University of Alabama
MFT Program Handbook

Marriage and Family Therapy Concentration

Department of
Human Development & Family Studies

University of Alabama
Tuscaloosa, Alabama

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Introduction

Welcome and Congratulations on your continued academic success!

Graduate school represents a new educational experience, and students are faced with a large amount of complex information. The UA MFT Program Handbook describes expectations from the point of admission to degree completion and provides information about the program’s policies and procedures. Although every effort has been made to provide accurate information throughout this handbook, the enclosed materials are minimal guidelines toward a comprehensive and integrated educational program. Therefore, students may receive educational and training materials while enrolled in the program beyond those covered in this handbook. It is important that students work closely with, as well as, direct personal and educational questions to the MFT Program Director.

All students receive a copy of the UA MFT Program Handbook upon entrance to the program. An electronic version of the Handbook is provided to students on the program’s website.

It is important for you to be familiar with this handbook and to review it periodically as it is your responsibility to ensure that you are meeting all requirements for continued progress and graduation.
SECTION I: UA MFT PROGRAM OVERVIEW
MFT Program Mission and Overview

MFT Program Mission
The Marriage and Family Therapy Graduate Program at the University of Alabama will prepare students to become licensed Marriage and Family Therapists that are trained in relational/systemic and evidenced-based models and theories, with a strong focus on adopting developmentally appropriate, culturally informed, ethically-aligned practices in working with diverse populations.

Program Overview
The Master of Science in Human Development and Family Studies (HDFS) with a concentration in Marriage and Family Therapy (MFT) at The University of Alabama (UA) is designed to provide students with the basic knowledge, skills, and professional identity essential to the practice of marriage and family therapy. Our goal is to train students who will function as marriage and family therapists at the highest level of clinical competence, and who also are capable of making unique contributions to the field of marriage and family therapy through research, teaching, and other activities extending beyond helping particular clients. The University of Alabama is committed to the principle that in no aspect of its programs shall there be differences in the treatment of persons because of race, creed, national origin, sexual orientation, age, sex, or disability, and that equal opportunity and access to facilities shall be available to all.

Students in this program will be involved in an educational experience that will qualify them to practice in controlled settings, while continuing education, personal growth, and professional experiences accumulate. Consistent with the guidelines established by the Alabama Board of Examiners in Marriage and Family Therapy (ABEMFT), the curriculum includes coursework in human development, marital and family studies, marriage and family therapy, professionalism and ethics, research and statistics, and supervised practicum. The program emphasizes parallel development in the areas of clinical skills, self-awareness, and the establishment of an integrated systemic approach to marriage and family therapy, with a progressive synthesis of the three areas as the student develops basic competence in each area.

Students are required to follow an organized sequence of study, in which concurrent academic and practicum coursework are integrated. The faculty does not teach or adhere to a single theory, school or approach to couple, marriage, and family therapy. Rather, students are exposed to a broad range of marriage and family therapy and evidenced-based models. Throughout the program, students are encouraged to develop their own systemic approach to treatment. The process of developing proficiency as a marriage and family therapist is viewed as an ongoing integration of growing awareness and development of self, growing skillfulness in the application of various therapeutic methods, and growing knowledge and understanding of individual/family dynamics, diverse family forms, problems, resources and possibilities for change.

The UA Marriage and Family Therapy Program allows students to apply for Clinical Membership in the American Association of Marriage and Family Therapy (AAMFT) and licensure in the state of Alabama, and most other states’ MFT licensure (some states require additional coursework due to unique requirements), after they have completed the required number of post-graduate hours practicing family therapy. It is the student’s responsibility to explore licensure in the state she/he plans to practice Marriage and Family Therapy given that licensure requirements change from time to time, and differ from state to state.
Upon completion of the Marriage and Family Therapy concentration, we expect the student to have achieved competence as defined by the Program Goals and Student Learning Outcomes. We believe marriage and family therapy as a profession is in a unique position to advance our understanding of the human condition. The social and behavioral sciences have turned increasingly to the study and recognition of the importance of the family in its impact on societal problems ranging from behavior problems in children to depression and alcoholism in adults. Unfortunately, much of the academic work on these problems has been undertaken by those with little direct clinical experience and understanding of families and social context. On the other hand, the field of marriage and family therapy has developed with too little attention to establishing the validity of its theoretical base and clinical wisdom by a body of competent research findings.

The MFT 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. The faculty views the academic and clinical portions of our program as equally important. Clinical training must proceed from a solid understanding of child development, adult development and aging, and marriage and family processes. The UA MFT Program emphasizes the integration and application of clinical practice, academic, and research for supporting individuals, couples, and families.

**Licensure in Marriage and Family Therapy**

The UA MFT Program meets all educational and clinical requirements for applying for licensure as a Marriage and Family Therapy Associate (MFT-A) in the state of Alabama. Students graduating with a M. S. in HDFS with a concentration in MFT are required to complete 500 direct client contract hours of therapy (including at least 250 hours with couples or families). The total hours are comprised of hours accumulated in clinical work at the UA Capstone Family Therapy Clinic (CFTC) and approved off-site community placements. Students are encouraged to visit the Alabama Board of Examiners for Marriage and Family Therapy (ABEMFT) Board website to learn more about MFT licensure guidelines: [http://mft.alabama.gov/](http://mft.alabama.gov/).

Because licensure is regulated by individual states, it is possible that a state other than Alabama may have additional requirements not provided as part of the standard UA MFT Program educational and clinical requirements. The following resources are available to students considering licensure in other states:

- Listing of state licensure requirements: [https://amftrb.org/resources/state-licensure-comparison/](https://amftrb.org/resources/state-licensure-comparison/)
- AAMFT link to state licensing boards: [https://aamft.org.Directories/MFT_Licensing_Boards.aspx?WebsiteKey=8e8e9bd6-0b71-4cd1-a5ab-013b5f855b01](https://aamft.org.Directories/MFT_Licensing_Boards.aspx?WebsiteKey=8e8e9bd6-0b71-4cd1-a5ab-013b5f855b01)

Per the UA MFT Program Degree Portability Acknowledgement, The Program will notify students of licensure variation across states and provide resources for accessing each state’s licensure requirements (students will sign UA MFT Program Degree Portability Acknowledgement Form before entering the program).

After MFT-As receive additional supervised training by an approved supervisor during a clinical residency period, alumni may be eligible to apply for a Licensed Marriage and Family Therapist
(LMFT) in Alabama. Individuals must pass the national licensure examination (Marriage and Family Therapy National Examination; www.amftrb.org) in order to receive the LMFT license.

In Alabama, full licensure as an MFT requires 1000 hours of face-to-face therapy (including at least 250 relational), beginning only after the granting of the Associate License. While other states’ requirements differ, AAMFT requires full state licensure for Clinical Fellow Membership. Students enrolled in the UA MFT master’s degree program are strongly encouraged to take the national licensure exam as soon as possible after graduation (even if you plan to seek licensure in another state) and apply for the MFT-A (associates license) as soon as the degree is conferred. The UA MFT program is not designed to meet the requirements for licensure in other professions (e.g., licensed professional counselor; LPC).
Program Goals, Student Learning Outcomes, and Targets

The UA MFT faculty have identified a list of Program Goals, Student Learning Outcomes, and Targets believed to facilitate competent and sound practice for new professionals in the field of Marriage and Family Therapy. The activities, assignments, and learning experiences in courses throughout the program are focused on assisting students in the development of these fundamental competencies. The competencies are listed below by domain.

**Program Goal #1 (Knowledge): Students will learn to operate from a systems/relational, developmentally appropriate, and science-informed perspective.**

SLO #1: Students will demonstrate knowledge of operating from a systems/relational, developmentally-appropriate, and science-informed perspective with individual, couple, and family clientele.

TARGET: 90% of cohort will receive a mean score of 4.0 (of 6) on the four-items included in Question #4 of the Final Student Evaluation.

**Program Goal #2 (Practice): Students will be prepared to apply a systems/relational, developmentally-appropriate, and science-informed orientation to the assessment and treatment of clients.**

SLO #2: Students will demonstrate effective systems/relational, developmentally-appropriate, and science-informed assessment and treatment of individuals, couples, and family clientele.

TARGET: 90% of cohort will receive a mean score of 4.0 (of 6) on the four-items included in Question #6 of the Final Student Evaluation.

**Program Goal #3 (Diversity): Students will understand the intersection of cultural/contextual factors and application to clinical practice.**

SLO #3: Student will demonstrate knowledge and application of the intersection of cultural/contextual factors to clinical practice.

TARGET: 90% of cohort will receive a mean score of 4.0 (of 6) on the four-items included in Question #8 of the Final Student Evaluation.

**Program Goal #4 (Ethics/Professional Identity): Students will be prepared to apply appropriate systemic/relational ethics and relevant laws and legislation to clinical practice, and assume a professional identity as a Marriage and Family Therapist.**

SLO#4: Students will demonstrate knowledge and application of AAMFT Code of Ethics, and relevant laws and legislation.

TARGET: 90% of the cohort students will receive a mean score of 4.0 (of 6) on the two corresponding items included in Question #10 of the Final Student Evaluation.
SLO #5: Students will demonstrate an identity of a professional Marriage and Family Therapist. 90% of the cohort students will receive a mean score of 4.0 (of 6) on the two corresponding items included in Question #10 of the Final Student Evaluation.

*Program Goal #5 (Research)*: Students will be prepared to consume the Marriage and Family Therapy research and evidence-based practice literature and apply research to clinical practice.

SLO #6: Students will demonstrate comprehension and application of relevant research to clinical practice.

TARGET: 90% of cohort will receive a mean score of 4.0 (of 6) on the four-items included in Question #12 of the Final Student Evaluation.
MFT Faculty Roles and Responsibilities

There are currently two core MFT faculty members in the HDFS department at UA (Program Director and Director of Clinical Training). The MFT faculty will teach the majority of courses (including all the didactic clinical courses) and provide the majority of clinical supervision. Core faculty provide instruction to students in accordance with the objectives listed in the syllabus. The following details the roles of the Program Director and Director of Clinical Training.

MFT Program Director
The Program Director, a core MFT Program faculty member who provides year-round program direction, is responsible for: 1) oversight of all aspects of the program, including management of the outcome-based education framework, assessment activity, curriculum, facilities, student services, and program maintenance/enhancement; 2) Program adherence to MFT mission through achievement of Program Goals and Student Learning Outcomes; 3) Program’s compliance with MFT State of Alabama licensure law, and maintaining and/or achieving COAMFTE accreditation standards.

MFT Program Director Responsibilities

Outcome-Based Education Framework
- Coordinate assessment of Program Goals/Student Learning Outcome data
- Coordinate review of Program Goals/Student Learning Outcome data for program maintenance/enhancement for program maintenance/enhancement
- Coordinate evaluation of Outcome-Based Education Framework and its assessment plan

Assessment
- Coordinate assessment/review of data regarding Program inclusive and diverse learning environment to inform program maintenance/enhancement
- Coordinate assessment/review of data regarding Program environmental resources and student supports to inform program maintenance/enhancement
- Coordinate assessments/review of data regarding Program Director/Director of Clinical Training effectiveness to inform program maintenance/enhancement
- Coordinate all semester evaluations of supervisors and students/review of data to inform program maintenance/enhancement
- Coordinate Alumni Survey to inform program maintenance/enhancement
- Coordinate feedback surveys from Community of Interests

Curriculum
- Coordinate course content and sequencing
- Coordinate new course development

Facilities/Website
- Coordinate (with Director of Clinical Training) Capstone Family Therapy Clinic facilities needed to enhance clinical training/services provided
- Coordinate maintenance of the MFT Program website
Student Services
- Coordinate communication of available student services

Program Governance
- Coordinate weekly MFT core faculty meetings
- Coordinate cohort representative selection
- Coordinate process for responding to cohort representative concerns

Academic Oversight
- Coordinate recruitment, admissions, and retention efforts
- Coordinate interview and acceptance processes of applicants for entrance into the MFT Program
- Respond to regular inquiries from prospective MFT Program graduate students
- Receive and distribute messages to students regarding training opportunities, and other pressing matter
- Function as the academic advisor for students in the MFT Program.
- Meet with all MFT graduate students to coordinate their programs of study, off-site placements, and graduation plans
- Coordinate grading of comprehensive exams

Accreditation
- Coordinate accreditation of UA MFT program with UA administration
- Correspond with Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) to address the accreditation process/concerns
- Coordinate preparation and submission of annual reports
- Coordinate Self Study and accreditation site visits
- Coordinate the tracking of accreditation related data

Capstone Family Therapy Clinic (CFTC)
- Coordinate with the Director of Clinical Training on the following responsibilities
  - Manage clinic finances
  - Coordinate supervision of graduate and undergraduate students in the clinic
  - Maintain Clinic data base and address issues related to service delivery
  - Update and enforce CFTC policies and procedures manual
  - Coordinate community initiatives (e.g., internship placements), outreach, and networking.
  - Assists with clinic emergencies and client concerns
  - Maintain compliance with ethical and professional standards of client care

Department, College and University Interaction
- Liaison with the HDFS Department Chair
- Serve as MFT liaison with College and Graduate School
- Respond to immediate needs from Department, College or University
National and State Interaction

- Participate in AAMFT program director’s listserv
- Lead national and state representation at conferences

MFT Program Director of Clinical Training

The UA MFT Director of Clinical Training (DCT), a core MFT Program faculty member, is responsible for overseeing the services provided within the scope of the CFTC to meet appropriate ethical, legal, and competent service standards. The DCT is responsible for the clinic maintaining economic viability, and for the services provided being consistent with the policies of the MFT program and greater HDFS department. The DCT approves all activities to be conducted in the clinic on the basis of meeting the stated requirements.

The DCT is responsible for all clinic activities in the CFTC not otherwise specified. The DCT and ultimately, the MFT Program Director, can authorize changes or waivers of student responsibilities in the clinic. The DCT, in conjunction with the MFT faculty, is responsible for maintaining the clinic facilities upkeep and planning toward growth or development of the facilities, services provided, or staffing and resource needs to meet said growth and development.

Director of Clinical Training Responsibilities

The DTC functions as the CFTC Clinic Director, and is the primary point of contact for issues related to clinic operation, clinical issues, and internship/externship issues. The Clinic Director works closely with the Program Director and all program Faculty to ensure the UA CFTC functions to support achievement of Program Goals and SLOs. Responsibilities of the UA MFT Director of Clinical Training include:

Capstone Family Therapy Clinic Director

- General CFTC operations
  - Maintain CFTC recording equipment and clinic facilities
  - Update and maintain the CFTC Policies & Procedures Manual
  - Train incoming students on clinic policies and recording equipment
  - Address student concerns when primary faculty supervisor is unavailable
  - Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists
  - Address all legal inquiries and communications from clients within the CFTC
  - Work with University Office of Counsel on legal inquires
  - Maintain operations of the video/audio recording system and database
- Clinic Finances
  - Track clinic income and expenditures
  - Deposit clinic fees/process account transfers
- Staff Management
  - Case assignment/intake scheduling
  - Maintain database to track student hours
  - Maintain client records/scanned files
  - Monitor therapy rooms/supplies forms
  - File scanning and storage
  - Facilitate student clinical manager position along with Program Director
  - Special projects as assigned
• Database Management
  o Maintain software for client file management
  o Maintain the clinical assessment/research database
• Off-Site Placement Coordination
  o Facilitate student placements
  o Process internship documentation
  o Maintain contact with site/agency contact
  o Provide clinical supervision as assigned
• Clinic Development and Community Liaison
  o Public Relations/Marketing/Community outreach and networking
    ▪ Participate in health fairs, campus resource events, and other community events
    ▪ Update and coordinate outreach and placement of promotional materials
      • Distribute to referral sources and attend local organizational meetings
      • Assess and expand current and new referral sources

Program Maintenance/Enhancement
• Attend weekly MFT Program faculty meetings to address Program concerns
• Participate in the review of application for admission, the interview for admissions process, and the selection of students for the program.
• Be available and open to hearing concerns or suggestions from students and communicating the concerns or suggestions to the program faculty as a whole
• Participate in the grading of comprehensive exams
• Participate in regular data review of program goals, student learning outcomes, resources, teaching/learning practices, and curriculum to inform program improvement

Current MFT Program Core Faculty
Blake Berryhill, Ph.D., LMFT is a graduate of the COAMFTE accredited Ph.D. program at Kansas State University. Dr. Berryhill came to UA in 2015 and is an Alabama Licensed Marriage and Family Therapist and AAMFT Approved Clinical Supervisor. His research interests include focus implementation and dissemination of mobile health technologies (Telemedicine) for the prevention and treatment of mental health symptomology in rural schools. Additionally, he examines the interrelationship between adolescent and emerging adult family functioning, self-compassion, and mental health outcomes. Dr. Berryhill serves as the UA MFT Program Director.

Dr. Berryhill's Instructional Qualifications
• Graduated from COAMFTE-accredited master’s and doctoral programs specializing in relational/systemic therapy.
• Taught in a relational/systemic master’s program for at least six years.
• Expertise teaching core relational/systemic theories, ethics, and techniques.
• Achieved the highest relational/systemic level of licensure available within their state
• Achieved the AAMFT approved supervisor credential
• Engaged in training and experience related to relational/systemic/evidence-based treatment of children (e.g., play therapy, trauma), adolescents (trauma, mental illness), adult trauma and mental illness, couple therapy, psychopathology, ethics, and teletherapy
• Engaged in training and practice for working with diverse population in various contexts (e.g., medical setting, schools, etc.)

Karly Downs, Ph.D., LMFT, is a graduate of the COAMFTE accredited Ph.D. program at Michigan State University and is an Alabama Licensed Marriage and Family Therapist and AAMFT Approved Clinical Supervisor. Dr. Downs is also the Vice President of the Alabama Board of Examiners in Marriage and Family Therapy. Dr. Downs came to UA in 2015. She specializes in working with anxiety, depression, and addictions, and has experience both in the academic and private practice fields. Dr. Downs serves as the UA MFT Director of Clinical Training.

Dr. Down’s Instructional Qualifications

• Graduated from COAMFTE-accredited master’s and doctoral programs specializing in relational/systemic therapy.
• Taught in a relational/systemic master’s program for at least six years.
• Expertise teaching core relational/systemic theories, ethics, and techniques.
• Achieved the highest relational/systemic level of licensure available within their state
• Achieved the AAMFT approved supervisor credential
• Engaged in training and experience related to relational/systemic/evidence-based treatment of substance abuse, couple therapy, family therapy, issues related to sexual dysfunction/sexuality, and adult trauma and mental illness
• Engaged in training and experience working with diverse clients in various contexts (e.g., substance abuse treatment centers, in-patient settings, outpatient mental health clinics)

MFT Program Clinical Supervisor Roles and Responsibilities
A “Clinical Supervisor” designation must be made by the Program Director in conjunction with the core MFT faculty. This designation must be carried in order to provide CFTC services, supervise student clinicians operating in the CFTC or otherwise have access to view or to provide services, training or supervision within the scope of the CFTC clinic operations. CFTC Clinical Supervisors must demonstrate the following qualifications:

• Demonstration of professional identity as a marriage and family therapist
• Demonstration of training in MFT relational/systemic supervision by one of the following
  o A graduate course in MFT relational/systemic supervision equivalent to three semester-credit hours
  o Postgraduate professional education in MFT relational/systemic supervision of at least 30 clock hours
  o A state established MFT supervisor designation that includes relational/systemic supervision training
  o Designation as an AAMFT Approved Supervisor or AAMFT Approved Supervisor Candidate
The faculty of the UA MFT Program are dedicated to a model of program governance that is collaborative where possible and honors the voices of all the program faculty, supervisors, and students. In almost all cases, decisions about program governance are made through program faculty consensus, with input from students and stakeholders. Students participate in the governance of the program through providing input to cohort representatives (who then communicate concerns to MFT core faculty during faculty meetings), completing surveys, and providing direct feedback/requests to faculty.

**Program Faculty Governance Responsibilities**

The program core faculty are expected to take active roles in the ongoing governance of the program. Although the Program Director and Director of Clinical Training have specific coordination roles, all the faculty have an equal voice in the governance of the program. Wherever possible, decisions about teaching/learning practices, curriculum, clinical training, supervision, hiring, admissions, allocation of resources, and student issues are made by consensus of the program faculty. Governance responsibilities of the program faculty include:

- Attend and participate in weekly MFT faculty meetings
- Participate in the review of application for admission, the interview for admissions process, and the selection of students for the program
• Be available and open to hearing concerns or suggestions from students and communicating the concerns or suggestions to the program faculty as a whole
• Participate in regular review of program goals, student learning outcomes, resources, teaching/learning practices, and curriculum to inform program improvement

Cohort Representatives
One student from each cohort will be elected (by the members of their cohort) to serve as a cohort representative. Student representatives serve for a minimum period of one academic year. Cohort representatives will attend MFT weekly faculty meetings and communicate feedback, concerns, suggestions, and questions to the meeting from the members of their cohort.

Students
Students have an active role in the governance of the program. There are three mechanisms by which students can be directly involved in the governance of the program:
• Communicate concern to cohort representative: Student representatives from each cohort formally meet with MFT faculty to share program suggestions or concerns with the program faculty.
• Meet with MFT Program faculty directly: Students are encouraged to individually meet with Program Faculty to share suggestions or concerns about the program.
• Offer honest, considered feedback on evaluation surveys. Surveys are intended to be an opportunity for students to provide feedback on the Program.

Process for Responding to Student Program Suggestions/Concerns
The following is the process for addressing student program concerns:
• Cohort Representative Concern: Following concerns raised by the cohort representatives during faculty meetings, the Program Director will email a response to the students within 24-hours of the faculty meeting.
• Individual Meetings with MFT Faculty: Students who share program ideas/suggestions/concerns individually with MFT faculty will be discussed by MFT faculty during faculty meetings. The Program Director will respond to the concern appropriately with one of the following: 1) meeting with the individual student (via meeting); 2) an email to all students; 3) during the monthly MFT student meeting.
• Evaluation Surveys: Program faculty will review data for identifying ways to enhance the program. Data and subsequent changes will be presented during a Fall MFT student meeting.
SECTION II: DEGREE REQUIREMENTS
Program Components & Degree Requirements

Following admission to the program, the MFT Program Director will provide academic advising for all incoming MFT students. Students must conform to the rules of the graduate school at The University of Alabama as reflected in the current UA Graduate Catalog (https://catalog.ua.edu/graduate/). Students should be registered for the number of hours that reflects the extent of their involvement in the graduate program. Students holding assistantships or scholarships must be enrolled for the appropriate number of hours each semester (including summer sessions).

Degree Completion Timeline
Students typically complete their M.S. degree in an average of two-years. The normal course load for MFT students is 9-12 hours in the Fall/Spring semesters and 9 hours in the Summer term. The UA Graduate School states that students have a maximum of six years to complete their degree.

Degree Completion Requirements
In order to graduate with the Master of Science in HDFS with a concentration in Marriage and Family Therapy, the following minimal requirements must be satisfied:

- Completion of required 51 credit hours in residence within a six-year timeframe following the first semester registered in the program (See UA MFT Program Curriculum Requirements & Sequencing).
- Completion of all required coursework with a cumulative B average (3.0 GPA) or better.
- Completion of 500 direct client contact hours, with 250 of these hours being relational (with couples and families).
- Completion of 100 clinical supervision hours, with 50 hours observable data (e.g., video recordings; live supervision).
- Passing of the MFT Program Comprehensive Exam (see Comprehensive Examination).

Alabama Licensure Alignment
Program Curriculum aligns with Alabama MFT licensure requirements. See Appendices for Table demonstrating program alignment with licensure requirements. Students who graduate from a COAMFTE accredited program have met the educational requirements for licensure as an LMFT in Alabama (https://mft.alabama.gov/rules.aspx).

Additional Instruction and Training Requirements
In addition to coursework, students will have other opportunities to receive additional instruction and training. Students are required to attend monthly CFTC staff meetings. In addition to addressing CFTC business, during the monthly CFTC meetings guest speakers will be invited to teach students about specific clinically relevant topics. Absences from any scheduled program meeting or event should be approved by the Program Director before the event.
Course Requirements

Clinical Practice in Marriage and Family Therapy…………………………… 9 credit hours
   HD 640 Couple and Sex Therapy (3)
   HD 664 Family Therapy (3)
   HD 665 Advanced Family Therapy (3)

Multicultural Competency in Marriage and Family Therapy……………………… 3 credit hours
   HD 645 Cultural Diversity in Marriage and Family Therapy (3)

Ethics and Professional Identity in Marriage and Family Therapy……………. 3 credit hours
   HD 641 Ethics and Professional Issues in MFT (3)

Mental Health Diagnosis and Treatment…………………………………. 3 credit hours
   HD 642 Systemic Assessment and Diagnosis of Psychopathology in MFT (3)

Human Development and Family Studies………………………………….. 6 credit hours
   HD 500 Lifespan Development (3)
   HD 562 Dynamics of Family Relations (3)

Research……………………………………………………………………….. 6 credit hours
   BER 540 Stats I (3)
   HES 509 Research Methods (3)

Practicum and Internship………………………………………………… 15 credit hours
   HD 567 Practicum in Marriage Family Therapy (3)
   HD 568 Practicum I in Marriage Family Therapy (3)
   HD 667 Practicum II Marriage Family Therapy (3)
   HD 668 Internship in Marriage Family Therapy (6)

Elective Courses…………………………………………………………….. 6 credit hours
   *Approved Elective (3)
   *Approved Elective (3)
   * one elective must be a HD graduate course

Total Credits Required for Concentration: 51 (36 didactic + 15 practicum and internship)
Students Must Complete 500 Client-Contact Hours (at least 250 couple/family hours)
UA MFT Program Curriculum Sequence Example

Year 1

Fall I, (12 credits)
- HD 500 (3) Life Span
- HD 567 (3) Practicum in MFT
- HD 664 (3) Family Therapy
- HD 641 (3) Ethics and Professional Issues in MFT

Spring I, (12 credits)
- HD 665 (3) Advanced Family Therapy
- HD 568 (3) Practicum I in MFT
- HD 640 (3) Couple and Sex Therapy
- HES 509 (3) Research Methods

May Interim (3 Credits)
- HD 642 (3) Systemic Assessment and Diagnosis of Psychopathology in MFT

Summer Semester (6 credits)
- HD 645 (3) Cultural Diversity in MFT
- HD 667 (3) Practicum II in MFT

Year 2

Fall (9 credits)
- HD 562 (3) Dynamics of Family Relations
- HD 668 (3) Internship
- BER 540 (3) Stats I

Spring (9 credits)
- HD 668 (3) Internship
- *Approved Elective Course (3)
- *Approved Elective Course (3)
- *one elective must be a HD graduate course

Total Credits Required for Concentration: 51 (36 didactic + 15 practicum/internship)
Students Must Complete 500 Client-Contact Hours (at least 250 couple/family hours) as part of their practicum/internship.

Alabama Licensure Alignment
Program Curriculum aligns with Alabama MFT licensure requirements. See Appendices for Table demonstrating program alignment with licensure requirements. Students who graduate from a COAMFTE accredited program have met the educational requirements for licensure as an LMFT in Alabama (https://mft.alabama.gov/rules.aspx).

Academic Calendar
The UA MFT Program will follow the UA academic calendar for beginning and end dates of each semester (https://registrar.ua.edu/academiccalendar/).
Comprehensive Examination

During their final semester, students complete a: 1) paper describing their integrated systemic model of change, and 2) presentation demonstrating their integrated systemic model of change.

Integrated Theory of Change Paper Description
Per the graduate school policy, students have two opportunities to take the final written exam. Students will write a minimum of a 25-page academic quality paper not including references (APA format; need to have a minimum of 10 references) that focuses on their personal integrated theory of change. This paper is designed for you to integrate your education and training into a personal integrated theory of change that guides your own clinical work. While your theory of change will continue to develop after graduation, the paper should be a current representation of your theory of change (due date details will be provided during the Fall 2 semester).

First Attempt
The MFT core faculty will grade your papers independently and then average your score to determine your final grade. All students must receive at least an 85% on the paper to pass. Based on your paper score, you will receive one of the following grades: pass, revise, or fail. Your integrated theory of change presentations will not be scheduled until you receive a passing grade for your paper. Students who receive a “revise” grade (i.e., below 85%) will have two weeks to submit their revisions on second attempt.

Second Attempt
For students who receive a failing grade (less than 85%) on the revisions of their first attempt, he/she will have up to three academic semesters to complete the second attempt (student must enroll in at least one credit of HD 591 course if revising in another semester). The grading procedures will be the same as the first attempt grading procedures. If the student fails the second attempt (less than 85%), then he/she will be dismissed from the program and graduate school (per graduate school policy).

Integrated Theory of Change Paper Rubric
- Professional Identity
  1. Personal Values and Beliefs about Therapy
     a. Describe your personal values and beliefs about therapy
     b. How does your “self of the therapist” impact your therapy?
  2. Role of the Therapist
     a. What is your role as a therapist in treatment?
     b. State and elaborate on a metaphor that illustrates how you see your role as a therapist.
  3. Application of systems thinking
     a. Describe your application of systems thinking to therapeutic practice.
  4. Ethical considerations
     a. Describe salient ethical principles that guide your work with individuals, couples, and families
  5. Application of research to practice
     a. Describe your plan for consuming and applying relevant research to clinical practice.
6. **Contextual Variables**
   a. Discuss how contextual variables impact your work with clients. Address how you attend to issues such as gender, culture, race, ethnicity, etc. How do you handle issues of power and privilege in your clinical services? How do other contextual variables affect your theory/therapy, such as physical health concerns, or work, school, and extended family?
   b. Discuss your plan for collaborating with professionals outside the therapeutic setting in order to meet client goals.

**Integrated Theory of Change: Individuals**

- **Describe your Conceptualization for the Connection between Thoughts, Emotions, and Behaviors**
- **Theory Description**
  1. Describe in detail the therapeutic modalities (or theories) for working with individuals
     a. If you integrate multiple modalities/theories, describe in detail the components of each theory you are drawing from and how each is utilized in the development of your own model. You need to explain your reasoning for integration and how this integration is used to create change in therapy.
       - Briefly describe the evidence-base for the theories you use
       - Describe how systems thinking evident in your theory
       - Describe developmental considerations for working with individuals
     b. What guides your thinking when you are deciding to move back and forth between different theoretical approaches with clients?
     c. Describe any potential contraindications for when you would not use a certain theoretical approach.

- **Conceptualization**
  2. Based on your description above, describe your definition of a healthy individual.
  3. Describe how problems develop and maintain for individuals (why are clients “stuck”?)
  4. Based on your model, describe your overarching goal of therapy.
  5. Based on your model, describe how change is created in therapy (i.e., theory of change).

- **Therapeutic Process**
  1. Who is necessary to be present in your therapy sessions?
  2. Describe your assessment strategies
  3. Describe the process for determining goals
  4. Describe techniques/interventions you are likely to use and the intended outcome of each.
     a. How do you evaluate techniques/interventions as successful?
     b. How do you decide when techniques/interventions may be contraindicated?
  5. Describe your plan for termination
     a. How you will know when clients are ready to terminate?
     b. What is your plan for follow-up care (if needed)?

**Integrated Theory of Change: Couples**
**Theory Description**

1. Describe in detail the therapeutic modalities (or theories) for working with couples
   a. If you integrate multiple modalities/theories, describe in detail the components of each theory you are drawing from and how each is utilized in the development of your own model. You need to explain your reasoning for integration and how this integration is used to create change in therapy.
      - Briefly describe the evidence-base for the theories you use
      - Describe how systems thinking evident in your theory
      - Describe developmental considerations for working with couples
   b. What guides your thinking when you are deciding to move back and forth between different theoretical approaches with clients?
   c. Describe any potential contraindications for when you would not use a certain theoretical approach.

**Conceptualization**

1. Based on your description above, describe your definition of a healthy couple. Elaborate on your definition of healthy interactional patterns.
2. Describe how problems develop and maintain for couples (why are clients “stuck”?). Describe how unhealthy interactional patterns develop and sustain.
3. Based on your model, describe your overarching goal of therapy.
4. Based on your model, describe how change is created in therapy (i.e., theory of change). Specify your process for changing interactional patterns.

**Therapeutic Process**

1. Who is necessary to be present in your therapy sessions?
2. Describe your assessment strategies (formal and for assessing interactional patterns)
3. Describe the process for determining goals
4. Describe techniques/interventions you are likely to use and the intended outcome of each.
   a. How do you evaluate techniques/interventions as successful?
   b. How do you decide when techniques/interventions may be contraindicated?
5. Describe your plan for termination
   a. How you will know when clients are ready to terminate?
   b. What is your plan for follow-up care (if needed)?

**Integrated Theory of Change: Families**

**Theory Description**

1. Describe in detail the therapeutic modalities (or theories) for working with families (you need to address the following groups: working young children, older children, and adolescents).
   a. If you integrate multiple modalities/theories, describe in detail the components of each theory you are drawing from and how each is utilized in the development of your own model. You need to explain your reasoning for integration and how this integration is used to create change in therapy.
- Briefly describe the evidence-base for the theories you use
- Describe how systems thinking evident in your theory
- Describe developmental considerations for working with families
  b. What guides your thinking when you are deciding to move back and forth between different theoretical approaches with clients?
  c. Describe any potential contraindications for when you would not use a certain theoretical approach.

- **Conceptualization**
  1. Based on your description above, describe your definition of a healthy family. Elaborate on your definition of healthy interactional patterns.
  2. Describe how problems develop and maintain for families (why are clients “stuck”?).
  3. Based on your model, describe your overarching goal of therapy.
  4. Based on your model, describe how change is created in therapy (i.e., theory of change).
  Specify your process for changing interactional patterns.

- **Therapeutic Process**
  1. Who is necessary to be present in your therapy sessions?
  2. Describe your assessment strategies (formal and for assessing interactional patterns)
  3. Describe the process for determining goals
  4. Describe techniques/interventions you are likely to use and the intended outcome of each.
     a. How do you evaluate techniques/interventions as successful?
     b. How do you decide when techniques/interventions may be contraindicated?
  5. Describe your plan for termination
     a. How you will know when clients are ready to terminate?
     b. What is your plan for follow-up care (if needed)?

**Integrated Theory of Change Presentation Description**

Students will give a 45 minutes presentation to the MFT faculty in which you will present your theory of change with video clips of your theory in action. You must present 4 video clips and at least 2 relational clips. This can be done through showing video clips of the same client(s) that demonstrate (a) the problem, (b) the intervention, and (c) the outcome. The presentation should be structured approximately as follows: 15 minutes presenting your personal integration/theory of change, 20 minutes showing and discussing video clips of you demonstrating your theory in action, and 10 minutes of questions from the MFT faculty. All students must receive an 85% to pass. Based on your presentation score, you will receive one of the following grades: pass or fail. If a student receives a failing grade on their presentation, he/she will have up to three academic semesters to complete the second attempt (student must enroll in at least one credit of HD 591 course if revising in another semester). If the student fails the second attempt (less than 85%), then he/she will be dismissed from the program and graduate school (per graduate school policy).

**Integrated Theory of Change Presentation Rubric**

Quality of presentation (50 pts.)
  Demonstration of theory in action (50 pts.)
Clinical Requirements and Sequencing

Clinical Hours Requirement
In order to meet graduation requirements, each student is required to conduct a minimum of 500 direct client contact hours with at least 250 hours being relational (i.e., couple/family) and participate in a minimum of 100 hours of supervision (50 observational). Clinical hours must be attained over a minimum of 12-months. Students who meet this requirement can apply for Alabama’s MFT-A Licensure.

Students will gain their clinical hours through the Capstone Family Therapy Clinic (CFTC) and their approved off-site placement(s). Students shall work with their current MFT core faculty/clinical supervisor to ensure that they are maintaining a balance of clinical hours within the CFTC and at their offsite placement(s) with respect to several factors including but not limited to: the demands of their offsite placement(s), clients’ presenting problems/needs (e.g., high risk), assistantship requirements, location of their offsite (when additional commuting needs are required), and their capacity to manage the multiple demands as a professional, student, employee.

Definition of Clinical Hours

- **Direct Clinical Contact Hours:** 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. Assessments may be counted if they are in-person processes that are more than clerical in nature and focus. Also, therapy services delivered through interactive team modalities may provide direct client contact for specific team members who have in-person interaction with the client/system during the session. Therapy team members who engage the therapeutic process only behind the mirror may not count the experience as direct client contact. Activities such as telephone contact, case planning, observation of therapy, record keeping, trainings, role-playing, travel, administrative activities, consultation with community members or professionals, and/or MFT relational/systemic supervision are not considered direct client contact.

- **Individual:** The session is counted as individual when you are meeting with one person.

- **Relational:** Relational Hours is a category of direct clinical contact hours in which a clinician delivers therapeutic services with two or more individuals conjointly, who share an ongoing relationship beyond that which occurs in the therapeutic experience itself. Examples include family subsystems, intimate couple subsystems, enduring friendship/community support subsystems, and residential, treatment, or situationally connected subsystems.
  - Relational hours also may be counted with relational subsystems that include a person whose only available means to participate in the in-person therapeutic meeting is telephonic or electronic (e.g., incarcerated, deployed or out-of-town subsystem members).
  - Group therapy can be counted as relational hours if those in the group therapy have a relationship outside of (above and beyond) the group itself. Conversely, group therapy sessions of otherwise non-related individuals are not considered as relational hours.
**Supervision Requirements**

Students are expected to maintain regular and consistent supervision throughout clinical practice. Students will be assigned a clinical supervisor when beginning to see clients in the CFTC. Each semester, students will be assigned to an individual supervisor and to a group supervisor (AAMFT Approved Supervisor/AAMFT Supervisor-in-training). Students are expected to attend individual and group supervision once a week (students will reschedule if they cannot meet with their supervisor during their regularly scheduled time). Students are required to receive supervision from a designated supervisor when seeing clients during times when the University is closed (i.e., Spring Break, Winter Break, etc.). Students shall arrive to supervision well-prepared to discuss current cases, including showing video of recoded sessions.

All student therapists are required to record their client contact and supervision hours. In this program, students will receive a minimum of 100 hours of supervision, including individual, group, and live observation. **Students are specifically required to receive a minimum of 50 hours of supervision utilizing observable data (i.e. live/video/audio supervision).** Students should specify these hours of live/video supervision on their monthly supervision hours log.

**Definitions of Supervision Hours**

- **Individual Supervision:** This type of supervision occurs in the presence of your UA MFT supervisor and with one to two supervisees.
- **Group Supervision:** This supervision occurs with a group less than 8-students.

**Types of Supervision**

- **Case Consultation:** This is counted when your case or another student’s case is reviewed and supervised without the use of raw data (video, audiotape, or live supervision).
- **Video:** This is counted when you are supervised, and videotape of the case is presented. In Group Supervision, this is counted when you or another student is supervised, and a videotape of the case is presented.
- **Audio:** This is counted when you are supervised, and an audiotape of the case is presented. In Group Supervision, this is counted when you or another student is supervised, and an audiotape of the case is presented.
- **Live:** Live supervision is counted when you conduct therapy in the presence of your supervisor at the CFTC, or you view a live case with your supervisor. This is to be counted only if the session was conducted at the CFTC. It can be counted as live, by the one or two therapists conducting the session, or those therapists viewing the session. No more than 6 total students can be involved in a live supervision session (combined total conducting and observing the session.).

**Supervision Interruptions**

Supervisors are expected to provide supervisory support during planned and unplanned interruptions to supervision. Students are required to receive supervision from a designated supervisor when seeing clients during times when the University is closed (i.e., Spring Break, Winter Break, etc.). During interruptions, the supervisee will contact the supervisor to schedule supervision.
**Clinical Sequencing**
Student sequencing for seeing clients in the CFTC begins during the students 1st semester. Below is the description of the clinical sequencing.

**Clinical Observation**
The clinical sequence of training begins during the first fall semester with clinical observations in the CFTC (as part of HD 567: Practicum).

**Determining Student Readiness to see Clients in the CFTC**
Students typically begin seeing cases during the Fall semester of their first-year. Before this time, the MFT faculty will make a determination as to whether each student is ready to begin seeing clients in the CFTC. This determination will be based primarily on student demonstration of: 1) sufficient counseling skills via role-plays in the Fall Practicum Course (HD 567); 2) student’s grasp of course concepts; 3) and demonstrated maturity and professionalism. The MFT core faculty will meet to discuss student readiness for seeing clients in the CFTC. Students will be notified via letter of their readiness to see clients. Students who are not deemed ready will meet with the Program Director and Director of Clinical Training to develop a plan for the student to begin seeing clients.

Students need to complete the following before seeing clients in the CFTC: 1) pass the CFTC Policy and Procedure Manual quiz (as part of HD 567); 2) pass the CFTC Crisis Procedure quiz (as part of HD 567); 3) complete Alabama Child Protective Services Interactive Training for Mandated Reporters training (as part of HD 641); 4) complete HIPAA training (as part of HD 641); 5) complete Counseling on Access to Lethal Means training (as part of HD 641); 6) complete technology usage agreement (as part of HD 641); provide proof of CPH liability insurance (as part of HD 567). Students will begin seeing one individual client. During the Fall 1 semester, a student therapist will carry a minimal caseload (1-3 cases) and will be expected to begin clinical supervision at the onset of seeing clients. During the next stage (Spring semester of 1st year) of the clinical sequence, students are assigned relational cases. During this stage, the student therapist's caseload is increased to four or more cases. Students are expected to have a minimum caseload of at least six clients in the CFTC by the end of the Spring semester of their 1st year (students typically have more than six clients).

**Off-Site Placements**
Student therapists who have demonstrated readiness will begin an off-campus placement during the summer semester of 1st year/early Fall semester of 2nd Year. Readiness will be determined by the MFT core faculty and clinical supervisors, and be primarily based on: 1) student clinical performance in the CFTC Clinic (as rated by Practicum Evaluation); 2) student’s grasp of course concepts and demonstrated maturity and professionalism. The MFT core faculty and supervisors will meet to discuss student readiness for seeing clients at an off-site placement. Students will be notified via letter of their readiness to begin their off-site placement. Students who are not deemed ready will meet with the Program Director and Director of Clinical Training to develop a plan for the student to begin their off-site placement.

While student therapists can state a preference for geographic location (i.e., Tuscaloosa; Birmingham) or type of placement (e.g., children, adolescents, substance abuse, domestic violence), the decision of where to place a student therapist is the responsibility of the MFT core faculty. During the Spring semester, 1st year students will write an interest letter outlining their top three off-site placement choices. The faculty will take into consideration student requests, the areas of competency in which the student needs to grow, and how well the site will provide the student with diverse clinical
experience in terms of client background and presenting problems. The MFT core faculty will review the letters and decide on where to place a student therapist. Once students are notified via letter, it is students’ responsibility to reach out to the placement site to identify the position responsibilities, as well as the application and interview process (students are not to begin their off-site placement until there is a signed Clinical Affiliation Agreement signed by the off-site coordinator and the MFT Program Director; see Clinical Affiliation Agreement in appendices).

No student therapist is placed at an off-site placement until all supervisors agree that the student can function as a solo therapist in relative autonomy from close supervision. Unless other arrangements are agreed upon by the Program Director, the student, and the offsite supervisor, the students will spend no more than 16 hours per week working at the offsite placement and no more than 10 hours a week in direct client contact. On their clinical hours reporting form for the CFTC, students will be required to report their clinical hours from their offsite placement each month.

In addition, students will be required to complete an evaluation of their sites (i.e., Offsite Placement Evaluation). Offsite placement supervisors will also complete an evaluation performance/professionalism at the conclusion of their off-site work (i.e., Offsite Placement Student Evaluation). These evaluations help faculty assess whether the sites are providing the students with an appropriate context for student development as well as student performance. Note that students may not provide direct therapeutic services to clients off-campus until they have been cleared by the faculty to begin their externship. Students who are not cleared will meet with the Program Director or DTC to develop a plan to begin the offsite placement. If students desire to provide therapeutic services off-campus at sites other than the one assigned to them, they must have the approval of the program faculty. Students can only see clients at their off-site placements during weeks they are receiving supervision by their offsite placement clinical supervisor.

**Recording Clinical and Supervisory Hours**
It is the MFT Program policy that students must record their clinical and supervisory hours by completing the Monthly Clinical Hours Report and Monthly Supervision Hours Report forms; see appendices) and turn it in to the CFTC at the end of every month. Reports for the month are due to the Director of Clinical Training by the 1st of each month. Reports received after the due date will not be accepted, and hours will not be counted toward the student’s cumulative hours.

**Teletherapy Compliance**
The MFT Board Rules and Regulations (https://mft.alabama.gov/rules.aspx) requires a minimum of 15-hours of initial training that covers the following areas (but not limited to): 1) Appropriateness of Teletherapy; 2) Teletherapy Theory and Practice; 3) Modes of Delivery; 4) Legal/Ethical Issues; 5) Handling Online Emergencies; 6) Best Practices & Informed Consent. Students will meet the Alabama MFT Board teletherapy training requirements during the first two semesters (Fall I and Spring I) of the student’s program (i.e., HD 641 and HD 568; see syllabi). Students can begin seeing clients via teletherapy following completion of requirements in courses HD 641 and HD 568.

**Telesupervision Compliance**
The MFT Board Rules and Regulations (https://mft.alabama.gov/rules.aspx) requires that AAMFT Approved Supervisor, AAMFT Supervisor Candidate, ABEMFT Approved Supervisor, or ABEMFT
Supervisor Candidate to be considered trained to provide telesupervision or telesupervision training, the Supervisor must have nine (9) continuing education hours or a one (1) credit course (15 classroom hours) in teletherapy dealing with supervision conducted via electronic communication (e.g., encryption of data, HIPAA compliant connections, telesupervision therapy and practice, telephone and video conferencing, legal/ethical issues, handling online emergencies, and best practices and informed consent). All UA MFT Program clinical supervisors meet this requirement.
## Sequence of Clinical Experience*

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| **Fall**   | • Meet requirements to begin seeing clients in CFTC  
            | • Teletherapy training  
            | • Begin seeing individual clients  
            | • Begin individual supervision  
            | • Begin turning in CFTC Monthly Clinical/Supervision Hours Reports  |
| **Spring** | • Continue seeing individual clients  
            | • Continue individual supervision  
            | • Continue turning in CFTC Monthly Clinical/Supervision Hours Reports  
            | • Begin seeing relational clients  
            | • Begin group supervision  
            | • Turn-in offsite internship letter  
            | • Complete Teletherapy training  
            | • Contact offsite placements/interview (if necessary)  |
| **Summer** | • Continue seeing individual/relational clients in CFTC  
            | • Continue weekly individual and group supervision  
            | • Continue turning in CFTC Monthly Clinical/Supervision Hours Reports  
            | • Begin offsite placement (if possible)  |

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<th>Second Year</th>
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| **Fall**   | • Continue seeing individual/relational clients in CFTC  
            | • Continue weekly individual and group supervision  
            | • Continue turning in CFTC Monthly Clinical/Supervision Hours Reports  
            | • Begin work at offsite placement (if did not start during summer)  
            | • Renew CPH Insurance and provide verification form to MFT program  
            | • Complete Technology Usage Agreement  |
| **Spring** | • Continue seeing individual/relational clients in CFTC  
            | • Continue weekly individual and group supervision  
            | • Continue turning in CFTC Monthly Clinical/Supervision Hours Reports  
            | • Complete work at offsite internship  
            | • Complete 500 (250 relational) client-contact hours & 100 supervision hours  |

*This timeline identifies the typical sequence of clinical training based across 2-years, but progress of clinical training is dependent upon student readiness*
Monitoring Student Progress

The below procedures are used to monitor student progress across the curriculum and practice components.

Courses
Students receive grades for all academic and practicum courses (A – F). The academic advisor (i.e., Program Director) accesses grade to include in the student’s annual report that goes to the Department Chair and student (during Spring semester).

Supervisor Evaluations
At the end of every semester, clinical supervisors evaluate students on their progress on clinical work and progress towards meeting SLOs. One week prior to the end of the semester, the student therapist and the supervisor will meet to review practicum performance.

Annual Student Report
Using the student’s course grades and supervisor evaluations, the Program Director will provide each student an annual report during the Spring semester.

Informal Tracking
MFT core faculty will also informally track student progress throughout the Program. Core faculty will discuss student progress throughout faculty meetings as an informal monitoring procedure.
Curriculum Review and Change Process

The Program evaluates the curriculum based on alignment with the Principles of Marriage and Family Therapy Practice, specifically adhering to the COAMFTE FCA standards, AAMFT Code of Ethics, AMFTRB domains, and the state of Alabama licensure laws.

Curriculum Evaluation Process

Formal Evaluation of Courses
Students formally evaluate each course through the UA’s standardized Student Opinion of Instruction survey.

Formal Evaluation of Overall Curriculum
Current students (every semester) and graduates (yearly) provide feedback on the curriculum via online surveys.

Informal Review of Curriculum
MFT core faculty seek informal student feedback on course content and curriculum (i.e., class discussion at the end of the semester for improving course content).

Curriculum Evaluation Review Process
The MFT Program Director will compile evaluation data for yearly MFT faculty review. Action steps and changes will be discussed and finalized during meetings.

Curriculum Change Process
Decisions surrounding curriculum updates are made jointly amongst the core Program faculty during faculty meetings. If program changes call for new course development, or changes in the number of required hours, they must go through the university curriculum review process (https://registrar.ua.edu/faculty-staff/academic-scheduling-roomseek/guidelines-for-course-and-program-updates-in-cim/). This includes review by university committees at the department, college and university levels. Changes will be communicated to students during monthly MFT Program meeting.
SECTION III: STATEMENTS AND PROCEDURES
Non-Discrimination Statement

The University of Alabama Marriage and Family Therapy program’s non-discrimination policy is in accord with UA university-wide policies on discrimination ([https://compliance.ua.edu/ua-policies/](https://compliance.ua.edu/ua-policies/)). We endorse and uphold the anti-discrimination and affirmative stance of The University of Alabama, and embrace the plurality of the human experience as an invaluable resource to the quality and vitality of our program and profession. We are committed to the principle that in no aspect shall there be differences in the treatment of persons or discrimination with regard to the recruitment, admission, codes of conduct, hiring, retention, or dismissal of students, faculty, and supervisors or other relevant educators and/or staff on the basis of race, age, gender, ethnicity, sexual orientation, relationship status, gender identity, socioeconomic status, disability, health status, veteran/military status, religion and spiritual beliefs and/or affiliation, and/or national origin. The MFT program is committed to understanding and appreciating the diversity among people and to the principle that in no aspect shall there be discrimination in the treatment of any person, including but not limited to prospective and enrolled students, clients, faculty, staff, or supervisors. Non-discrimination applies also to activities, including but not limited to recruitment, admission, codes of conduct, hiring, retention, or dismissal of students, faculty, and supervisors or other relevant educators and/or staff. The faculty, supervisors, and staff are fully committed to function in accordance with all applicable federal, state, and local laws regarding non-discrimination.
Diversity and Inclusion Statement

The UA MFT program embraces COAMFTE’s definition of diversity and inclusion as being inclusive of race, age, gender, ethnicity, sexual orientation, relationship status, gender identity, socioeconomic status, disability, health status, veteran/military status, religion and spiritual beliefs and/or affiliation, and/or national origin. The University Alabama Marriage and Family Therapy program adopts a posture of respect with regards to the worth and uniqueness of each individual, understanding and accepting the variability among social, religious, cultural, and other groups. Thus, we are committed to: a) include the representation of multiple groups in the student body, program clinical supervisors, program core and non-core faculty with regard to race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious or spiritual affiliation, nation of origin or other relevant social categories; and b) ensure issues of diversity are central to all aspects of the training environment.

The UA MFT program aims to be inclusive to all students, volunteers, staff, and clients affiliated with the program and the CFTC to ensure a comfortable, safe, and respectful environment by reflecting the diverse interests of our all parties involved. Our philosophy is that all humans must be afforded dignity and respect and that the oppression of any member or group within a society occurs to the detriment of all members of that society. We believe that without intentional intervention to resolve sources of discrimination and oppression, all social systems contribute to the continuation of the oppression of underprivileged individuals and groups.

We recognize that our goal of achieving a more diverse program entails accepting that our goals will be fluid and will continue to adapt to new and ever changing ideals of equity, equality and inclusivity. Nevertheless, we value the process of seeking human dignity and we attempt this in many ways, including: 1) prioritizing program resources to recruit and maintain a diverse faculty and student body, 2) promoting an atmosphere conducive to mutual respect for individual and group differences, 3) identifying aspects of the program which promote disadvantages for marginalized groups or individuals, and 4) implementing interventions to resolve and eliminate identified problem areas.

This process involves efforts to value diversity in ways that are not always easily measured (e.g., beyond ethnic breakdown of students). For example, we try to teach and emulate respect for various viewpoints and infuse this type of instruction and content into all our classes through our language usage and our actions. However, even though it is not always adequate or measurable, we do take specific steps to help make this happen.

Non-Discrimination, Diversity, and Inclusion Code of Conduct
Our goal is to foster a spirit of respect and tolerance for others and take corrective action when we feel an individual's rights or dignity are not being protected. See student code of conduct in “Student Grievance, Deficiency, and Dismissal Procedures.”
Statement of Human Dignity

The UA MFT 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 our professional activity as therapists and family therapy trainees should reflect this value and worth by according our clients and each other basic human dignity and respect. This is a core value of our training program.

The UA MFT Therapy program respects and encourages the expression of a wide diversity of personal values and behaviors. 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 personally feel about their values, behavior and lifestyle.

Clearly, part of our role as helping professionals involves responding appropriately to illegal behavior or behavior that endangers 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.

Refusal to provide family therapy services to those whose values and behavior are not reflective of our own devalues and denigrates those human beings. This principle also applies to lecturing or moralizing about behavior that is different from our own, but is conducted in a manner that is reflective of the participants' values.

As an MFT program, we understand that personal values are very important. We also believe that the core values of the program and profession of marriage and family therapy are important for those who wish to pursue the profession. There may be times when personal values come in conflict with program and professional values. It seems very important for each of us to evaluate personal and professional values in an ongoing manner. If maintaining the program value of basic human dignity cannot be accomplished without compromising an individual’s personal values, it is the duty of that person to seriously evaluate his/her continued participation in the profession. It is also the duty of the program to make a similar evaluation of the wisdom of offering continued training to persons who cannot accept core professional values.
Professional Standards and Professional Behavior Statement

Given the nature of the MFT program as a professional degree program and the close connection with student work being completed within the CFTC, students are expected to act in accordance with the CFTC Policy and Procedures Manual, the AAMFT Code of Ethics, the Alabama LMFT Rules and Regulations, and the MFT Program Handbook. The CFTC Policy and Procedures Manual specifically outlines student rules and procedures for work with clients, case management, confidentiality responsibilities, use of CFTC computers, parking, etc. Violation of the policies outlined in the CFTC Policy and Procedures Manual will result in dialogue with the MFT faculty to address the violated policies and/or additional sanctions related to the status or nature of student involvement with the CFTC and/or MFT program (see Student Grievance, Deficiency, and Dismissal Procedures).

Students should also be aware that their behaviors in the classroom have an effect on faculty instruction and peer learning and should adhere to each faculty members’ preference governing the use of technology, social media, etc. during class, MFT program meetings, events, etc. Any lack of professional behavior within the program will result in direct feedback from faculty with additional sanctions (Student Grievance, Deficiency, and Dismissal Procedures).

Given the degree of close relationships within the MFT program, it is expected that students maintain a high degree of professionalism in their interactions with fellow colleagues, faculty, student interns, non-MFT faculty, etc. Though the faculty often choose to work collaboratively with students, students should respect the authority and hierarchy within the program as well as the liability under which their clinical work falls. Thus, students should understand that the faculty have the ultimate responsibility for student case management, research advisement, and assistantship management.

As a professional in the MFT program, it is important to maintain a professional appearance. Although personal and class time allows for casual wear (e.g., shorts, tank tops, flip flops, sweatshirts, etc.), it is expected that you will dress professionally and in accordance to the CFTC dress code outlined in the CFTC Policy and Procedures Manual during times when clients are present in the CFTC (the dress standard applies even when you are observing cases). Specifically, male students are not mandated to wear neckties; however, a collared shirt is preferred with slacks or dark jeans. For female students, please avoid unprofessional clothing (e.g., low cut shirts, short skirts, see-through tops; open-toed shoes are acceptable except for flip-flops). When observing, please attempt to wear dark-colored clothes to minimize being seen behind the mirrors. Also, students need to respect all CFTC space and behave in a professional manner during non-CFTC activities (i.e., supervision, staff meetings, etc.). The specified dress code can be found in the CFTC Policy and Procedure Manual.

Overall, it is expected that students maintain a high degree of academic preparedness for classes as well as supervision (e.g., completed weekly readings and assignments, materials necessary for note-taking and active involvement). Students should be timely for class meetings, clinic meetings, supervision, and other events that are required by the program, department, or college. Your behavior is a direct reflection of this program, its faculty, the department, and your profession and the utmost attention to these details is imperative. Finally, as part of an intense clinical program, there will be guest speakers and additional program meetings (e.g., MFT program/CFTC orientation...
meetings, Comprehensive Exam Presentations, CFTC Staff Meetings, MFT Council Meetings) outside of class time. You will be required to attend these meetings, but you will be given appropriate notice to make arrangements to attend. Any absence from required MFT program meetings will need special approval well in advance of the scheduled meeting by the MFT Program Director.

Within the UA MFT Program, feedback from Communities of Interest is a critical component for assessing how well the program is meeting its program goals and student learning outcomes. Several assessments (e.g., course evaluations, supervisor evaluations, basic skills evaluations, annual program survey, offsite placement survey, etc.) are used in the MFT program to gather feedback, and it is expected that MFT students will provide this feedback to the program when requested.
Confidentiality in Supervision and Training

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

Section 4.7 of the AAMFT Code of Ethics defines the limits of confidentiality for supervisees. The UA MFT Program has a clear responsibility to protect clients under the care of student therapists from unethical or incompetent practices. We have an additional responsibility to The University of Alabama to protect the integrity and well-being of the Marriage and Family Therapy Program as well as an obligation to the profession of Marriage 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 marriage and family therapist must be made in consultation with the entire MFT 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 MFT clinical faculty must operate as a confidentiality unit, meaning 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 clinical faculty. Students retain responsibility for those things which they choose to share with faculty members.

Successful MFT training and supervision is, in large part, dependent on the quality of relationships between faculty and students. The MFT 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, students, clients, the University of Alabama, and the profession of marriage and family therapy.
Student Grievance, Deficiency, & Dismissal Procedures

A quality graduate education program in Marriage and Family Therapy involves a shared faculty-student investment in the pursuit of professional education and training. The faculty recognize that their role is to mentor and coach students as they develop academic, clinical, and professional competencies. Ongoing professional relationships between and among faculty and students continually contribute to the development of such competencies. At times, students will struggle to develop necessary competencies, and faculty will employ additional focused efforts to assist students in their development. This document describes the recommended approach for resolving grievances among students, and between students and faculty, competencies students are expected to develop over the course of their graduate career, and the procedures that the faculty will implement when students struggle to develop these competencies.

Recommended Grievance Processes

Student Grievance: If a student has a problem with a fellow student, he or she is expected to follow the following procedures (for Title IX related grievances, students will follow University procedures https://titleix.ua.edu/):

- Initiate contact by means of a direct conversation with that student. The two parties will then attempt to resolve the conflict to the satisfaction of all concerned.
- If the aggrieved party has done this, come to a common understanding of the problem, and agreed upon a course of changed behavior, and the other individual continues to do the offending behavior, the aggrieved party still has the obligation to follow up with another direct conversation about the lack of change in behavior. In other words, the aggrieved individual is expected to initiate direct contact with the other individual involved and to persist in problem-solving discussions.
- If the offending behavior stops, the situation is resolved.
- If the offending behavior persists, the aggrieved person may, at that point, ask for one or more of the faculty to serve as mediator in the problem situation.

Faculty Grievance: The faculty of the HDFS Marriage and Family Therapy Concentration prioritizes open and honest communication between faculty and students. The following Grievance Policy addresses students who may at some time feel they have been unjustly treated by a faculty member. While it is recommended that students take the below steps to resolve the grievance, students can also follow the procedures outlined in the faculty handbook (https://catalog.ua.edu/graduate/about/general-information/grievance-procedure-faculty-handbook/):

- Contact the faculty member with whom you have a grievance and make an appointment to discuss the matter.
- If, after the meeting, you do not feel the matter was adequately resolved, you should meet with the MFT Program Director, or another MFT core faculty member if the grievance involves the Director, about the grievance.
- If, after meeting with the Director, you do not feel your grievance was adequately resolved the next step is for you to explain the grievance to the HDFS Department Chair.
• If, after all of the above steps are completed, you are not satisfied that your grievance has been adequately addressed, the next step is for you to contact the Assistant Dean for Student Affairs in the College of Human Environmental Sciences to try to resolve your concerns.

**Academic Competencies**

**Grading:** Academic performance is evaluated by the faculty and is based upon the student’s performance in his/her coursework. It is the responsibility of the faculty to inform students of assignments and corresponding due dates. Penalties for the failure to complete the assignment adequately or on time should be made known to the student at the beginning of the course or project. The faculty should discuss (via syllabus/discussion) with the students the criteria for success or failure.

Students must maintain a 3.0 grade point average (“B” Average) at all times while enrolled as graduate students in the Department of Human Development and Family Studies. Grades below "C" count in computing the GPA but do not carry credit toward a degree. Academic standards are set forth by the UA Graduate School [https://catalog.ua.edu/graduate/about/academic-policies/scholastic-requirements/](https://catalog.ua.edu/graduate/about/academic-policies/scholastic-requirements/).

The faculty considers the student’s satisfactory progress toward the completion of his or her degree to be an issue of competence. Students who do not meet the minimum academic requirements will be placed on academic probation and/or dismissed from the program.

**Authenticity of Student Work:** All students in attendance at The University of Alabama are expected to be honorable and observe standards of conduct appropriate to a community of scholars. The University of Alabama expects from its students a higher standard of conduct than the minimum required to avoid discipline. When enrolled at The University of Alabama, students are expected to abide by the Academic Honor pledge. Additionally, at the discretion of the course instructor, each student will be expected to sign an Honor Pledge.

The Academic Honor Pledge reads as follows: I promise or affirm that I will not at any time be involved with cheating, plagiarism, fabrication, or misrepresentation while enrolled as a student at The University of Alabama. I have read the Academic Honor Code, which explains disciplinary procedures that will result from the aforementioned. I understand that violation of this code will result in penalties as severe as indefinite suspension from the University.

Academic misconduct by students includes all acts of dishonesty in any academic-related matter and any knowing or intentional help or attempt to help, or conspiracy to help, another student commit an act of academic dishonesty. Academic dishonesty includes, but is not limited to, each of the following acts when performed in any type of academic or academic-related matter, exercise, or activity.

(1) Cheating: using or attempting to use unauthorized materials, information, study aids, or computer-related information.
(2) Plagiarism: representing words, data, pictures, figures, works, ideas, computer programs or outputs or anything generated by someone else, as one's own. Self-Plagiarism: resubmitting your own previously submitted work without proper citation and permission from the current instructor to whom the original work is subsequently submitted.

(3) Fabrication: presenting as genuine any invented or falsified citation, data or material.

(4) Misrepresentation: falsifying, altering, or misstating the contents of documents or other materials related to academic matters, including schedules, prerequisites, and transcripts.

Except in divisions that have an alternate academic misconduct policy that has been approved by the Provost, academic misconduct cases shall be resolved by the divisional academic misconduct monitor or the academic dean of the division in which the alleged action took place. Appeals from the monitor’s decisions may be made to the academic dean; appeals from the academic dean’s decisions may be made to the Office for Academic Affairs.

The Academic Misconduct Disciplinary Policy will be followed in the event of academic misconduct. Students are expected to be familiar with and adhere to the official Academic Misconduct Policy provided in the Online Catalog.

**Clinical Skills Competencies**

In a clinical program, academic performance includes more than grades on specific assignments; it also includes the student’s performance in meeting clinical obligations. Students are expected to be able to meet clinical competencies throughout the program, including engaging clients in the therapeutic process, assessing existing problems, and designing and implementing intervention strategies for improving outcomes.

The MFT faculty and supervisors evaluates students’ clinical competency throughout their time in the program. These judgements are subjective in nature and based on live clinical supervision, observation of video tapes, and case discussion within supervision. Every effort is made to corroborate these judgments among all clinical faculty. To facilitate this, grades for clinical performance (e.g., HD 667 & HD 668) are based upon the discussion among all supervision faculty involved in each grading period. Feedback from that discussion is made available to each student in both written and verbal form at the completion of each semester in which the student is enrolled in either a clinical or supervisory practicum.

Supervisors will also complete quantitative evaluation via the Practicum Evaluation at the end of each semester. One meeting per month is dedicated to the review of students’ clinical progress. When an area of concern is identified regarding a student’s clinical performance, specific strategies will be implemented in clinical supervision to help the student develop the necessary skills. This is a normal part of the supervision experience. However, if the MFT faculty/clinical supervisor believes that the problem is not alleviated through clinical supervision, the faculty member/clinical supervisor will discuss the concern with the MFT Program Director. The “Minor Deficiency Procedures” will be initiated (see below). If the problem is not alleviated through the improvement process, the problems will be considered a “severe deficiency,” and the “severe deficiency” procedure will be enacted.
The MFT Concentration’s policy follows the UA graduate school policy regarding the evaluation of student performance in programs including a clinical component.

“In graduate programs that include clinical components, practicum experiences, internships, or other similar program requirements, each student’s effectiveness will be given a broad-based evaluation by faculty and supervisors. Final decisions will be based on factors such as course grades, demonstrated clinical competence, personality factors, and relevant test scores. Many programs establish additional academic and/or professional requirements for their students. Failure to meet program requirements for academic progress and/or clinical components may result in the student’s being dismissed from the program. Dismissal from a degree program also results in suspension (dismissal) from the Graduate School” (UA Graduate School Handbook).

**Professional Competencies**

Students are expected to consistently interact in their work with faculty, clinical supervisors, internship placement supervisors, and other students in appropriate ways. Students are expected to adhere to the Capstone Family Therapy Clinic Policies and Procedures and off-site internship policies and procedures (if available). Students are to behave in professional fashion, taking care to discuss cases in confidential and sensitive ways, approaching colleagues with respect, and responding appropriately to feedback given by faculty and internship supervisors. When a student disagrees with the feedback of a faculty or site supervisor, the student is expected to discuss this with that person and not passively dismiss it or discuss it as a problem with other students and faculty. Similarly, students are expected to be sensitive when giving feedback to colleagues, recognizing when their advice may be ill timed or inappropriate to the situation.

Students must take appropriate steps to prevent their own mental health struggles from having a negative effect on their clients or others with whom they work, as judged by faculty or site supervisors. Students are expected to resolve any personal problems that impede their ability to be effective in their clinical work and/or their ability to be appropriate in their interaction with other students, faculty, or other professionals with whom they work.

Where students are unable to resolve their personal problems through their own efforts they may need to seek professional help. Where these issues are evident in the students’ conduct/clinical performance, faculty will provide feedback to students and encourage them to address the problematic issues. In cases where students’ emotional problems pose a risk to their clients, they may be immediately removed from cases and may be asked to immediately discontinue all clinical work. In cases where students fail to adequately address the problematic issues, the MFT faculty/clinical supervisor will discuss the concern with the MFT Program Director. The “Minor Deficiency Procedures” will be initiated (see below). If the problem is not alleviated through the improvement process, the problems may be considered a “severe deficiency,” and the “Severe Deficiency Procedures” will be enacted (see below).

**Ethical and Legal Competencies**

Each student and faculty member are required to understand and adhere to the ethical and legal guidelines outlined in Alabama Law and the AAMFT Code of Ethics. Any breach of legal or ethical code of conduct by student may be grounds for remediation or dismissal. As determined by the
faculty, students found to have engaged in or to be engaging in ethical misconduct in their clinical work or in other areas, such as misrepresenting facts in clinical paperwork or in communication with faculty, or engaging in other ethically questionable conduct, may be subject to corrective measures in addition to the “Minor Deficiency Procedures” or “Severe Deficiency Procedures” described below. When deemed appropriate, this may be submitted as a violation of the UA code of academic misconduct.

Non-Discrimination, Diversity, and Inclusion Code of Conduct
Our goal is to foster a spirit of respect and tolerance for others and take corrective action when we feel an individual's rights or dignity are not being protected (see Student Grievance, Deficiency, and Dismissal Procedures).

Below outlines our expectations for all those who participate in UA MFT program interactions, as well as the handling of unacceptable behavior. “MFT Program interactions” include, but is not limited to, MFT program events, including meetings, courses, conferences, staff meetings, non-MFT program courses, forums, and any other interaction involving students in the MFT program.

Expected Behavior
We expect all parties to abide by this Inclusivity Statement in all venues of UA and the UA MFT program, including ancillary or other events in any official capacity.

- Exercise consideration and respect in your speech and actions.
- Refrain from demeaning, discriminatory, or harassing behavior and speech.
- Be mindful of your surroundings and of your fellow participants.
- Alert UA MFT program faculty if you notice violations of this Inclusivity Statement.

Unacceptable Behavior
- Intimidating, derogatory or demeaning speech, or actions by any member of the UA MFT program, at all program-related events and in all personal and written communications.
- Harmful or prejudicial verbal or written comments or visual images related to gender, age, gender identity, race, health status, national origin, relationship status, sexual orientation, disability, ethnicity, socioeconomic status, and religion.
- Inappropriate use of nudity and/or sexual images in public spaces (including presentation slides).
- Deliberate stalking or following.
- Harassing photography or recording.
- Sustained disruption of talks or other events.
- Unwelcome and uninvited attention or contact.
- Physical assault (including unwelcome touching or groping).
- Real or implied threat of physical, professional, or financial damage or harm.
- Retaliation for reporting an incident is a violation of the Inclusivity Statement. Reporting an incident in bad faith is a violation of the Inclusivity Statement.

If You Are Subject or Witness to Unacceptable Behavior
If you are feeling uncomfortable or unsafe, witness any inappropriate behavior, or have any other concerns, please contact a UA MFT program faculty member.
If possible, provide the following information in writing on the provided form:

- Identifying information (name/badge number, appearance) of the participant who allegedly violated this policy.
- The behavior that was in violation.
- The approximate time of the behavior.
- The circumstances surrounding the incident.
- Other people involved in or witnessing the incident.

**Handling of Unacceptable Behavior**

Unacceptable behavior from any member of the UA MFT program will be addressed in a timely manner. Students who participate in unacceptable behavior will be subject to the procedures outlined below in “Remediation and Dismissal Procedures.”

**Remediation and Dismissal Procedures**

Generally, MFT faculty provide three levels of support for student development. The first level encompasses the typical day-to-day professional interactions and practices that occur during coursework and clinical supervision. The second level occurs when a student struggles to make progress on one or more competencies through typical coursework and supervision procedures. Such “minor deficiencies” will be addressed through the collaborative development and implementation of an improvement plan via the “Minor Deficiency Procedures.” The third level typically occurs when a student fails to make progress toward overcoming a “minor deficiency,” but there may be occasions when a “severe deficiency” appears suddenly (e.g., a student commits a significant ethical violation). “Severe deficiencies” are addressed through the collaborative development and implementation of a remediation plan via the “Severe Deficiency Procedures.” Failure to adequately address a “severe deficiency” will result in dismissal from the program.

**Minor Deficiency Procedures**

The following procedures outline students who do not adhere to the following: 1) Progress on one or more competencies through typical coursework and supervision procedures; 2) Non-discrimination, Diversity, and Inclusion Code of Conduct.

Clinical supervisors will identify the deficiency to be addressed and conduct initial goal setting to improve said deficiency. The following process will be enacted for problems not alleviated through initial goal setting in clinical supervision or if there are differing perspectives between student and supervisor as to the identification and/or severity of the identified issue:

- The student’s clinical supervisor will notify the MFT Program Director/Clinical Director, who will then discuss the deficiencies with the student and develop an improvement plan. The improvement plan will consist of the following:
  - Specific measures to be taken
  - Timeline for completing improvement plan
  - Means for determining whether measures taken have resulted in improvement
  - Consequences if student does not adequately remedy the problem
  - Protection of student rights during the process
A copy of the improvement plan will be finalized in writing with a copy given to the student, a copy to remain in the student's file, and copies for all members of the MFT faculty.

If the student fails to meet the outline improvement goals, the MFT faculty may make the determination that the problem is termed a “severe deficiency,” which will then initiate the “Severe Deficiency Procedures.”

Severe Deficiency Procedures

The MFT faculty will make the determination of when a problem (in the area of competency, ethics and/or professionalism) is termed a “severe deficiency.” “Severe Deficiency” is defined as 1) competency problems that are not alleviated through implementation strategies during clinical supervision and the aforementioned “Minor Deficiency Procedures; 2) egregious ethical violations. Problems that are termed “severe deficiency” will enact the following procedures; 3) egregious violation of the Non-Discrimination, Diversity, and Inclusion Code of Conduct:

- The student will meet with the MFT Faculty to discuss grievances and develop a plan for remediation. The plan for remediation will include at least the following components:
  - Specific measures to be taken
  - Timeline for completing remediation plan
  - Means for determining whether measures taken have resulted in remediation
  - Consequences if student does not adequately remedy the problem, which may include dismissal from the Graduate HDFS MFT Concentration, which also results in the dismissal from the Graduate School.
  - Protection of student rights during the process
- A copy of the grievance(s) and remediation plan will be finalized in writing with a copy given to the student, a copy to remain in the student's file, and copies for all members of the MFT faculty.
- The meeting summary will be given to the student, Department Chair, and if appropriate, the College of Human Environmental Sciences Assistant Dean for Student Affairs, and the Dean of the Graduate School.

At the end of the designated time, if the MFT Faculty determines that remediation has occurred, all of the individuals listed above receive notification by letter of that determination.

Dismissal from Program Procedures

If the student still does not resolve the severe deficiencies s/he may be dismissed from the program. Below are the procedures outlining the dismissal process:

- The student will be given the opportunity to prepare and present his/her case to the MFT faculty. The MFT faculty will make a recommendation to the HDFS Department Chair and Graduate Faculty based on input from the student and the MFT faculty.
- If the student remains in good academic standing the HDFS Department Chair and Graduate Faculty may offer the student the option of formally changing into a different HDFS graduate concentration. If the student decides to apply to a
different Graduate HDFS Concentration, he/she will follow Departmental procedures for switching concentrations.

- If the recommendation is made to withdraw the student from the HDFS Marriage and Family Therapy Concentration and the student is not offered to transfer concentration within the department, the committee will prepare a statement reiterating the grievances and forward it to the student, the HDFS Department Chair, and when appropriate the CHES Assistant Dean for Student Affairs, and the Dean of the Graduate School.

- If the final decision is to dismiss the student from the graduate school, the MFT faculty will be responsible for facilitating this transition for the student.

The student dismissed from the program will receive a letter from the Program Director notifying him/her of dismissal. Copies of the letter may also be sent to all MFT faculty members, HDFS Department Chair, and the Dean of the Graduate School. A copy will also be placed in the student's file. Students seeking to appeal the dismissal decision will follow the UA student grievance policy outlined in the Faculty Handbook (https://catalog.ua.edu/graduate/about/general-information/grievance-procedure-faculty-handbook/).

Counseling a student out of the program is a difficult situation for both faculty and students. Where possible, faculty will work with those students who exhibit severe deficiencies in an effort to assist them in correcting the problems. Where remedial action on the part of the student is not deemed feasible such as in cases, including, but not limited to, ethical misconduct or emotional instability, the student may be dismissed from the program. In such cases the student will be given specific feedback about the reasons for his/her dismissal. The members of the MFT faculty remain committed to students’ growth and are invested in the success of all students in the program. As such we will make every effort to help students address any deficiencies in a way that will allow students to benefit fully from the training and to reach their potential as therapists.


Supervisors and Internship Sites

**Difficulties with Supervisors**

Difficulties with clinical supervisors will be addressed in the following manner:

- The Program Director will communicate directly with the supervisor about the concern.
- The Program Director and supervisor will discuss an action plan to address the concern.

**Difficulties with Internship Site**

Difficulties with internship sites will be addressed in the following manner:

- The Program Director will communicate directly with the internship site supervisor about the concern.
- The Program Director and supervisor will discuss an action plan to address the concern.

**Degree Portability for Licensure Acknowledgement**

Before beginning their program of study, students will acknowledge in writing that, while the UA MFT program meets licensure requirements and regulations in Alabama and many other states, there may be states in which the degree may not meet state licensure and regulation requirements. Students will sign the “MFT Degree Portability Acknowledgement” form (see Appendices) by July 15th for students beginning the program in the Fall semester. Students will sign the acknowledgement form via Docusign.

**Technology Use**

**Student Technology Requirements**

Neither the UA Graduate School nor the UA HDFS Graduate Programs have specific technology requirements for students in the program. However, we recommend that students have easy access to:

- A modern computer with internet access
- Word processing software
- Presentation software
- E-mail software
- Calendar software
- Web browsing software

UA OIT offers guidance for students considering the purchase of computer hardware at https://www.depts.ttu.edu/ithelpcentral/recommend/.

The University of Alabama has site license software agreements with a large number of vendors, many of which provide free software to students. We strongly encourage students to take advantage of the site license for Microsoft Office 365 and UA Box. The software is free to students, provides the recommended software, and 1TB of cloud storage. A list of site licensed

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software and instructions for downloading the software is available at https://oit.ua.edu/software/

Students have access to Computer Labs. Information can be found at https://oit.ua.edu/service/computer-labs/. Students in the MFT Program also have access to the computers in the CFTC clinic office (Child Development Research Center Room 253). The UA MFT Graduate Program does not require specific software or hardware training. However, basic familiarity with word processing, presentation, web browsing, and e-mail software is strongly recommended and will be necessary for successful completion of your degree. Individual courses will require writing papers and developing class presentations. Also, the vast majority of official University and UA MFT Program communication will take place using e-mail. All UA MFT students are provided with an individual school e-mail account. Office of Information Technology Support offers a wide variety of technology services at no cost (see https://oit.ua.edu/services/).

Students will receive training in the use of the electronic client file management system used by the UA Capstone Family Therapy Clinic during new student orientation and/or during clinical practicum. Training in the use of research/statistical software will take place as part of student’s required courses.

**Digital Recording System**
Students will be trained in the use of the Clinical Services Center digital recording system by the Director of Clinical Training during HD 567: Pre-practicum.

**Session Case Notes**
Students will follow the Capstone Family Therapy Clinic Policy and Procedure Manual regarding creation and storage of session case notes.

**Adherence to UA’s OIT Technology Procedures**
Students will adhere to UA’s Office of Information Technology’s (OIT) procedures on technology usage (https://oit.ua.edu/about/policies/).

**HIPAA**
Students are expected to adhere to HIPAA (i.e., privacy and security regarding electronic patient health information) during all clinical work. Students will complete HIPPA training in HD 641: Ethics and Professional Issues in Marriage and Family Therapy during their Fall of their 1st year. Following HIPAA training, students will submit a HIPAA completion certificate.

**Annual CFTC Technology Usage Agreement**
Students will complete a CFTC technology usage agreement during the Fall of their 1st year, following HIPAA training (in HD 641). Students will complete the “Capstone Family Therapy Clinic Technology Usage Agreement” every subsequent August until graduation from the program (see appendix).
Evaluation of Program Goals and Student Learning Outcomes

The UA MFT Program is committed to a recursive process of data collection and evaluation. The process is designed to evaluate student achievement on Program Goals and Student Learning Outcomes, Program Director and Director of Clinical Training Effectiveness, Environmental Resources and Supports, curriculum, and supervisor effectiveness.

The program faculty will meet annually (during summer) to review the relevant aggregated data and to adjust the program design to best meet program goals and student learning outcomes. Faculty review data to assess whether students, faculty, and the program as a whole are meeting established benchmarks. Where benchmarks are not met, faculty identify ways to strengthen the training in order to improve student development. During these annual meetings faculty also review the Student Learning Outcomes of the program, the methods for assessing outcomes, the teaching and learning practices in the program, policies, and procedures of the program, and feedback from students and other communities of interest. See below UA MFT Program Assessment Plan.
<table>
<thead>
<tr>
<th>Component</th>
<th>Measure</th>
<th>Data Collection Timeline</th>
<th>Date Preparation for Review</th>
<th>Data Review &amp; Action Steps</th>
<th>COI Input into Review Process</th>
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<tr>
<td><strong>Program Achievement: Program Goals and Student Learning Outcomes</strong></td>
<td>Supervisor Completes Final Student Evaluation</td>
<td>Every April</td>
<td>Program Director aggregates data</td>
<td>Core faculty analyze data at Summer MFT faculty retreat for meeting competency targets and take action as needed</td>
<td>Core Faculty: Summer retreat with Core Faculty&lt;br&gt;Students: Fall Program Meeting with Core Program Faculty&lt;br&gt;Supervisors: Fall meeting with Program supervisors&lt;br&gt;Department Chair: Program Director Fall email update&lt;br&gt;Department Faculty: Program Director Fall email update&lt;br&gt;Community Site Supervisors: Program Director Fall email update&lt;br&gt;Graduates: Program Director Fall email update</td>
<td>Summer, even numbered years</td>
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<tr>
<td><strong>Graduation Rate</strong></td>
<td>Program completion data from Registrar’s office</td>
<td>Every May</td>
<td>Program Director confirms program completion data from Registrar’s office</td>
<td>Core faculty analyze data at Summer MFT Faculty Retreat and take action as needed</td>
<td>Same as above</td>
<td>Same as above</td>
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<tr>
<td><strong>Licensure Exam Pass Rate</strong></td>
<td>Annual Recent Graduate/</td>
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<td>Program Director complies data</td>
<td>Core faculty analyze benchmark data (70%) at Summer MFT Faculty</td>
<td>Same as above</td>
<td>Same as above</td>
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<td></td>
<td>Graduate Survey</td>
<td>Retreat and take action as needed</td>
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<tr>
<td><strong>Job Placement Rate</strong></td>
<td>Annual Recent Graduate/Graduate Survey</td>
<td>Core faculty analyze data at Summer MFT Faculty Retreat and take action as needed</td>
<td>Same as above</td>
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<td></td>
<td>Every Summer</td>
<td>Same as above</td>
<td>Same as above</td>
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</tbody>
</table>
| **Evaluation of Outcome-Based Education (OBE) framework and its assessment plan** | Outcome-Based Evaluation Framework Assessment Data 
& Graduate Achievement Data | Program Director compiles data from two completed assessment cycles (four-year timeframe)      | Program Director convenes OBE Review Committee of core-faculty and COI representatives to review data and draft recommendations for program action | COI groups informed following end of process through mechanisms identified above | Summer every four years |
|                                    | PD compiles data from two completed assessment cycles (four-year timeframe)     | Program Director compiles data from two completed assessment cycles (four-year timeframe)       | Program Director convenes OBE Review Committee of core-faculty and COI representatives to review data and draft recommendations for program action | COI groups informed following end of process through mechanisms identified above | Summer every four years |
## UA MFT Program Assessment Plan: Environmental Resources and Supports

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<th>Measure</th>
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<td>Students: Fall Program Update with Program Director; Supervisors: Summer Meeting; Graduates: Program Director Fall Email</td>
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<td>Physical Resources</td>
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<td>Same</td>
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<td>Supervisor Resource Survey (questions 1-4)</td>
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<td>Technology Resources</td>
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<td>March 31</td>
<td>Same</td>
<td>Same</td>
<td>Same</td>
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<tr>
<td></td>
<td>Supervisors</td>
<td>Supervisor Resource Survey (question 5-7)</td>
<td>March 31</td>
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<tr>
<td></td>
<td>Recent Graduates</td>
<td>Recent Graduate Survey (questions 26-28)</td>
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<td>Instructional Resources</td>
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<td>March 31</td>
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<td>Supervisors</td>
<td>Supervisor Resource Survey (questions 23-24)</td>
<td>March 31</td>
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<td>Recent Graduates</td>
<td>Recent Graduate Survey (questions 29-30)</td>
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<td>Supervisor Resource Survey (questions 10-15)</td>
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<td>Clinical Resources (including teletherapy/virtual supervision)</td>
<td>Recent Graduates</td>
<td>Recent Graduate Survey (questions 31-36)</td>
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<td>Student Academic Resources</td>
<td>Current Students</td>
<td>End of Year Student Survey (questions 32-33)</td>
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<td>Supervisors</td>
<td>Supervisor Resource Survey (questions 19-20)</td>
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<td>Recent Graduates</td>
<td>Recent Graduate Survey (questions 40-41)</td>
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<td>Supervisors</td>
<td>Supervisor Resource Survey (questions 21-22)</td>
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<td>Recent Graduates</td>
<td>Recent Graduate Survey (questions 42-43)</td>
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</table>
### UA MFT Program Assessment Plan: Program Director Effectiveness, Director of Clinical Training Effectiveness, Curriculum, Supervisor Effectiveness

<table>
<thead>
<tr>
<th>Component</th>
<th>Identified COIs Engaged for input</th>
<th>Measure</th>
<th>Data Collection Timeline</th>
<th>Date Preparation for Review</th>
<th>Data Review &amp; Action Steps</th>
<th>Program Feedback/Advocacy to COIs</th>
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<td>Annual Student Evaluation of MFT Program Director</td>
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<td>Program Director aggregates data</td>
<td>Core faculty review data during Summer faculty retreat and identify action items ;</td>
<td>Students: Fall Program Update with Program Director</td>
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<td></td>
<td>Core MFT Faculty/Supervisors/Department Chair</td>
<td>Annual Core MFT Faculty/Supervisor/Department Chair Evaluation of MFT Program Director</td>
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<td>Summer PD Meeting with Department Chair with applicable suggestions for change</td>
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<td>Director of Clinical Training Effectiveness</td>
<td>Current Students</td>
<td>Annual Student Evaluation of MFT Director of Clinical Training</td>
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<td>Same</td>
<td>Same</td>
<td>Same</td>
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<tr>
<td></td>
<td>Core MFT Faculty/Supervisors/Department Chair</td>
<td>Annual Core MFT Faculty/Supervisor/Department Chair Evaluation of Director of Clinical Training</td>
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<td>Same</td>
<td>Same</td>
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<td>Curriculum</td>
<td>Current Students</td>
<td>End of Year Student Survey (questions 39-40)</td>
<td>March 31</td>
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<td>Supervisor Resource Survey (questions 28-29)</td>
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<td>Recent Graduates</td>
<td>Recent Graduate Survey (questions 43-44)</td>
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<td>Non-Recent Graduates</td>
<td>Graduate Survey (Question 41)</td>
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<td>Supervisor Effectiveness</td>
<td>Current Students</td>
<td>Supervisor Evaluation Survey</td>
<td>December 1, March 31, and July 31</td>
<td>Same</td>
<td>Core Faculty reviews data in September, May, and January</td>
<td>Supervisor: Meeting in September, May, and January</td>
</tr>
</tbody>
</table>
Performance and Retention

Academics
Students are expected to be invested in their academic coursework and to be active participants in the learning process. The UA MFT Program requires that all graduate students maintain a minimum of 3.0 throughout the course of the program. Final course grades of lower than a “C” or lower will not be accepted or applied to your degree plan. Any course in which a final grade of lower than a “C” is earned must be repeated until a grade of “C” or higher is achieved. Students that demonstrate a pattern of difficulty meeting the grade standard will meet with the Program Director to develop a remediation plan (see Grievance, Deficiency, & Dismissal, and Procedures).

Ethics
Students are expected to conduct themselves in their clinical work and in their general conduct according to ethical and legal guidelines as outlined in Alabama law and the AAMFT code of ethics. Due to the sensitivity of the professional role of a marriage and family therapist, ethical conduct is taken very seriously. As determined by the faculty, students found to have engaged in or to be engaging in ethical misconduct in their clinical work or in other areas such as cheating in coursework, misrepresenting facts in clinical paperwork or in communication with faculty, or engaging in other ethically questionable conduct may be subject to corrective measures (see Program, Grievance, Deficiency, & Dismissal, and Procedures).

Clinical Performance
As a program, we endeavor to train high quality relational systemic clinicians. Sometimes, even academically capable students will face challenges with the clinical application of knowledge. Students are expected to be able to appropriately apply theoretical material in the clinic setting. This relates to being able to engage clients in therapy, assess existing problems, and design and implement intervention strategies. Students are expected to be familiar with a variety of family therapy and evidenced-based theories. A deficiency may exist when a student appears to not be able to apply general tenets of systems theory, apply specific tenets of family therapy theory, or struggles to join effectively with clients as guided by the practicum supervisor. When an area of concern is identified with regard to a student’s clinical performance, specific goals and strategies will be implemented in supervision to help the student develop the necessary skills. This is a normal part of the supervision experience. However, if the faculty or site supervisor believes that the problem fits within the category of a minor deficiency (or beyond), the Grievance, Deficiency, & Dismissal, and Procedures will be enacted.

Professionalism
Students are expected to consistently interact in their work with faculty, site supervisors, and other students in appropriate ways. Students are expected to behave in professional fashion, taking care to discuss cases in confidential and sensitive ways, approaching colleagues with respect, and responding appropriately to feedback given by faculty and site supervisors. When a student disagrees with the feedback of a faculty or site supervisor, the student is expected to discuss this with that person and not passively dismiss it or discuss it as a problem with other students and faculty. Similarly, students are expected to be sensitive when giving feedback to colleagues, recognizing when their advice may be ill timed or inappropriate to the situation.

We encourage the free expression and discussion of ideas in an environment that is supportive of diversity of experience and perspectives. While we would never want to encourage an environment
where any point of view is suppressed, we expect students and faculty to be able to engage in
discussion, debate, or disagreement while maintaining respect for all involved. Students who are
disruptive to the mission and goals of the program due to unprofessional behavior may be subject to
the Grievance, Deficiency, & Dismissal, and Procedures.

What should I do if I am Struggling?
In our experience, one of the most frequent mistakes made by graduate students is to assume they
have to do it all, on their own. The UA MFT program faculty are fully invested in your success and
want to see you achieve your goals. We will work with you and make any reasonable
accommodations we can to ensure your success.

Don’t wait until it is too late, and an issue has compromised your academic, clinical, or
professional performance.

If you find yourself struggling academically, clinically, professionally, or personally:
- Talk with the Program Director or Director of Clinical Training to identify steps you may
take to address the concerns.
- Talk with the MFT Program Director to make changes to your plan of study where possible.
- Talk to a therapist. It is surprising how many therapists are resistant to engaging in therapy
  for themselves. If you need help identifying a therapist, we can provide referrals.
UA MFT Handbook Updates

The UA MFT Program undergoes periodic reviews by program faculty (described earlier in this handbook). These reviews are primarily focused on program improvements related to coursework, policies, and contemporary educational standards and often are based on student and alumni feedback, as well as site supervisor feedback. In addition, as a comprehensive master’s degree program, policy or procedural changes are sometimes required to conform to national accreditation standards, state licensure guidelines, college or university policies, or advances in the broader counseling profession.

Before implementation, programmatic changes will be thoroughly reviewed by MFT core program faculty members and university administration. Some programmatic changes may apply only to newly admitted MFC/T Master’s students starting the program during the semester admitted. However, when deemed necessary for program integrity and student success, some programmatic changes may apply to all current/active UA MFT students regardless of admission date. If programmatic changes are implemented after a student has already been admitted into the program, program faculty will inform all students of programmatic changes applicable to them by sending an E-mail to all active UA MFT students, as well as holding meetings to discuss the changes.

If an academic/programmatic issue arises that is not addressed in this manual, or an extraordinary change in policy is needed immediately (i.e., before a new student handbook is disseminated) to help ensure a student’s academic success, core Program faculty shall deliberate about the issue on a case-by-case basis.

The UA MFT Program faculty encourages all students to fully participate in the program’s academic and training process. The program’s success is predicated upon students and faculty working together for students’ success, clients’ mental health, programmatic improvements, and societal advancement. Student contributions are therefore expected, welcomed, and appreciated throughout the program via active student surveys, exit surveys, and alumni surveys.
Additional Procedures

**Human Subject Research**
All research involving human subjects, whether led by faculty or independently pursued by students is governed by UA’s Office of Research Compliance (ORC) and Institutional Review Board (IRB). All students must be familiar with and follow the requirements for proposal submission and reporting established by the IRB, BEFORE starting any research that involve human subjects or data collected from human subjects. It is expected that you will work in conjunction with faculty to ensure that you are following appropriate ORC and IRB protocols. The policies and procedures for human subject research are available at: http://ovpred.ua.edu/research-compliance/institutional-review-board-irb/

**Publications**
In conducting research and in assigning authorship to publications, students and faculty in the MFT Program follow the relevant regulations on conduct of research with human participants as well as the AAMFT Ethical Principles. 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 and a student on work done in the course 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 or independent study would not ordinarily receive co-authorship. In the event of substantial contributions, co-authorship by faculty members and students is warranted.

**Access to Personal Records**
Guidelines governing student access to personal records and the procedures for challenging information in these records are located at https://registrar.ua.edu/academics-policies/ferpa/

**Sexual Harassment & Misconduct**
The University of Alabama does not tolerate sexual harassment misconduct, and the UA MFT strictly adhere to all policies concerning sexual harassment. The Title IX policy and reporting procedures at https://titleix.ua.edu/

**Students with Disabilities**
The UA MFT Program adheres to all policies concerning individuals with disabilities as stated under the Office of Disability Services (ODS). The policy and reporting procedures are located at http://ods.ua.edu/.

**Grade Appeals**
Students who wish to appeal a course grade should follow the policies and procedures outlined by the Graduate School and the College of Human Environmental Sciences. 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.
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 will follow the policies found at [https://catalog.ua.edu/graduate/](https://catalog.ua.edu/graduate/).

Advising
The MFT Program Director will be the academic advisor for students enrolled in the UA MFT Program. The faculty advisor is responsible for official program advising and research mentorship, including program policy, curriculum advising, licensure, internship/externship placement, and comprehensive exam progress. The advisor has the responsibility to communicate concerns about, or from, the student to the faculty, and will relay feedback from the faculty to the student. The advisor will evaluate progress of the student annually to determine the progress of the student in fulfilling the requirements for their degree in the pursuit of their post-graduate goals. Students considering pursuing licensure in other states are strongly encouraged to consult with their advisor and visit the licensure board for the state of interest.

It is important to note that each student also has responsibilities related to the advisee-advisor relationship. Developmentally, it is an appropriate time in graduate school to begin the process of becoming an independent and self-sufficient professional. The student’s primary responsibility is to access her/his resources prior to contacting her/his advisor. This includes reading through and accessing the program manual as needed. The student also should take the role of a self-advocate, and reach out to her/his faculty advisor when s/he has questions/concerns or when s/he is struggling and may be in need of accommodations.

AAMFT Membership
Students are expected to become student members of AAMFT within their first semester of joining the UA MFT program. Guidelines for applying are found on the website at [www.aamft.org](http://www.aamft.org).
SECTION IV: APPENDICIES
**Commonly Asked Questions about the UA MFT Program**

How do I know what classes I should take?
The Program Director will be your academic advisor throughout the program and the primary source of information about the classes you should take. In addition, a curriculum with recommended sequence is included in this handbook.

Is health insurance available for graduate students?
Yes. Some graduate students receive health insurance from UA as part of their graduate assistantship package. If your graduate assistantship does not provide health insurance, or you are not on an assistantship, you can enroll in UA’s Student Injury and Sickness Insurance Plan with UnitedHealthcare Student Resources (UHCSR). Eligible UA students can voluntarily enroll in the health plan on a semester basis or for the entire plan year beginning August 1 and ending in July 31 of each academic year. More information can be found at [https://shc.sa.ua.edu/billing/university-sponsored-health-insurance/](https://shc.sa.ua.edu/billing/university-sponsored-health-insurance/)

Are computers available for student use?
There are several means for students to have access to computers. There are computers available to clinically active students in the CFTC clinic office (Human Development Research Center #253). The UA Library also has laptops available to check-out. More information on laptop check-out can be found at [https://www.lib.ua.edu/using-the-library/equipment/](https://www.lib.ua.edu/using-the-library/equipment/)

When will I know about assistantships and financial aid opportunities?
Assistantships are assigned each Spring by the HDFS Department Chair. The number of assistantships available vary from year to year. All students who apply to the program are also considered to have applied for an assistantship. No additional assistantship application is required.

In addition, there are other sources of financial assistance, such as scholarships and fellowships. Consult the UA Graduate School website for more information: [https://graduate.ua.edu/](https://graduate.ua.edu/)

Finally, there are government loan programs for which you might qualify. Consult the UA Student Financial Aid website for more information: [https://financialaid.ua.edu/](https://financialaid.ua.edu/)

How much time should I plan to commit to this program?
Most students complete the program in five semesters, taking a full load of classes and having clinical responsibilities every semester. It is likely that the time commitment increases with each semester due to the increasing clinical responsibilities. Even as a full-time program, most students take about two-years to complete all graduation requirements. Students have six years to complete their degree requirements.
Do I have to complete a thesis?
No, there is no requirement to complete a thesis. However, students must pass a Comprehensive Examination (see description in UA MFT Program Handbook).

Should I join a professional organization?
Yes. You will be expected during your time at UA to become a student member of AAMFT/Alabama MFT and to actively participate in professional development activities. Becoming an active professional is highly encouraged. AAMFT has a website with much valuable information (including a membership application) at http://www.aamft.org.

Am I guaranteed a job when I finish?
No, but the employment record of our graduates is excellent. Most of our graduates have been able to find employment as therapists (in a private practice or agency setting) within a few months after graduation (many before graduation), even when competing in some very tough job markets.

How will I know when I am finished with my degree?
You will be finished with your M.S. in HDFS with a concentration in MFT when you:
• Completed all classes on your degree plan (receiving an average of a B /3.0 GPA across all course)
• Completed 500 (minimum) hours client contact with at least 250 hours with couples or families present
• Completed 100 (minimum) hours of supervision (including both group and individual)
• Passed Comprehensive Exam

What support services are available to me?
Students are entitled to 15 counseling sessions per academic year through the UA Counseling Center in 3000 South Lawn Office Building. For more information go to: https://counseling.sa.ua.edu/ Or, to contact the Counseling Center call 205-348-3863.
Tuition

Graduate Campus Student Tuition rates are listed at the following website: (https://studentaccounts.ua.edu/cost/tuition-rates/#graduate):

Applying for Graduation

All students are required to submit a degree application in order to graduate. The degree application should be filed for the term in which the student expects to complete all degree requirements. Students need to pay specific attention to the published deadlines for submitting the application for graduation. Late submissions may delay your graduation. Instructions can be found at: https://registrar.ua.edu/graduation/

Alignment Between Program Educational Requirements and Licensure Requirements

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<tr>
<th>Alabama MFT Licensure Requirements</th>
<th>UA MFT Course Alignment</th>
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<tr>
<td>Marriage and Family Studies (3 credit hours)</td>
<td>HD 562: Dynamics of Family Relations (3)</td>
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</table>
| Marriage and Family Therapy (9 credit hours) | HD 664: Family Therapy (3)  
   HD 665: Advanced Family Therapy (3)  
   HD 640: Couple and Sex Therapy (3) |
| Human Development (3 credit hours) | HD 500: Life Span Development (3) |
| Professional Ethics (3 credit hours) | HD 641: Ethics and Professional Issues in MFT (3) |
| Research (3 credit hours) | HES 509: Research Methods |
| Mental Health Diagnosis (3 credit hours) | HD 642: Systemic Assessment and Diagnosis of Psychopathology in MFT (3) |
| Supervised Clinical Internship (minimum 12-months) | HD 567: Practicum (3) – 4 months  
   HD 568: Practicum I (3) – 4 months  
   HD 667: Practicum II (3) – 2 months  
   HD 668: Internship (6) – 9 months |

* Students who graduate from a COAMFTE accredited program have met the educational requirements for licensure as an LMFT in Alabama (https://mft.alabama.gov/rules.aspx).
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<tr>
<th><strong>Graduate School Links</strong></th>
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<td><a href="https://catalog.ua.edu/graduate/">https://catalog.ua.edu/graduate/</a></td>
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<td><strong>Academics</strong></td>
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<td><a href="https://catalog.ua.edu/graduate/about/general-information/financial-assistance/index.html">https://catalog.ua.edu/graduate/about/general-information/financial-assistance/index.html</a></td>
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<tr>
<td>GTA Workshop materials (Student of Concern etc.)</td>
<td><a href="https://graduate.ua.edu/events/gta/">https://graduate.ua.edu/events/gta/</a></td>
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<td>Performance evaluation policy for GTA/GRA/GA</td>
<td><a href="https://www.ua.edu/about/policies/files/Teaching%20Credentials%20for%20UA%20Faculty%20and%20Teaching%20Assistants%20Policy.pdf">https://www.ua.edu/about/policies/files/Teaching%20Credentials%20for%20UA%20Faculty%20and%20Teaching%20Assistants%20Policy.pdf</a></td>
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<td>Fellowships &amp; Financial Aid</td>
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<td>UA Jobs site for student employment</td>
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<td><strong>Resources</strong></td>
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<td>Student health insurance</td>
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<td>Career Center and other job resources/guidance</td>
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<td>Student Care &amp; Wellbeing</td>
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<td>Capstone International Center</td>
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<tr>
<td>Office of Disability Services (ADA accommodations etc.)</td>
<td><a href="http://ods.ua.edu/">http://ods.ua.edu/</a></td>
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UA MFT Program Degree Portability Acknowledgement

Marriage and Family Therapy is a profession that leads to licensure in all 50 states; however, each state has its own laws and regulations about what is needed to become licensed as a MFT in that state.

Most states require coursework in specific areas, such as ethics, assessment and diagnosis, research, and family theories. Most states also require a specific number of therapy hours to be completed under supervision. Usually, some of those hours are completed as a student in a training program and additional hours are completed after graduation from a training program.

- This is a link to each state’s license requirements: MFT State Resources (aamft.org)

Not every state will accept a degree and supervised hours earned in another state. Review license requirements in the state you intend to practice as soon as possible so that you understand what may and may not be accepted across state lines.

The coursework in this training program was designed to match the laws for MFT licensure in Alabama. You may read more about the state requirements for MFT licensure in Alabama by clicking this link: Alabama MFT Rules and Regulations

If you have questions about the program’s alignment with professional licensure you may contact the Program Director: Dr. Blake Berryhill at bberryhill@ches.ua.edu.

If have no unanswered questions, please sign this form. It is recommended that you keep a copy for your personal files.

By signing, I acknowledge that I have been informed and am aware that licensing regulations differ across states and provinces. I understand that the UA MFT program is designed to meet the licensure requirements in the state of Alabama, and that a MFT degree from this program may not meet MFT licensing requirements in a different state.
Capstone Family Therapy Clinic Technology Usage Agreement

The following Capstone Family Therapy Clinic (CFTC) Technology Usage Agreement describes UA MFT student responsibilities for using technology for clinical purposes. Students who sign this document agree to the following:

- Adhere to HIPAA regulations (i.e., privacy and security regarding electronic patient health information) during all clinical work
- Adhere to the CFTC Policy and Procedure Manual regarding creation and storage of session case notes, including writing all session notes in the clinic office, storing client session notes in HIPAA compliant UA Box
- Adhere to UA’s Office of Information Technology’s (OIT) procedures on technology usage (https://oit.ua.edu/about/policies/)

I agree to follow all responsibilities regarding technology usage listed in this document.
Department of Human Development and Family Studies
Marriage and Family Therapy

I reviewed the MFT Program Handbook of the HDFS Marriage and Family Concentration Program. I have discussed my questions with the program coordinator and/or faculty members. I understand that I am responsible for the information presented in the handbook. By signing this document, I affirm that I have read and understood the terms outlined in the handbook and that I agree to abide by those terms.

Student Name: __________________________________________________________________________

Student Signature: __________________________________________________________________________

Date: __________________________________________________________________________

Note: Please return this document to the Program Director, Dr. Blake Berryhill, by September 15th. This document will be placed in your student file.