Instructor: Tiffany B. Brown, Ph.D., LMFT
Class Location: 117 Lokey (College of Education)
Office Hours: By appointment (call/cancel 24 hours in advance)
Phone: 346-2117 (office)
Email: tiffanyb@uoregon.edu

Course Description: The purpose of this course is to prepare beginning therapists for integrated clinical practice. Drawing from common elements across diverse models of therapy, students will learn clinically appropriate protocol for beginning, middle, and closing phases of treatment. This class will use a combination of didactic lecture, classroom discussion, experiential exercises, small group role-plays, skills groups with advanced therapists, and group activities.

Course Learning Outcomes:
1. To further grasp the application of systemic concepts in therapy.
2. To develop conceptual and applied skills in relation to clinical assessment, client engagement, planning, and reflexivity.
3. To develop skills in crisis assessment and intervention.
4. To increase comfort levels for working with client/therapist diversity in the therapy room.
5. To develop skills in client record keeping such as clinical notes and treatment planning.

COAMFTE Core Competencies Addressed in this Course:
1.2.3 Recognize issues that might suggest referral for specialized evaluation, assessment, or care.
1.3.4 Explain practice setting rules, fees, rights, and responsibilities of each party, including privacy, confidentiality policies, and duty to care to client or legal guardian.
1.3.5 Obtain consent to treatment from all responsible persons.
1.5.3 Develop, establish, and maintain policies for fees, payment, record keeping, and confidentiality.
2.3.5 Screen and develop adequate safety plans for substance abuse, child and elder maltreatment, domestic violence, physical violence, suicide potential, and dangerousness to self and others.
3.3.3 Develop a clear plan of how sessions will be conducted
3.4.3 Evaluate level of risks, management of risks, crises, and emergencies
5.3.3 Inform clients and legal guardian of limitations to confidentiality and parameters of mandatory reporting
5.3.4 Develop safety plans for clients who present with potential self-harm, suicide, abuse, or violence.

Counseling Psychology Program Competencies Addressed in this Course:
4b: Students use science and relevant theories to develop treatment plans and implement appropriate interventions.
5a: Students demonstrate incorporation of the ecological model in case conceptualization, intervention, and evaluation of treatment.
6a: Students demonstrate awareness and understanding of diversity and contextual issues (e.g., culture, identity, gender, sexual orientation, disability, marginalization, poverty, etc.).
6b: Students apply knowledge of diversity and contextual issues to all aspects of clinical work.
6c: Students demonstrate awareness of multicultural and contextual issues in their professional interactions and commitment to relevant guidelines (e.g., APA's Multicultural Guidelines).
7b: Students demonstrate commitment to learning and enhancement of multicultural competencies, including continued development of critical self-awareness in areas such as privilege, power, social justice, and identity.
8b: Students gain didactic and applied experiences that support their career goals within the specialty of counseling psychology.
9a: Students demonstrate knowledge of relevant ethical and legal codes (e.g., APA's Ethical Standards).
9b: Students demonstrate competence in applying established ethical principles and practices in all facets of their professional work with both adults and child/family populations.
11a: Students demonstrate the ability to collaborate in training, clinical practice, and research.
11b: Students demonstrate facilitative interpersonal skills with others, including supervisors, peers, staff, and supervisees.
11c: Students are responsive to feedback from faculty, supervisors, and peers.
12a: Student attitudes and behaviors indicate a commitment to continuous learning and to their ongoing personal and professional development.
12b: Students demonstrate awareness of their strengths and areas of needed development as they progress through the program, including recognizing how their privilege, identities, and power influence their research and practice activities.

**Required Texts:**
Select a theory of change specific text by a major author(s) from the perspective of a selected clinical model. (*All texts must be approved by the instructor.*)

Additional readings available through blackboard.

**Strongly Recommended Texts:**

**Course Requirements**

Below is a list of assignments that link to the Student Learning Outcomes (SLO). For example, “SLO1” may be listed. Please refer to the back page of the syllabus for all Educational Outcomes, including a list of SLOs.

1. Attendance/Class Participation (25 points; SLO1):
   Attendance is expected and necessary for you to do well in the class. Each student may miss one class without a penalty; five points will be deducted from your attendance grade for each class missed thereafter. It is expected that students will participate in class discussions, experiential exercises, and group activities designed to make the learning process active and collaborative. In addition, I expect that you will come to each class prepared to discuss aspects of the readings. Given the multiple perspectives in the classroom, I am hopeful (and ultimately expect) that we make room for diverse perspectives and experiences. Students are expected to self-monitor their work on their laptops during the course. Do not use class time to return emails or be on the Internet as it is disrespectful to the instructor, your colleagues, and your learning.

   Students will participate in reading from a text of their choice that focuses on a model related to their field of therapy. Please be prepared to sign up for your text in week two. If you need help determining a book, please contact the instructor.

   Advanced Counseling Psychology doctoral students will be joining our class for weeks 2-6 to conduct skills groups that are aimed at putting the course content of that day “in action.” Skills groups will be for the second part of the class in separate meeting rooms across Lokey and HEDCO. You will be assigned to a group and will receive these details (including your fellow group members, location of your skills group, and your supervisor) via email during week one. The CPSY supervisors are currently in a supervision course and gaining important experience in the supervisory role. Their role will be to conduct the skills groups and provide relevant feedback given their vast clinical experience. In addition, CPSY supervisors will play important roles in the COMPS II exam for CFT students.

2. Treatment Planning Exercise (20 points; SLO3, SLO4, SLO5):
   Students will work in groups of two for this assignment. Please note: this assignment has three parts and will require you to work with a partner for two of the sections of the assignment.
   a) Students will work with a partner to practice the conversation of treatment planning with a client through a mock treatment planning session (aim for a 30-minute role-play each to elicit the conversation). If possible, it would be useful to practice in an actual therapy room to get the “feel” of the space and to make the conversation more formal. If you choose to do this role-play in a different environment, please arrange it to be as much like a therapy room experience as possible (for example, do not sit across from each other at a table). In this exercise, the main objective is to build language around treatment planning, asking clients about goals, and building measurable objectives.
b) Students will write a mock treatment plan based on their role play (including 2 goals with 2 associated objectives with each goal). Students will work in groups of two to write the treatment plan (one treatment plan per pair will be turned in). You are welcome to talk about goals and objectives with others to formulate ideas (this is useful as you begin to learn the language of treatment planning). You will be given a blank treatment plan to use for the assignment and you can either write it out by hand or via a word document (you can use the electronic copy of the treatment plan on blackboard). Your treatment plan will be an opportunity to practice writing measurable goals and objectives and will also be a chance to receive direct feedback on goal setting before working with clients. Also, write MOCK TREATMENT PLAN in large letters at the top of the form so it is clear that it is not an actual clinical record. (10 points)

c) In addition to writing a treatment plan, each student will turn in a two-page, single spaced response paper (10 points) covering the following questions:

I. What did you notice about yourself as you were participating in the role-play in both the client and therapist role?
II. When in the treatment process will you introduce treatment planning to your client(s)? What language will you use to discuss treatment plans with clients? Review verbatim statements of language you would like to use to discuss with clients.
III. What are your overall goals in utilizing treatment plans with your clients? (e.g. When will you have treatment plans completed? How will you stay updated on client goals/objectives? How will you make a treatment plan with a client that says they “just need a space to talk?”)
IV. How will you ensure that your approach is culturally sensitive and embodies cultural competency?

3. Observation, Reflection Paper, and Client Note (30 points; SLO1, SLO4, SLO5):
This assignment is designed to give you an opportunity to observe a therapy session and begin to put yourself in the role of the therapist. This assignment is to be completed in three parts and requires your participation in observations of actual therapy sessions.

a) Observation: Conduct one observation of a therapy session at the Center for Family Therapy in the HEDCO building (to be completed once you have been matched and are able to be in the clinic; CPSY students will be matched to current CFT students who are clinical active). This observation will provide you with exposure to an actual clinical session, “behind the mirror”, as an observer and a team member. You are a silent observer and should only provide feedback for the therapist if he or she directly elicits it. Observations should only occur with therapists that have given permission to watch their session.

b) Reflection Paper (20 points): For the observation, focus on both nonverbal and verbal communication throughout the session. Your reflection paper should be 5-6 pages and will be graded on clarity, completeness, and integration of course content. Reflections should include the following:

I. Who presented for therapy? Duration of session, therapist(s) providing service, session number. Do not use actual client names in order to protect client confidentiality.
II. Content issues observed in session; review what was primarily discussed. Process observed in session between therapist(s) and client(s), between family members, and/or between the team, therapist(s), and client(s).
III. For the session you observed, how did (or how could) the therapist integrate questions to the client(s) about identity development (i.e. ethnicity, race, sexual orientation, sex and gender, religion/spirituality, disability), immigration, acculturation, marginalization, whiteness, power/privilege, and/or social justice/injustice? I do not expect you to consider all that is listed here, but to consider what may be relevant for this client system if you were the therapist.
IV. In terms of readiness for change, what stage were the client(s) currently working within? Defend your rationale with data directly derived from course content.
V. What were strengths that the therapist(s) utilized in the session?
VI. How was hope created/maintained during the session?
VII. Your experience of conducting the observation.

c) Client Note (10 points): In addition to this reflection, you will also turn in a client note for this session as if you were the therapist of record. Please use the form that matches the likely placement of your internship (CFT students will use the CFT form, CPSY students can choose between UCTC and LCC forms). Even though you are not the therapist of record, I would like you to think about what your plans may be for the following meeting given your knowledge of the session and include in your record. Please change the names of the clients in the note to maintain confidentiality. Also, write MOCK CLINICAL NOTE in large letters at the top of the form so it is clear that it is not an actual clinical note.
4. Take Home Exam (25 points):
The exam will be a combination of short answer and essay questions and will be given to you on the last day of class as a take home exam. The exam will be used to evaluate your overall understanding of the material covered throughout the course as well as your theory of change text.

Late Assignments:
Outside of exceptional circumstances (e.g. medical emergency), any assignment turned in beyond the deadline will be reduced in score by 25% for each day it is late.

Course Requirements and Evaluation:

<table>
<thead>
<tr>
<th>Area of Evaluation</th>
<th>Points (total=100)</th>
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<tbody>
<tr>
<td>1. Attendance/Participation</td>
<td>25</td>
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<td>2. Treatment planning</td>
<td>20</td>
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<tr>
<td>3. Observation exercise</td>
<td>30</td>
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<tr>
<td>4. Final Take Home Exam</td>
<td>25</td>
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</table>

Course Grading:  
≥ 80 Pass  
< 80 No Pass

Policies

Respect for Diversity

College of Education Diversity Statement:
In order to thrive and excel, a culture must honor the rights, safety, dignity, and well being of all members no matter their race, gender, religion, sexual orientation, socioeconomic status, national origin, religious beliefs, or physical and cognitive ability. The concept of diversity encompasses acceptance and respect in understanding that each individual is unique. To the extent possible and appropriate, this course will explore these differences in a safe, positive, and supportive environment. Some of the readings in this class do not adequately address diversity so we will be discussing how we might be able to make clinical practices more sensitive to diversity.

It is the policy of the University of Oregon to support and value diversity. To do so requires that we:
- Respect the dignity and essential worth of all individuals
- Promote a culture of respect throughout the University community
- Respect the privacy, property, and freedom of others
- Reject bigotry, discrimination, violence, or intimidation of any kind
- Practice personal and academic integrity and expect it from others
- Promote the diversity of opinions, ideas and backgrounds which is the lifeblood of the university

Couples and Family Therapy Program Values Statement:
The CFT program embraces a culture of respect and inclusion with a commitment to honoring diversity in all aspects of our program. The concept of diversity encompasses acceptance and respect in understanding that each individual is unique. Diversity includes, but is not limited to race, ethnicity, tribal affiliation, national origin, age, sexual orientation, gender, gender-expression/identity, socioeconomic status, disabilities, and spiritual/religious affiliations. We aim to honor and value diverse ways of learning, knowing, and experiencing. We also hope to create a forum where dialogues can take place that foster individual as well as collective self-awareness and growth. In keeping with our commitment to these values, we ask that everyone (students, faculty, staff and supervisors) partner in a shared responsibility to build inclusion, equity, and respect of diversity across the CFT program. This can only happen if we continue to reflect on how our cultural backgrounds and diverse life experiences influence our work with clients. Thus, while we each bring unique perspectives to our professional work, as a program we expect that our students, faculty and staff, as human service professionals, will strive toward competency in meeting our clients’ diverse needs and respecting all people.

Student Conduct

All students are subject to the regulations stipulated in the UO Student Conduct Code (http://www.uoregon.edu/~conduct). This code represents a compilation of important regulations, policies, and procedures pertaining to student life. It is intended to inform students of their rights and responsibilities during their association with this institution, and to provide general guidance for enforcing those regulations and policies essential to the educational and research missions of the
University. The College of Education (COE) Policy Regarding Dismissal of Students from Programs is contained in the COE Academic Policies and Procedures Handbook in Section A and in the UO Bulletin. The CFT program has a specific set of policies with regard to Professional Conduct and Ethical Standards that can be found in the CFT Program Handbook. It is the students’ responsibility to review these policies.

**Conflict Resolution**
Several options, both informal and formal, are available to resolve conflicts for students who believe they have been subjected to or have witnessed bias, unfairness, or other improper treatment. It is important to exhaust the administrative remedies available to you including discussing the conflict with the specific individual, contacting the Department Head, Benedict McWhirter at benmcw@uoregon.edu or within the College of Education you can contact Joe Stevens, Associate Dean for Curriculum and Academic Programs, at 346-2445 or stevensj@uoregon.edu or Surendra Subramani, Diversity Coordinator, at 346-1472 or surendra@uoregon.edu. Outside the College, you can contact:
- UO Bias Response Team: 346-1134 or http://www.bias.uoregon.edu/
- Conflict Resolution Services: 346-0617 or http://studentlife.uoregon.edu/SupportandEducation/ConflictResolutionServices/tabid/134/Default.aspx
- Affirmative Action and Equal Opportunity: 346-3123 or http://aaeo.uoregon.edu/

**Grievance Policy**
A student, or group of students, of the College of Education may appeal decisions or actions pertaining to admissions, programs, evaluation of performance and program retention and completion. Students who decide to file a grievance should follow the student grievance procedure, or alternative ways to file a grievance outlined in the Student Grievance Policy (http://education.uoregon.edu/feature.htm?id=399) or enter search: student grievance.

**Ethical Standards of Practice**
Each CFT student is expected to maintain the highest ethical standards of clinical practice, including strict adherence to the maintenance of client confidentiality. Specifically, students agree to the following:
- Familiarity with and behavior in accordance with the AAMFT Code of Ethics at all times.
- Maintaining client confidentiality by never disclosing client names, identifying information, or discussing cases outside of the observation or supervision areas.
- Removing oneself from any involvement (observation of sessions, team participation, any inquiry about treatment or progress, etc.) in a case in which the student knows one or more of the clients.
- Maintaining a professional and respectful manner when observing or interacting with clients.

**Disclosure of Personal Information**
The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) requires the program to have established policies for informing applicants and students regarding disclosure of their personal information (COAMFTE Standard 140.02, 2003). With this standard in mind, I would like to highlight that in this course personal disclosures may occur. Each student should decide for him/herself what information to disclose. Students are advised to be prudent when making self-disclosures. The program cannot guarantee confidentiality of student disclosures given the group environment, although personal comments should be considered private and confidential and remain only in the classroom unless an exception to confidentiality applies.

The AAMFT Code of Ethics states in standard 4.7 (2001) that Marriage and family therapists do not disclose supervisee confidences except by written authorization or waiver, or when mandated or permitted by law. In educational or training settings where there are multiple supervisors, disclosures are permitted only to other professional colleagues, administrators, or employers who share responsibility for training of the supervisee. Verbal authorization will not be sufficient except in emergency situations, unless prohibited by law. With this in mind, the program would like to highlight those clinical supervisors who share responsibility for supervisees will share relevant information without a written waiver in an effort to provide a quality standard of supervision, maintain coherent training throughout the program, and ensure client care.

**Inclement Weather Policy**
In the event the University operates on a curtailed schedule or closes, UO media relations will notify the Eugene-Springfield area radio and television stations as quickly as possible. In addition, a notice regarding the University’s schedule will be posted on the UO main homepage (in the “News” section) at http://www.uoregon.edu. College of Education students should contact their program department for further information.
<table>
<thead>
<tr>
<th>WEEK</th>
<th>TOPIC</th>
<th>READINGS</th>
<th>ASSIGNMENT(S) DUE</th>
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<tbody>
<tr>
<td>CLASS #1</td>
<td>March 31&lt;sup&gt;st&lt;/sup&gt;</td>
<td>q ® Ward, D., &amp; Wampler, K. (2009) Moving up the continuum of hope…</td>
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<td></td>
<td>Overview of class; Being a therapist and building hope with clients</td>
<td>q ® Synder, C., Michael, S., &amp; Cheavens, J. (1999). Hope as a psychotherapeutic foundation of common factors….</td>
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<td>CLASS #2</td>
<td>April 7&lt;sup&gt;th&lt;/sup&gt;</td>
<td>q ® Patterson et al. (2009) Chapter 1</td>
<td>q ® Patterson et al. (2009) Chapter 3</td>
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<td>q ® Review slides of suicide assessment on BB</td>
<td>q ® Sign up for theory of change texts</td>
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<td>q ® Theory of Change Text, Chapters _________</td>
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<td></td>
<td>*CPSY Supervisors join for skills groups (10:30-11:50a)</td>
<td>q ® Patterson et al. (2009) Chapter 3</td>
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<td></td>
<td>Suicide Assessment; Risk determination and safety planning</td>
<td>q ® Review slides of suicide assessment on BB</td>
<td>q ® Self-assign theory of change text chapters</td>
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<td>q ® Theory of Change Text, Chapters _________</td>
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<td></td>
<td>*CPSY Supervisors join for skills groups (10:30-11:50a)</td>
<td>q ® Williams et al. (2011) Chapters 1 &amp; 2</td>
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<tr>
<td>CLASS #4</td>
<td>April 21&lt;sup&gt;st&lt;/sup&gt;</td>
<td>q ® Patterson et al. (2009) Chapter 3</td>
<td>q ® Prochaska, J. (1999). How do people change, and how can we change to help many more people?</td>
</tr>
<tr>
<td>CLASS #5</td>
<td>April 28&lt;sup&gt;th&lt;/sup&gt;</td>
<td>q ® Williams et al. (2011) Chapters 1 &amp; 2</td>
<td>q ® Theory of Change Text, Chapters _________</td>
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<tr>
<td></td>
<td>Client assessment; Readiness for change</td>
<td>q ® Prochaska, J. (1999). How do people change, and how can we change to help many more people?</td>
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<td>q ® Theory of Change Text, Chapters _________</td>
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<td>*CPSY Supervisors join for skills groups (10:30-11:50a)</td>
<td>q ® Williams et al. (2011) Chapters 1 &amp; 2</td>
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<tr>
<td>CLASS #6</td>
<td>May 5&lt;sup&gt;th&lt;/sup&gt;</td>
<td>q ® Patterson et al. (2009) Chapter 6</td>
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<tr>
<td></td>
<td>Treatment planning</td>
<td>q ® Gehart, D. (2003). Chapter 1</td>
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<td>Guest Speaker: Jessica Champion, LMFT, CADC; Supervisor at Looking Glass</td>
<td>q ® Theory of Change Text, Chapters _________</td>
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<td>*CPSY Supervisors join for skills groups (10:30-11:50a)</td>
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<td>CLASS #7</td>
<td>May 12&lt;sup&gt;th&lt;/sup&gt;</td>
<td>q ® Patterson et al. (2009) Chapter 10</td>
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<td></td>
<td>Mandated reporting; Challenging clinical situations</td>
<td>q ® Explore info provided at:</td>
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<td><a href="http://www.oregon.gov/DHS/children/abuse/">http://www.oregon.gov/DHS/children/abuse/</a></td>
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<td>q ® Theory of Change Text, Chapters _________</td>
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<td>CLASS #8</td>
<td>May 19&lt;sup&gt;th&lt;/sup&gt;</td>
<td>q ® Patterson et al. (2009) Chapter 11</td>
<td>q ® Treatment planning due May 23&lt;sup&gt;rd&lt;/sup&gt; in my HEDCO mailbox by noon</td>
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<td>Therapist Wellness/Compassion Fatigue; Clinical self confidence; Therapists and social networking</td>
<td>q ® Bischoff &amp; Barton (2002). The pathway toward clinical self-confidence</td>
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<td>q ® Negash &amp; Sahin (2011). Compassion fatigue in MFT: Implications for therapists and clients</td>
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<td>q ® Theory of Change Text, Chapters _________</td>
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<tr>
<td>CLASS #9</td>
<td>May 26&lt;sup&gt;th&lt;/sup&gt;</td>
<td>q ® Patterson et al. (2009) Chapter 11</td>
<td>q ® Observation assignments due</td>
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<td>Memorial Day—No Class ☹</td>
<td>q ® Patterson et al. (2009) Chapter 11</td>
<td>q ® Take home exams handed out in class (Due June 9&lt;sup&gt;th&lt;/sup&gt; in my HEDCO mailbox by noon)</td>
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<tr>
<td>CLASS #10</td>
<td>June 2&lt;sup&gt;nd&lt;/sup&gt;</td>
<td>q ® Patterson et al. (2009) Chapter 11</td>
<td>q ® Observation assignments due</td>
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<td>Transfer/Closing procedures</td>
<td>q ® Patterson et al. (2009) Chapter 11</td>
<td>q ® Take home exams handed out in class (Due June 9&lt;sup&gt;th&lt;/sup&gt; in my HEDCO mailbox by noon)</td>
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**There is no class on Memorial Day (5/26/14), ® = articles/book chapters on blackboard. The contents of this syllabus may be altered as deemed appropriate by the instructor throughout the course. You will be promptly notified of any changes.**
University of Oregon CFT Educational Outcomes

Student Learning Outcomes: As reflected in the CFT program's mission statement and overall goal, students are expected to demonstrate the following knowledge and skills:

SLO1. Students will develop an understanding of professional conduct and ethical standards and will demonstrate an ability to effectively apply their knowledge in clinical practice.

SLO2. Students will develop an ability to critically evaluate the research literature and demonstrate an understanding of the relationship between research results and clinical decision making.

SLO3. Students will gain an understanding of the core theoretical assertions of couples and family therapy and will critically assess their own systems-oriented theory of change.

SLO4. Students will develop attitudes that value human diversity, will practice culturally-sensitive analysis and critical self-awareness when counseling diverse populations, and will demonstrate cultural competence in all professional activities.

SLO5. Students will develop an understanding of the unique systemically-oriented assessment and intervention competencies, will apply them effectively in practice, and will critically evaluate their own practice.

Faculty Outcomes: Based on the mission of the University of Oregon and the CFT program, in teaching, supervision, and interactions with students and community members, faculty are expected to:

FO1. CFT faculty will consistently receive high ratings for effective and culturally competent course instruction and clinical supervision.

FO2. CFT core faculty will meet high standards of scholarship including professional presentations, peer-reviewed publications, and the generation of knowledge through research.

FO3. CFT faculty will foster a rich learning environment that demonstrates inclusion, critical consciousness, self-exploration, sensitivity to diverse populations, and commitment to social justice.

Program Outcomes: The overall goal of the University of Oregon CFT program is to graduate systemically-minded, competent couples and family therapists. We value the creation of an inclusive learning environment that fosters socially-aware practitioners who, in partnership with their communities, promote social justice, systems change, and enhancement of individual well-being and community life. At the time of graduation and beyond, our program outcomes will be demonstrated in these ways:

PO1. Employers will report that CFT alumni are highly competent and well prepared for clinical practice.

PO2. Students will demonstrate critical analysis of culturally-competent, systemic practice.

PO3. Students will report high satisfaction with the CFT program, including cultural competency, high quality instruction, and career preparation.