but not toward the master's equivalency.

Contract/Grant/Volunteer

Up to 100 of the required 300 hours of direct client contact may be completed through services to clients in a community setting. Such a practicum site must be approved by the Clinic Director and the CFT Program Director.

- (2) **Ph.D. CFT students with a master's degree in a related clinical area** (e.g., clinical or counseling psychology, social work) or from an CFT master's program not accredited by the Commission on Accreditation for Marriage and Family Therapy—a *formal waiver of the 300 hour master's requirement is required, as well as a waiver for any hours over 300.*

Formal Waiver

Students who have clinical experience and have received a Master's degree from a program that is NOT accredited by the COAMFTE may apply to have a portion of their clinical experience hours transferred *if these were direct client hours (i.e., face-to-face) were accumulated under the direct supervision of an AAMFT Approved Supervisor or a supervisor who has been deemed as being equivalent to a AAMFT Approved Supervisor.* The Program Director may accept up to 800 hours of prior experience. The transfer of client hours must be negotiated with the Program Director during the first semester in the program and documented in writing. Please complete the Incoming Hours Log form found on the Clinic D2L website.

Couple and Family Therapy Clinic

All direct contact hours earned in the Clinic or from elsewhere that have been waived by the Program Director are counted toward the required 1,000 hours for the Ph.D.

However, students in this category must provide at least 300 hours of direct clinical services in the Couple and Family Therapy Clinic on a continuous basis for a minimum of two (2) years. At least half of these hours must be relational. Students must be enrolled in HDFS 993 while providing direct client services in the Couple and Family Therapy Clinic. Students may choose to earn all of their hours in the Couple and Family Therapy Clinic.

Alternative Therapy Hours

For students enrolled in HDFS 993, up to 100 alternative hours may be counted toward the required 1,000 hours. However, alternative hours may not be counted toward the required 300 hours in the Clinic. If the alternative hours occur outside the MSU Couple and Family Therapy Clinic, the Clinic Director must approve the source of alternative hours in advance.

(3) Students with a Master's from a COAMFTE-Accredited Program

Graduates of COAMFTE-Accredited Master's program may waive having to complete up to 800 hours of the required 1,000 in the Ph.D. program, depending on their prior clinical experience. However, the student is still required to complete a minimum of 200 hours during the first year or more in the MSU Ph.D. program.

The transfer of client hours must be negotiated with the Program Director during the first semester in the program and documented in writing.

Students in this category will provide services in the Couple and Family Therapy Clinic on a continuous basis for a minimum of one (1) calendar year and are not eligible for outside practicum placements until the end of the first year in the Ph.D. program. A minimum of 200 hours of direct client contact in practicum must be completed in the Michigan State University Couple and Family Therapy Clinic under CFT faculty supervision. At least half of these hours must be relational. Students must be enrolled in HDFS 993 while providing direct client services in the Couple and Family Therapy Clinic. Students may accrue additional client hours toward the 1,000 hour requirement in the Couple and Family Therapy Clinic or an approved external practicum site (including the formal internship).

Additional alternative therapy hours are not allowed for students entering the doctoral program with a master's degree from a COAMFTE-accredited program; however, alternative therapy hours earned in a COAMFTE-accredited program master's program will be counted toward the 1,000 hours required for the doctorate.

(4) Documenting Hours

All students must have 1,000 clinical hours complete in order to graduate from the program. At least 500 of these hours must be relational. 200 hours of supervision must be accrued with at least 100 hours individual supervision, and 50 supervision hours including raw data (video/live). CFT Students have many opportunities to get 50 hours of raw data in supervision – live or video can be counted in either individual or group. Every time a student is in the control room it counts as group live supervision if the case is being discussed by the supervisor. Every time a student is in the therapy room and a supervisor is observing, it counts as individual live. On clinic nights alone students should be accruing 1-3 live hours each week.

Here is the summary of what is needed to graduate:

1. 1,000 direct clinical contact hours – includes hours brought into the program (must be approved by the Program Director in writing)
2. 500 relational hours
3. 200 hours of supervision

- 3.1. 100 hours of individual supervision
- 3.2. 50 observable supervision hours (live or video)
- 4. Can only count 100 of 1,000 as teaming hours

Guide to Supervision/ Client Contact Hours

Who are we watching?	Who is doing the watching?	How are we watching?	Does this count as a supervision hour for me? What type of supervision is it?	Does this count as a client contact hour for me?
You	Supervisor	Live	Individual Live	Yes
You	Supervisor and the group	Live	Individual Live	Yes
Your peer therapist	Supervisor and you	Live	Individual live	No – Except if you are using this toward your 100 teaming hours.
Your peer therapist	Supervisor, you and the group	Live	Group live	No - Except if you are using this toward your 100 teaming hours.
You	Supervisor and you	video	Individual video	Yes – for the amount of time you originally met with the client.
You	Supervisor and you and the group	video	Individual video	Yes – for the amount of time you originally met with the client.
Your peer therapist	Supervisor and you	video	Individual video	No
Your peer therapist	Supervisor and you and the group	video	Group video	No
No one – we’re just talking about cases	No one – but it’s only my supervisor and me in the room talking about cases	We’re not watching anything. Just talking.	Individual case consult	No
No one – we’re just talking about cases	No one – but it’s only my supervisor and me AND just one of my peers in the room talking about cases	We’re not watching anything. Just talking.	Individual case consult	No
Not watching anyone – we are discussing theory or self of the therapist work.	No one – but it’s only my supervisor and me in the room	We’re not watching anything. Just talking.	Individual case consult	No
Not watching anyone – we are discussing theory or self of the therapist work.	No one – but it’s only my supervisor and me AND just one of my peers in the room	We’re not watching anything. Just talking.	Individual case consult	No
Not watching anyone Just talking about cases or about theory or self of the therapist work	No one –my supervisor and me AND the entire group is in the room	We’re not watching anything. Just talking.	Group case consult	No

*Prepared Fall 2014 S. Sankar, modified Summer 2016 N. Monta

Requirements for AAMFT Status as a Clinical Fellow and Licensure in Michigan

Achieving Status as a Clinical Fellow in AAMFT

Currently, status as a Clinical Fellow can be achieved by two tracks (https://www.aamft.org/Shared_Content/Membership/Designations.aspx). The licensure track is most applicable to students in our program. In Michigan, the LMFT requires 1,000 hours of direct client contact and 200 hours of supervision by an AAMFT Approved Supervisor (or equivalent). A minimum of 500 hours must be direct clinical services to couples and/or families. In addition, a passing score must be obtained on the national examination administered by the Association of Marital and Family Therapy Regulatory Boards (AMFTRB).

Michigan Limited Licensure

Students completing the equivalent of a master's degree in CFT with (a) 300 hours of direct, supervised clinical experience (half relational) and (b) all the post-baccalaureate courses required by the Michigan State Board for Marriage and Family Therapy are eligible to apply for limited licensure as a Marriage and Family Therapist (LLMFT).

Students who enter the CFT Ph.D. program with a master's in a nonclinical area (e.g., sociology, family studies) are eligible to apply for limited licensure as a Marriage and Family Therapist (LLMFT) by completing (a) 300 hours of supervised clinical experience and (b) all the post-baccalaureate courses required by the Michigan State Board for Marriage and Family Therapy.

Note, if you want your hours in the Ph.D. program to count towards licensure in Michigan, it is imperative that you become an LLMFT as soon as possible. Otherwise the hours will not count if you apply for licensure prior to graduation.

Students who enter the CFT Ph.D. program with a master's in a related clinical area (e.g., clinical or counseling psychology, social work) may already meet the requirements of (a) 300 hours of supervised clinical experience and (b) all the post-baccalaureate courses required by the Michigan State Board for Marriage and Family Therapy, and would be eligible to apply for limited licensure as a Marriage and Family Therapist (LLMFT). It is the student's responsibility to present sufficient evidence to the Board for acceptance of clinical experiences and master's-level coursework.

Students who enter with a master's degree from a COAMFTE-accredited CFT master's program must present evidence of graduation from such a program to the Michigan State Board for Marriage and Family Therapy for limited licensure as a Marriage and Family Therapist (LLMFT). Students meeting these criteria are encouraged to apply immediately for LLMFT licensure.

Full MFT Licensure in Michigan

Students who complete all the requirements for the doctoral degree except the dissertation, but including the 1,000 clinical hours, are eligible to apply for full licensure as an MFT (LMFT). Once the degree has been granted, that alone is sufficient to apply for full licensure (LMFT). The application process before the Ph.D. has been granted is more complex, but may be of benefit to the student prior to completion of the program.

A copy of the Michigan laws is available through Michigan.gov.

Licensure in Other States

The Association of Marital and Family Therapy Regulatory Boards provides a description of licensure requirements in each state. You can access this information at this link: <https://amftrb.org/resources/state-licensure-comparison/>

Supervision Hour Requirements

HDFS 993: Internship (Practicum)

Students in HDFS 993 must obtain individual or dyadic supervision with an appropriate supervisor (AAMFT Approved Supervisor, AAMFT Supervisor-in-training not in the program, or equivalent) at least once every other week in which they have direct client contact in order to have direct client service hours counted.

The student will be expected to maintain the required ratio of direct client contact hours to hours of supervision of five hours of client contact to one hour of supervision. To complete the doctoral program, a minimum of 200 hours of supervision is required. One hundred (100) of these hours must be individual or dyadic supervision.

Individual supervision is defined as meeting with the supervisor with no more than one other supervisee. At MSU, group supervision is defined as meeting with the supervisor with no more than six (6) total student supervisees. Under normal circumstances, every student in the MSU CFT Program will receive more hours of supervision than the COAMFTE minimum requirement.

Students are responsible for maintaining acceptable supervision for any hours of direct client contact obtained outside the MSU Couple and Family Therapy Clinic. That is, the supervisor must be an AAMFT Approved Supervisor, an AAMFT-defined Supervisor-in-Training (not enrolled in the MSU CFT program), or a supervisor deemed to meet the criteria for an AAMFT Approved Supervisor. Arranging for appropriate supervision outside the Clinic is the responsibility of the student. **Prior** determination by the CFT Program Director that the supervisor meets an equivalent standard is required if the proposed supervisor is not an AAMFT Approved Supervisor or an AAMFT Supervisor-in-Training. Such supervision may or may not be provided by the CFT Program faculty. Under no circumstances may a full-time CFT faculty member receive payment from a student for supervision of a current CFT graduate student or for supervision of a student.

Mentoring Program

Each incoming student will be assigned a mentor or resource person for at least the first year in the program. The mentor is an AAMFT Supervisor-in-Training and is in their second year in the doctoral program (or beyond). The mentors provide supervision on a regular basis. Such hours of supervision may not be counted by the supervisee, but may be counted by the mentor toward AAMFT Approved Supervisor status. Supervisee-mentor activities may include, but are not limited to co-therapy, live supervision, videotaped supervision, case note review, construction of genograms of the mentor and/or supervisee, and review of Clinic procedures, forms, and policies. While participation in the mentoring program is voluntary, most supervisees find it of great value, first, in learning about the program, second, in having a reliable source of information, and, third, in having consistent supervision and opportunities to explore new ways of thinking about and doing therapy. Mentoring begins in the first semester and continues throughout the year.

Documentation of Hours (HDFS 993)

To meet the direct client contact requirements in practicum over a two-year period, the student therapist will need to conduct 6-8 hours of therapy sessions each week under appropriate weekly or biweekly supervision. To meet this clinical hour requirement, a minimum caseload of 10 active cases should be maintained. It is advisable that the CFT student leave at least one evening each week free for clinical work (Monday through Thursday nights) in addition to the regularly scheduled evening HDFS 993 class (i.e., two nights each week should be reserved for clinical work). Obviously, daytime appointments are also desirable, and students should make themselves available for blocks of time during the day as well as evenings.

Good clinical practice dictates setting aside 2-3 large blocks of time for clinical work, rather than trying to fit clients into odd free hours scattered through the week. In reality, more client contact hours must be scheduled to allow for vacation periods, slow times, clients who fail to attend appointments, illness, etc. Similarly, supervision sessions should be scheduled to allow for vacation times, conferences, illnesses, etc.

During the course of each semester, Couple and Family Therapy Clinic records will be used to update the student's permanent record of hours of therapy and hours of supervision, using the Monthly Record of Therapy and Supervision (MRTS, see *CFT Clinic Manual*), supplemented by client records. The updated information will be based on the Couple and Family Therapy Clinic record as corrected by the student therapist and her/his supervisor. *The MRTS, with required signatures, must be filed with the Clinic Director no later than 10 business days after the last day of the month of the report in order for the client contact and supervision hours for both practicum and internship to be included in the student's permanent record.* The CFT Clinic records will be considered the definitive record of a student's therapy and supervision hours. Student therapists will have periodic opportunities, i.e., at least yearly, to correct errors in the CFT Clinic records with their supervisor's approval. CFT Clinic records are not subject to further change as the result of student action after this review.

It is imperative for sound professional practice that students keep their clinical records up to date. At least once each semester, a quality assurance of clinical records will be conducted by clinic staff. Students and their supervisors will be notified as in writing about the outcome of these checks and students will need to rectify these concerns immediately. Students who fail to maintain professional records and who do not adhere to clinic policies will be placed on probation. Students on probation will not be allowed to take on new clients until their paperwork is complete. In extreme cases, students will meet with the faculty as a whole to discuss the matter or will undergo an Academic Progress Review (APR) set up by the Program Director and Director of Graduate Studies.

Evaluation of HDFS 993 Performance

At the end of each semester, the HDFS 993 supervisor will complete the "Evaluation of Clinical Progress," summarizing their observations of the student's performance. The student must be allowed to review this document, signing the evaluation to certify the review. The student's signature does not imply agreement with the supervisor's comments or evaluation. The student may add their own comments regarding the evaluation; however, these comments do not constitute an appeal of the grade for practicum (See [Section III](#) on Grievance and Dismissal

Policies and Procedures for grade appeal procedures). This document will become part of the student's CFT program record. In addition, each student will be requested to evaluate the practicum experience in writing, using the online MSU SIRS form.

Statement on Client Load

Over the period of time spent in the Couple and Family Therapy Clinic, client service time is expected to increase to between 6 and 8 hours a week. However, client loads are determined by the student's supervisor in consultation with the Clinic Director, and may be more than 6 or either more or less than 8 a week. A case load of at least 10 active cases is required to meet this goal of 6-8 therapy hours each week. Further, the mix of individual, couple, family, and group cases is also a matter determined by the student's supervisor and the Clinic Director.

Because the Couple and Family Therapy Clinic operates as a public facility, there may be times when loads increase over the expected level and the mix of cases desired by the student may not be feasible.

Alternative Client Contact Hours

Only students completing the master's equivalency are eligible to accrue alternative contact hours. Up to 100 hours may be counted toward the 1,000 hours required for the doctoral specialization in CFT. Alternative hours may not be counted toward the 300 direct client contact hours required of students in the first two categories (above). The alternative hours must be systemic and interactive in nature. Prior approval from the Clinic Director is needed to claim such hours if they are obtained away from the Couple and Family Therapy Clinic.

The MSU CFT faculty have determined that these alternative experiences may include:

1. Interactive Team Member

Time spent as an interactive team member who follows, observes, and discusses the ongoing case(s) with the primary therapist. This team member need not act in the capacity of a co-therapist, but must directly observe the case from the observation room on an ongoing basis and offer input to the primary therapist. Time spent participating as a team member as described herein during practicum is eligible under this criterion.

- a. **If you observe a live session during practicum and participate by providing input to the therapist on an ongoing basis.** Any participation that would be considered as "Live Group Supervision" during practicum could also be counted as an Alternative Team activity, but not both.
- b. **If you observe a live session of a student therapist at other times and you participate by providing input to the therapist. *PROVIDED YOU CAN DOCUMENT THE SESSION.***
- c. **If you accurately report your participation on the Monthly Report Form within 10 days of the beginning of the month following.**

2. Providing Therapeutic Psychoeducation

Providing therapeutic psychoeducation, as opposed to therapy, will count as long as the experience is face-to-face, direct contact. This does NOT include a psycho-educational presentation to a group of therapists for the purpose of professional development (e.g., local, state or national conference presentations), nor does this include any undergraduate classes you may have taught or will teach in the future. However, if you are providing extensive training in a particular intervention program (minimum = 3 hours), that time may be counted as therapeutic psychoeducation.

3. Research Activities

Research activities in which extensive assessments and/or interviews are conducted in direct face-to-face contact with participants. The participants need not be clients per se. Any other aspects of research, such as literature review, writing, or journal reviews will NOT count as they are not considered direct contact and interactive. With prior permission from the Program Director, certain research activities (e.g., taking extensive life history, conducting the Adult Attachment Interview) may be counted as direct client contact hours and reported as such.

NOTE: Alternative Hours cannot be substituted for any portion of the minimum number of hours you are required to spend directly serving clients in the Family Therapy Clinic

SECTION VII
INTERNSHIP (ADVANCED EXPERIENCES)

INTERNSHIP (ADVANCED EXPERIENCES)

The internship is a formal advanced experience in the CFT doctoral program. This internship experience must be approved by your advisor as well as the CFT Program Director and it must involve two formal experiences from the following over 9 months:

- An advanced research project
- Writing a grant
- Teaching
- Supervision
- Consultation
- Clinical practice/innovation
- Program development
- Leadership
- Policy
- Other experience approved by Program Director and advisor

Ideally, an internship should not be “more of the same.” While there is flexibility in what you do, the advanced experience should be in addition to what you already do in the program. Advanced experience is not the same as, for example, your clinical requirements, teaching assistantship, supervision class, or grant writing course. It should be something advanced that prepares you for your career. You need to submit a formal application for each experience that must be signed by your advisor as well as the Program Director. Your proposal should include who will supervise your experience, how often you will meet with the supervisor, and outcomes of the experience (e.g., a manuscript, a submitted grant). Together these two experiences should last for a minimum of 9 months.

The internship experiences are intended to be in-depth experiences once you know your direction in the program and may not begin before you have completed at least one year (three semesters) in the program.

Internship Paperwork

The paperwork begins with a proposal to the student’s advisor/committee. Once approved by the advisor, there must be an agreement signed between the Program Director and any site where the internship will be served. This paperwork should be submitted prior to the commencement of the internship. (see [Internship Proposal and Approval Form](#)).

Immediately after **completion** of the internship, students submit the signed form titled [Internship Completion Form](#) to the CFT Program Director.

SECTION VIII
SUPERVISION OF SUPERVISION

SUPERVISION OF SUPERVISION

Training in supervision is a key part of doctoral training, and supervision-of-supervision will be provided to CFT students as part of the course in supervision in their second year or later in the doctoral program. Completion of supervision-of-supervision training includes a 3-credit didactic course, HDFS 995, CFT Supervision, normally taught every other year in the Fall Term. More advanced students who take the supervision course will be assigned as mentors to supervise more junior students under faculty supervision. The accrued mentoring hours fulfill part of the hour requirements to achieve Approved Supervisor status, which can be achieved when the applicant has been fully licensed as a marriage and family therapist for at least 2 years.

Each student entering the doctoral program will be assigned a mentor or a resource person, a more senior doctoral student who is taking or has taken the HDFS 995 course. Hours of supervision of graduate students by other graduate students in the CFT program cannot be counted by the more junior student toward the required 200 hours of supervision.

However, meeting both the letter and the spirit of COAMFTE guidelines does not preclude student supervision of other students. Quite the contrary, the MSU CFT faculty recognize the great value of more advanced students providing feedback, suggestions, and supervision to other students as a means of learning about therapy styles and broadening the therapist's skills and repertoire of interventions.

Students may supervise another student's clinical work under the supervision of CFT faculty. Although the student being supervised may decline to be supervised by a fellow student, it is important to consider both the value of the supervision by a mentor and the fact that all students moving toward the doctorate will, themselves, be required to become a mentor. The student being supervised must continue to meet with an Approved Supervisor or equivalent at least every other week to ensure that the hours of direct client contact are sufficient to meet CFT program, COAMFTE, LMFT, LLMFT, and AAMFT status as a Clinical Fellow requirements.

The following outlines the parameters for supervision by students:

Supervision-of-students by fellow students in the same department is permitted given all of the following conditions: (1) the supervised student is explicitly informed that it is permissible to decline, (2) the supervision is closely supervised by a non-student Approved Supervisor or the equivalent, (3) the supervising student has completed or is presently in a graduate course in family therapy supervision, (4) the supervision time does not count toward COAMFTE supervision hour requirements of the supervised student, and (5) special attention is given to power and privilege in the supervisory relationships involved.

SECTION IX
DISSERTATION

DISSERTATION

Completing the dissertation is intended to be a capstone research experience parallel to the capstone clinical experience of completing the 1,000 direct client contact requirement. The student's advisor/major professor works closely with the student to select an appropriate topic for the dissertation and to develop the literature review and methodology to address the research questions/hypotheses. Input from the guidance committee is needed as well. The advisor and guidance committee members must approve a formal proposal for the dissertation.

The topic for the dissertation must be relevant to the field of CFT. However, this guideline has been interpreted to include topics that incorporate important questions in human development and/or family studies that are applicable to the practice or theory of CFT. A dissertation that answers questions from human development or family studies but does not incorporate the application of the results to marriage and family therapy is not appropriate for a CFT student, however appropriate it might be for a student completing studies in one of those areas. It is important to consider the possibilities for publishing the dissertation as a way of evaluating the potential value of the dissertation research.

In all dissertations in the CFT program, the student is to include a comprehensive discussion of implications for the field of marriage and family therapy. It is also important for students to discuss considerations for diverse populations.

The HDFS Ph.D. Handbook details the dissertation process. Completing a dissertation can sometimes feel isolating or frustrating. Students undertaking a dissertation are wise to join a dissertation support group or a writing group where they can find support and be accountable for their progress.

Completion of the Doctorate

Students have 8 years following admission to complete their doctoral programs; however, the doctorate must be completed within 4 years after passing the comprehensive examination. In general, the CFT faculty expects students entering the doctoral program with a master's in CFT from a COAMFTE-accredited program to finish all course and clinical work, the internship, and the dissertation in 4 years or less. Students entering with master's degrees from other areas will probably require 5 years.

CFT MENTORING AND DISSERTATION GUIDELINES

Your doctoral dissertation is the most important scholarly product that you will generate in your doctoral education. Thus, it should never be a rushed process and must result in a high quality product. The process for generating your dissertation is lengthy and involves several steps. In order to ensure a successful experience and a high-quality dissertation, we strongly encourage you to inform your work according to the following guidelines:

Length of time

From the date of your proposal defense to your final dissertation defense, you should think of a 12-month minimum timeline as in addition to data gathering, analysis, and initial write-ups; a minimum of two complete revisions of your drafts must be completed. Thus, it is critical that you do not provide unrealistic expectations to employers, post-doctoral sites, etc.

Work closely and collaborate with your advisor and dissertation committee

Although faculty are committed to your success, advising is one of many faculty responsibilities. Thus, it is critical for you to work closely with your advisor and dissertation committee in establishing a realistic timeline that will lead to a high quality dissertation. Critical issues must be considered when working with faculty and advisors:

1. Expect a minimum of two complete revisions. Two complete revisions are usually expected for good quality drafts. More revisions will be needed if the quality is poor or there are weaknesses such as not following APA standards.
2. Expect a realistic timeline for chapter revisions. Two to three weeks is a realistic expectation if your drafts have no major weaknesses. Deficient drafts will take longer to revise. Thus, you should submit the best possible drafts to your Major Professor.
3. Advisors are scientific advisors, not editors. Doctoral candidates should be at a high level of writing proficiency by the time they engage in writing their dissertations. Thus, it is your responsibility to thoroughly follow writing guidelines such as APA standards. If possible, it is always a good idea for a professional editor to complete a review of your final draft to ensure high quality of your document. Your advisor can recommend you to engage in professional writing workshops if your writing is not optimal.
4. Ensure that all committee members have a similar understanding and expectations about your final dissertation proposal. Research ideas constantly change and the dissertation ideas you presented to your committee in preliminary meetings may change over time. This is expected and highly common, however, it is critical that you keep all committee members updated on specific details about the dissertation you want to propose. Some committee members will join your committee based on specific content areas and may decide that being part of your committee is not relevant if your proposed content area changes.
5. Triangulation of information is complicated and detrimental to the dissertation process. Please work closely with your advisor so he/she can call for a meeting if your content area changes or significant challenges arise that constitute a challenge to your dissertation project. Grievance procedures are detailed in the HDFS doctoral handbook if your advisor is not helpful or supportive.

6. Do not put advisors in a bind. Sometimes students accept jobs promising completion of dissertations according to unrealistic timelines. Other times, students register for the “last credit” when in reality, their work is deficient. Both are examples of binds to which advisors have to respond and that are very likely to lead them to neglect other responsibilities if they wish to help you. Based on this, you must always consult with your advisor about acceptance of job opportunities and the payment of the last dissertation credit as advisors will not be responsible for consequences of personal decisions reached without their feedback (e.g., not obtaining a job because dissertation was not completed, having to pay for an extra credit due to unrealistic timeline).

IRB can be a complicated process

Particularly if you are proposing a study with high-risk populations (e.g., IPV survivors/perpetrators, prisons, substance abuse), be prepared for your dissertation process to be slowed down due to the IRB process. Projects with high-risk/vulnerable populations are likely to be referred to full board IRB reviews and some projects may even require federal certificates of confidentiality. Your advisors will closely work with you to minimize the impact to your timeline but advisors cannot dictate nor influence IRB actions.

The dissertation is a personal statement

Ultimately, a dissertation is a personal statement of your professional integrity and strengths. Rather than “rushing through the process,” think of your dissertation as the unique opportunity to communicate to others who you are as a professional, as well as the importance of your work. That is why you cannot delegate this process to anyone, but rather, assume initiative and personal responsibility for this work from beginning to end. This is a quality that characterizes highly successful and productive professionals across all fields.

SECTION X
STUDENT EVALUATION OF THE PROGRAM

STUDENT EVALUATION OF THE PROGRAM

Student feedback on both organized courses and clinical supervision is important in evaluating and improving course content and instruction. At the completion of each organized course, students anonymously complete the MSU SIRS (Student Instructional Rating System) forms. SIRS comments and scores are available to the instructor, as well as the Department Chair, who includes them as part of the data for the faculty member's annual evaluation.

At the end of each practicum/internship semester (HDFS 993), students complete MSU SIRS online, as well as an additional supervisor evaluation. The results are shared with the instructor and forwarded to the Program Director who reviews them. The Program Director is responsible for bringing any issues around the supervisor's evaluation to the supervisor, and, if necessary, to the Department Chair. The Department Chair also reviews the evaluation scores and comments as part of the supervisor/faculty member's annual review.

At least annually, the Program Director will call a student meeting at which the CFT student representatives will preside. The purpose of the meeting is for students to raise any concerns or complaints that the student representatives will convey to the Program Director and CFT faculty. A faculty/Program Director response to the issues raised will be provided at a subsequent student-faculty meeting.

SECTION XI
PROFESSIONALISM

PROFESSIONALISM

It is expected that students in the program will develop as professionals.

The availability of social media has changed drastically in the recent years. These sites include Twitter, Facebook, your personal blog, Instagram, and similar sites. These sites have privacy settings but these are not foolproof. The field of couple and family therapy is very small meaning that it is essential that you preserve your reputation. Employers and future colleagues may gain access to your posts or pictures on social media and these could negatively affect your reputation.

Please exhibit the highest standards of professionalism in teaching, research, and scholarship. This includes professional use of email and social media. Remember you represent MSU and HDFS in all interactions, particularly when using your msu.edu email. If you have a problem with program or department faculty or students, please follow the grievance guidelines to address these problems directly. Please do not use social media for these ends. Students who post on social media messages that directly reflect poorly on the program, department, or profession of couple, marital, and family therapy, will be asked to delete the message if faculty are made aware of these posts. A persistent negative posting of this nature could result in an Academic Progress Review.

While each faculty member/instructor sets their own standards on who to connect with and not connect with on social media, it is advisable to err on the side of caution in these considerations. A doctoral program is already filled with multiple dual relationship tensions and a social media relationship may add one more complexity to these relationships.

SECTION XII
PROGRAM POLICY SUMMARY

POLICY AND PROCEDURES SUMMARY TABLE

	<u>POLICY</u>	<u>TIME/PLACE IN PROGRAM</u>
1.	Students work with temporary advisor and Program Director to prepare a preliminary Plan of Study.	By the end of first semester in the Ph.D. program. Student meets with temporary advisor and has tentative program of study reviewed by Program Director.
2.	Students present Program Director with clinical and supervision hours that are to be transferred into the program from master's program. Hours approved and signed by Program Director	By the end of first semester in program. Student submits hours to the Program Director who evaluates both the clinical hours and the supervision provided to determine which, if any, hours will be accepted.
3.	Students who enter the doctoral program without a master's degree from an accredited program in CFT must meet the Commission on Accreditation for Marriage and Family Therapy Education curriculum requirements for the equivalent of a master's degree in CFT	By the end of the first month in the program, student meets with Program Director, goes over master's level transcript, and reviews courses. Program Director prepares a memo stating required make-up courses, if any, required to meet the COAMFTE master's requirements.
4.	<u>AAMFT Membership and Liability Insurance.</u> All students in the program are required to be members (Student, Professional, or Clinical Fellow) of the American Association for Marriage and Family Therapy (AAMFT) to maintain professional liability insurance (or provide proof of such insurance from another source).	All students to submit proof of AAMFT membership and liability insurance to the Program Director by September 30 of each year.
5.	<u>Student Evaluation at the end of First Year:</u> During the Spring term of the student's first year in the CFT program, the student will meet with CFT faculty. The purpose of this meeting is to: (a) evaluate the student's initial progress in the program, (b) determine the degree of fit between the student and the program, (c) confirm that student has identified a permanent advisor reflecting their research interests and begun the process of developing a formal plan of study for the doctorate, (d) examine the	Program Director schedules meeting with student.

	<p>student's progress in taking on clinical work and moving toward a theory of CFT practice, and (e) consider other matters of concern to the student and/or the faculty. Following this meeting, the CFT faculty will provide a recommendation regarding continuation in the program.</p>	
6.	<p><u>Student Evaluations:</u></p> <p>Students will be evaluated regularly on coursework and practicum/internship performance. The Department also requires submission of a student-advisor evaluation of yearly progress, a yearly update on meeting the requirements of the HDFS doctoral portfolio, and, before graduation, a final version of the HDFS doctoral portfolio. This evaluation will be provided in written form and orally by the advisor. Opportunities for informal feedback from faculty will be abundant; however, an appointment with the CFT faculty in response to the written feedback can be scheduled during the Spring semester each year for any continuing students.</p>	<ul style="list-style-type: none"> • Practicum performance is evaluated by clinical supervisor at the end of each semester (spring, summer, fall). Evaluations are discussed by CFT faculty between semesters to learn of student strengths and concerns and to be on the same page in terms of supervisory evaluations. • In the spring semester of each year, each student will complete a portfolio and departmental annual performance review. • At the time portfolio is submitted to the department, student submits an electronic copy of portfolio as well as updated CV (with required information listed on page 3) to the CFT Program Director.
7.	<p><u>Doctoral Comprehensive Examination</u></p> <p>The doctoral comprehensive examination will be taken after the completion of 80% of the student's course work in the Plan of Study (not including dissertation credits) and demonstration of clinical competence to the satisfaction of the CFT faculty. The student must pass each section of the exam</p>	<ul style="list-style-type: none"> • After completion of 80% of coursework, student meets with the doctoral guidance committee to plan and schedule comprehensive exams. • After the comprehensive oral exam, committee members complete the comprehensive exam evaluation form to assess student's oral, written, and knowledge skills.
8.	<p><u>Graduating from the clinic:</u> See form on Minimum Hours in the Clinic (page 35)</p>	<ul style="list-style-type: none"> • Complete form indicating exit from Clinic: Clearance for Exit From Couple and Family Therapy Clinic
9.	<p><u>Graduating from the clinical requirement in the program:</u> 1000 clinical hours complete. At least 500 of these hours relational. 200</p>	<ul style="list-style-type: none"> • Complete form to obtain release from clinical requirement after requirements are complete: Clinical Clearance for Ph.D. Graduation

	hours of supervision, at least 100 individual, and 50 raw data (video/live).	
10.	Internship/Advanced Experience Commencement	<ul style="list-style-type: none"> Complete Internship commencement form (page 79)
11.	Internship/Advanced Experience Completion	<ul style="list-style-type: none"> Complete Internship completion form (page 80)
<u>FACULTY/PROGRAM EVALUATIONS</u>		
12.	<p><u>Course and Supervisor Evaluations</u></p> <p>Student feedback on both organized courses and clinical supervision is important in evaluating and improving course content and instruction. At the completion of each organized course and Practicum, students anonymously complete the MSU SIRS (Student Instructional Rating System) forms which are collected by the HDFS Department and an additional supervisor evaluation form that is collected by the CFT Program Director.</p>	<ul style="list-style-type: none"> Department Chair to discuss SIRS and supervision evaluations with CFT faculty at each annual review period (spring of each year). CFT Program Director discusses supervision evaluations with faculty and makes a plan with the faculty for improvement in areas where the evaluation is weak (occurs after each semester).
13.	<p><u>Program Evaluation</u></p> <p>At least annually, students will meet in a student only meeting to discuss feedback collectively at which the student representatives will preside. The purpose of the meeting is for students to raise any concerns or complaints that the student representatives will convey to the Program Director and CFT faculty. Feedback will be forwarded in writing to the Program Director. CFT faculty will prepare a response communicated to students in a follow up meeting.</p>	<ul style="list-style-type: none"> This meeting will normally be called at the end of the first half of the Spring term (following Spring Break). After the student representatives have compiled the list of concerns/complaints and presented them to the CFT faculty, and after faculty have an opportunity to address them, the Program Director will call a second meeting before the end of term where the CFT faculty as a whole will address the concerns raised.
14.	<p><u>Curriculum Evaluation</u></p> <p>Each year as the fall semester begins, the CFT faculty meet to review the curriculum as to its appropriateness.</p>	<ul style="list-style-type: none"> Each fall semester, the CFT faculty will review the current curriculum based upon feedback from courses, students, and other stakeholders over the course of the past year. Changes will be made to the curriculum as deemed necessary by faculty consensus.

15.	<p><u>The CFT Program Director Review</u></p> <p>The Program Director will be reviewed annually by the HDFFS department chair and students.</p>	<ul style="list-style-type: none"> • The HDFFS department chair solicits feedback from CFT students and faculty and evaluates the program directly annually in the spring.
16.	<p><u>Student and Faculty Roles in Program Governance</u></p> <p>Each fall, two students are elected from among volunteers by the CFT students. Unless the meeting is dealing with evaluations of other students or assignment of assistantships or confidential issues, the student representatives attend CFT faculty meetings in an advisory role. The student representatives are free to transmit the meeting discussions to the rest of the CFT students. When student meetings are held to hear program issues, the student representatives preside and summarize the issues raised. These issues are presented and discussed at the CFT faculty meetings with the student representatives.</p>	<ul style="list-style-type: none"> • Each fall semester, two students will be elected by the student body by means of online balloting. These students will attend all CFT faculty meetings (non-confidential), will run student-only meetings, and will serve as liaisons between students and faculty.
17.	<p><u>Policy for Annual Review of Program Policies, Manuals, and the HDFFS Ph.D. Handbook.</u></p>	<ul style="list-style-type: none"> • Each summer the Program Director will review and revise the Program Manual and Program Policies. The Clinic Director will review and revise the Clinic Manual. Any changes will be highlighted and discussed with the CFT faculty at the fall retreat. Changes will be made based on this feedback.
18.	<p>Each year at the fall retreat, CFT faculty will review the following:</p> <ol style="list-style-type: none"> 1) Achievement on student learning outcomes 2) Student/graduate achievement 3) Fiscal and physical resources 4) Technological resources 5) Instructional and clinical resources 	<ul style="list-style-type: none"> • The Program Director will prepare a list of these items, any concerns, and they will be discussed as a group at the Fall CFT faculty retreat. Action will be taken when necessary by faculty consensus. • Requests for additional funding or for physical resources (e.g., Clinic space, research space) identified at the fall retreat or throughout the year go through the HDFFS Department Chair. They may be able to provide the

	<p>6) Academic resources and student support services</p> <p>7) Inclusive and diverse learning environment</p> <p>8) Faculty and supervisor sufficiency in supporting program effectiveness</p> <p>9) Financial, supervisory, and research support to all students and those from diverse backgrounds</p>	<p>resource directly or may request the resource from the College or University. The CFT Program manages the Clinic budget through the Program Director and Clinic Director. Fiscal management of the Department is delegated from the Provost's Office to the College of Social Science to the HDFS Chair. Management of the physical space controlled by the Department is delegated to the Department Chair. In addition to office space, research space is available on the ground and 4th floors of the Human Ecology Building; research space is also managed by the Department Chair.</p> <ul style="list-style-type: none"> • Request for additional faculty lines must be negotiated with the department chair and the dean of the college.
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APPENDICES

(CFT SPECIFIC; for all other forms see the HDFS Ph.D. manual or the D2L clinic site)

1. **HDFS Comprehensive Examination Rubric**
2. **CFT Oral Comprehensive Examination Description**
3. **Internship Proposal and Approval Form**
4. **Clearance for Ph.D. Graduation**
5. **Clearance for Exit from Couple and Family Therapy Clinic**
6. **Informed Acknowledgement of MFT Licensure and Regulatory Requirements Form**

HDFS Comprehensive Exam Rubric & Procedures

Theory/Content Comps Rubric - Range = 0 (Does Not Meet); 1 (Partially Meets); 2 (Meets)

- Appropriately integrate relevant literature, demonstrating depth of understanding through appropriate citation (2 points)
- Identify and describe the key theoretical frameworks related to a research topic (2 points)
- Appraise the quality and rigor of the empirical body of knowledge related to a research topic (2 points)
- Synthesize findings across the body of knowledge to identify gaps and recommend future directions in research and/or theory (2 points)
- Scientific Writing (2 points)
 - Clarity and Persuasive Writing (organization and coherence) (1)
 - Correct Writing Format and APA (accurate use and reference of information; unbiased language) (1)

Requirements: Passing = 7 and above; Students who receive a zero on any category will need to re-write their comprehensive exam response.

Methods Comp Rubric

- Demonstrate a strong understanding of study design, quality, and rigor. Show critical thinking about research methodology by either appraising quality of research, or explaining and justifying methodological choices. (8 points)
- Scientific Writing (2 points)
 - Clarity and Persuasive Writing (organization and coherence) (1)
 - Correct Writing Format and APA (accurate use and reference of information; unbiased language) (1)

Requirements: Passing = 7 and above; Students who receive a zero on any category will need to re-write their comprehensive exam response.

Oral Comps Rubric

- Apply topic of study using the appropriate theory and/or methods identified in the first two comprehensive exam questions. Examples include a teaching plan, case study, or other applied approach. (6)
- Presentation – Information is confidently presented, Student is able to answer questions posed, fully supporting each decision made. (2)
- Visual Information – Presentation is visually appealing, well-designed; and appropriate in length. (2)

Requirements: Passing = 7 and above; Students who receive a zero on any criterion from at least one committee member will need to re-write their comprehensive exam response.

Procedures: Each committee member independently scores each exam, and submits scoring form rubric to the Committee Chair. The Committee Chair submits all forms to the Graduate Secretary each time the student takes the exams. If students must re-take any part of the exams, the Committee Chair submits the original set of forms as soon as it is determined that the student has a failing score, followed by a new set of forms with scores for the revised portion/s of the exam. Once the student passes the written exams, wait until the oral exam is completed to submit the forms, then submit immediately, regardless of pass/fail.

Approved by HDFS faculty, March 18, 2022

HDFS Comprehensive Exam Scoring Form

Student: _____

Reviewer: _____

Date of Scoring Written Exam: _____

Theory/Content Comprehensive Exam Question	Does Not Meet = 0	Partially Meets = 1	Meets = 2
Appropriately integrate relevant literature, demonstrating depth of understanding through appropriate citation			
Identify and describe the key theoretical frameworks related to a research topic			
Appraise the quality and rigor of the empirical body of knowledge related to a research topic			
Synthesize findings across the body of knowledge to identify gaps and recommend future directions in research and/or theory			
Scientific Writing			
Totals			

Comments:

Methods Comprehensive Exam Question	Does Not Meet = 0-4	Partially Meets = 5-6	Meets = 7-8
Demonstrate a strong understanding of study design, quality, and rigor. Show critical thinking about research methodology by either appraising quality of research, or explaining and justifying methodological choices.			
	Does Not Meet = 0	Partially Meets = 1	Meets = 2
Scientific Writing			
Totals			

Comments:

Date of Scoring Oral Exam: _____

Oral Comprehensive Exam Question	Does Not Meet = 0-2	Partially Meets = 3-4	Meets = 5-6
Apply topic of study using the appropriate theory/content and/or methods identified in the first two comprehensive exam questions. Examples include a teaching plan, case study, or other applied approach.			
	Does Not Meet = 0	Partially Meets = 1	Meets = 2
Presentation			
Visual Information			
Totals			

Comments:

CFT Oral Comprehensive Examination

The oral exam needs to be scheduled for two hours.

The oral examination for CFT students will involve a 120-minute examination process with your committee. In this examination, students will accomplish several outcomes related to their role in the HDFS department in general and the CFT concentration specifically.

- A. Provide the student the opportunity to formally present and discuss applications appropriate to the CFT concentration area. *For this, CFT students will present a review of their clinical theory of therapeutic change (details provided below).*
- B. Extend the evaluation of the student's knowledge and understanding covered in the two written exams. Emphasis may be placed on areas considered weaknesses.
- C. To consider the student's ability to respond in an articulate manner to verbal questions.
- D. To extend discussion beyond content covered in the written exams.

General Theory of Change Presentation

This will be presented in a PowerPoint format and will include de-identified case information to illustrate the student's theoretical framework in real life cases. No real life video examples will be allowed although students may use role-play or other video types to illustrate their concepts. For accreditation purposes, the committee will utilize the rubric attached to evaluate your presentation.

The following questions can be used to guide the development and presentation of your theory.

- Who are the leading figures you draw from in your approach?
- What are the major building blocks of your theory?
- How does your theory view symptoms?
- What are assessment strategies?
- What are the goals of your theory?
- What is your view of human nature?
- What is the role of the therapist?
- How does assessment occur?
- What are major techniques or interventions?
- How does the approach propose to help clients/families to change?
- How do you go about integrating your theory?
- If you integrate theories, how do you deal with inconsistencies in theories you are bringing together in terms of philosophical assumptions?
- How do you include evidence-based practices in your work?
- How do you implement your theory with diverse couples and families?

The examination will follow a strict format:

- 1) First 5 minutes – student is introduced to the group by the committee chair
- 2) Next 40 minutes, student will present and illustrate their theory of therapy
- 3) Next 10 minutes will allow the audience (non-committee) to ask any questions related to the presentation. After this, any non-committee audience members will be excused.

- 4) Next 15 minutes, student will be asked questions by examining committee in relation to presented theory of therapy.
- 5) After this, the committee will use the next 40 minutes to ask questions about weaknesses and omissions identified in the written comprehensive exams.
- 6) After these questions have been satisfied, the student will be excused while the committee confers.
- 7) The results of the entire comprehensive exam process will be communicated to the student after he/she is invited back into the room.

Internship Experience Proposal and Approval Form

Doctoral Program in Couple and Family Therapy
Department of Human Development and Family Studies
Michigan State University

Student Name: [Click here to enter text.](#)

Internship Experience Number (you need two experiences):

Internship Site Name: [Click here to enter text.](#)

Internship Supervisor: [Click here to enter text.](#)

Internship Description:

[Click here to enter text.](#)

Internship Purpose:

[Click here to enter text.](#)

Internship Outcomes/Objectives and Deliverables:

[Click here to enter text.](#)

Supervision Plan (describe how often you should meet with your supervisor):

Internship Evaluation Criteria:

[Click here to enter text.](#)

*This form must be signed by all individuals indicated below, and copies must be submitted to the CFT

Program Director. This must be done **PRIOR** to starting the internship.*

Please attach the following: (1) Your internship supervisor's **vita (if not a HDFS faculty)**, and (2) (if doing a clinical internship) proof of your internship supervisor's **AAMFT Approved Supervisor status** (or equivalency).

I have reviewed the proposed internship and hereby agree to the criteria, goals/objectives and evaluation process. I further give my permission for the student to complete this internship in partial fulfillment of the requirements of the doctoral degree in Human Development and Family Studies, concentration in CFT.

Student

Date

Committee Chair

Date

Program Director

Date

Internship Site Supervisor

Date

Internship Completion Form
Doctoral Program in Couple and Family Therapy
Department of Human Development and Family Studies
Michigan State University

Student Name: [Click here to enter text.](#)

Internship Site Name: [Click here to enter text.](#)

Internship Site Supervisor: [Click here to enter text.](#)

Date Internship started:

[Click here to enter text.](#)

Date Internship ended:

[Click here to enter text.](#)

Brief evaluation of internship experience:

[Click here to enter text.](#)

This form must be signed by all individuals indicated below, and copies must be submitted to the CFT Program Director. This must be done immediately following the completion of the internship.

Please attach the following: (1) Your internship supervisor's **vita**, and (2) (if doing a clinical internship) proof of your internship supervisor's **AAMFT Approved Supervisor status** (or equivalency).

The student has completed all requirements for internship as described in the internship proposal.

Student

Date

Committee Chair

Date

Program Director

Date

Internship Site Supervisor

Date

Clinical Clearance for Ph.D. Graduation

NAME has completed the clinical requirements as set forth as part of this COAMFTE-Accredited Marriage and Family Therapy Program. They have completed *at least 1,000 client hours*. They have also completed the required number of supervision hours, with appropriate live and individual hours.

They are now clinically approved for graduation as of _____.
DATE

Student Name

Student Signature

Clinic Director Name

Clinic Director Signature

Program Director Name

Program Director Signature

For Paperwork and Hours Verification:

Clinic Coordinator Name (paperwork verification)

Clinic Coordinator Signature

Clearance for Exit from Couple and Family Therapy Clinic

NAME has completed the required time in the CFT clinic as set forth in the CFT Program Manual. All students are required to complete *at least 1,000 client hours to graduate*. They have also have to complete the required number of supervision hours, with appropriate live and individual hours. Graduation from the CFT clinic is endorsed by this form. However, this does not mean that clinical requirements for graduation are completed. In order to verify your clinical requirements for graduation, please complete the form titled **Clinical Clearance for Ph.D. Graduation**

Student Name

Student Signature

Clinic Director Name

Clinic Director Signature

Program Director Name

Program Director Signature

For Paperwork and Hours Verification:

Clinic Coordinator Name (paperwork verification)

Clinic Coordinator Signature

**Informed Acknowledgement of MFT Licensure and Regulatory Requirements
Michigan State University
Couple and Family Therapy Program**

Marriage and Family Therapy is a profession that leads to licensure in all 50 states; however, each state has its own law and regulations about what is needed to become licensed as a MFT in that state. This means that licensure requirements, including qualifying degree requirements, vary by state. Information about the licensure requirements for each state can be found at the following links:

- [AAMFT MFT State/Provincial Resources](#)
- [State Licensure Comparison – AMFTRB](#)

The curriculum for the Couple and Family Therapy (CFT) doctoral program at Michigan State University was designed to align with the MFT licensure requirements in the state of Michigan. You can find more information about the state requirements for MFT licensure in Michigan at the following link:

https://www.michigan.gov/documents/lara/Marriage_and_Family_Therapist_Licensing_Guide_2020_699826_7.pdf. Further information can be obtained from the [Michigan Board of Marriage and Family Therapy](#) website or by contacting BPLHelp@michigan.gov.

If you have questions about the program’s alignment with professional licensure you may contact the Acting Program Director: Dr. Kendal Holtrop at holtropk@msu.edu.

The Commission on Accreditation for Marriage and Family Therapy Education requires that this information be provided to students and acknowledged in writing, prior to students beginning a program’s course of study.

Please sign and return this acknowledgement form as an attachment to your acceptance email. It is recommended that you keep a copy of this form for your records.

I acknowledge that I have been informed and am aware that licensing regulations differ across states and provinces. I understand that the MSU CFT program is designed to align with licensure requirements in the state of Michigan, and that a degree from this program may not meet MFT licensing requirements in a different state.

Printed Name

Signature (may be electronic)

Date