Advanced Practicum
Winter, 2015

Instructor: ALL SECTIONS
Date/Time: ALL SECTIONS

Course Description:
This course serves as an integrative link between theory and practice for the graduate student intern who is engaged in meeting the internship requirements of the program. It allows students in internship placements to confer with their University supervisor concerning the many situations encountered in the process of training to be family therapists. This course also continues to allow students to examine the application of theoretical models to actual therapy situations. A primary aim of the course is to assist intern’s continued understanding and implementation of their chosen model of therapy as well as help them to ensure that the termination and transfer process of cases goes smoothly. In addition, issues of therapist self care and ethical practice remain on the forefront throughout the internship experience.

Course Expectations:
This course is designed to support your initial learning towards being a therapist. Overall, you are expected to be on time, attentive, and invested in your learning experience. In addition, there are a few expectations to be aware of that emerged for me over the years.

- First, it is my hope that we can give each other our undivided attention when we are engaged in live sessions, video sessions, case report supervision, and discussions. Please do not leave your cell phones/iPads, etc on (or on vibrate) while in class as it can be distracting to our learning process. If you have a specific reason to be connected to your phone/device, please arrange with me ahead of time and let the class know. It is not permitted to be texting or checking your phone throughout class when we are not on breaks unless there is an extenuating circumstance.
- Second, I expect you to be thoughtful and aware of the kind of feedback you are giving to others. I think of feedback in both a process and a content way. We should be sharing feedback to each other that we would like to hear ourselves (no one wants to hear criticism, for example). However, being constructive and helping each other learn and grow is expected. In addition, it’s important that we are aware of the feedback the other person is seeking/need before we decide what feedback to offer. You should always ask for the kind of feedback the therapist is seeking before assuming you have the best feedback to give. Bottom line---we all need to metacommunicate about feedback.
- Third, I expect you to prepared and ready to go for both class and our individual supervision meetings. Be aware of what you want out of our time together before you come to any supervision class/meeting. If you are having difficulty preparing, or knowing what to discuss, please be communicative as we can discuss this as a part of supervision.
- Fourth, part of our work as therapists (and evolving humans, quite frankly) is to continuously build our cultural competency. We are each on a different developmental path for this work. I note this as I would like you to consider each other’s multicultural identity, share with each other as it seems relevant, and be working with each other versus against each other in this developmental process. In essence, nobody in the group is any “better” than anyone else with regard to cultural competency. I expect you to build a supportive infrastructure to best understand all facets of a client’s identity, each other, and yourself.
- Finally, Advanced Practicum is a co-creation of an environment where we each have a responsibility toward what kind of group experience is developed and experienced. Be thinking about your role in contributing to a good experience for yourself and your colleagues. Please be aware of what kind of “space” you take in the group. Do you speak a lot? Do you rarely share? How is the group supporting all members and does everyone have a voice when they want to have a voice? Do you present as someone that is rigid to feedback and growth? Are you demonstrating a learning posture to your peers and your supervisor? I expect ongoing meta-conversations in this regard.

Internship Description:
The CFT intern will be engaged in face-to-face client counseling under the supervision of a professional therapist who has met national standards as an AAMFT Approved Supervisor or the equivalent. Students must have a minimum of 16 credits of supervised internship coursework including documentation of the minimum number of 400 client contact hours (50% with couples or families) to graduate from the program. The student will be responsible to the supervisor of the externship site for all procedures and policies of that site. The faculty supervisor regularly interacts with the student and the site supervisor concerning details and evaluation of this experience.

**Internship Objectives:**

I. **Professional Development in Agency Setting:** Interns will develop increased levels of professional conduct and demonstrate the ability to work within the field of mental health:
   1. Demonstrate knowledge of agency policy and procedure,
   2. Develop a good working relationship with site director, on-site supervisor, faculty supervisor and CFT Director,
   3. Develop a cooperative relationship with supervision groups on-site and at the University,
   4. Demonstrate an openness to direct observation and taping of counseling sessions,
   5. Demonstrate a willingness to accept and use feedback related to professional conduct and counseling skills

II. **Specific techniques and treatment programs to be learned:** Interns will develop increased expertise in the following areas:
   1. Develop a therapeutic relationship with clients,
   2. Demonstrate systemic problem assessment,
   3. Develop effective and appropriate treatment plans that lead to a therapeutic contract,
   4. Select and utilize appropriate interventions that support the treatment plans,
   5. Effectively evaluate client progress,
   6. Demonstrate competence in case management issues (session participants, managing family secrets, missed appointments, crisis management, referrals, termination, etc.)
   7. Evaluate client impact on the therapist involving issues related to transference and countertransference.
   8. Evaluate client/therapist diversity and openly discuss in session when appropriate.

**Textbooks:**

*Required:*
2. Theory of Change/Model specific text of your choice

**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:

- Awareness of the AAMFT Code of Ethics and maintaining the code at all times.
- Never disclosing any names or identifying information of clients outside of the observation or supervision areas.
- Not observing a session, inquiring about a client system, or participating in a team if you know the client.
- To consistently maintain a professional and respectful manner when observing or interacting with clients at all times.

**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 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.

**Students with Accessibility Needs:**
Appropriate accommodations will be provided for students with documented needs. This documentation must come in writing from the Accessible Education Center. To obtain this document contact their office directly. If you have a documented disability and require accommodation, you must meet with the course instructor within the first two weeks of the term.

**Student Conduct:**
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 student’s responsibility to review these policies.

**Respect for Diversity:**
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.

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**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 and participation (20 points; SLO1).** This area acknowledges the time and commitment each student makes in preparing for class through clinical work, completing assigned readings, and completing assignments. Attentive, rigorous, thoughtful, and supportive participation is appreciated and expected during client presentations. Absences and late arrivals will be reflected in the course grade and have the potential to jeopardize successful completion of this class. You must attend all classes unless there is an extenuating circumstance that prohibits you from being in class.

2. **Formal presentation of clinical work (30 points; SLO3, SLO4, SLO5).** The presentation and supervision of clinical work is a vital aspect of training as a couples and family therapist. Each student is expected to make one live clinical presentation during the term and one video presentation (we will schedule this on the first night of class and review as the term progresses). The therapist is responsible for scheduling the live client session and for all preparations associated with the presentation. Only CFT clients should be presented in the live team format (meaning, do not invite your externship clients). In **sum**, a live client presentation should include an introductory handout following the format listed below, a genogram (if available), and a client presentation paper. The details of these are listed below….  

*Live presentation preparation:*

- Students who are scheduled to make a “live” clinical presentation should be prepared to present a video of the most recent session with same client/system if the “live” client does not show for their appointment (or, a video clip from a session that would be most helpful to you). All presentations require your preparation ahead of time and should be “planned out” in terms of what you discuss with your colleagues. Be clear as to what “clip” you would want us to see if we need to watch a video due to a client cancelation or no-show.

- All live presentations should include a **handout** that details the information below and a genogram for the team (if available). **Please have one handout available for each team member, including the supervisor**. Handouts
should be in outline/bulleted format—brief and clear, yet thorough—and include the following details:

I. The presenting concern—according to the client(s)
II. The demographics and key cultural variables of the system
III. The status of therapy (how many sessions/progress)
IV. What are your “initial impressions” of a systemic description/action map for this client system (what is happening systemically)?
V. The model(s) you currently identify with and what you are implementing with this system that is theory-specific (or hope to implement).
VI. What do you notice about yourself working with this system (self-of-the-therapist)?
VII. What are two relevant questions or difficulties you want to discuss/process with the team (though you may have many, be thorough and succinct)? In essence, what are you hoping to walk away with after reviewing the client system with your team?

Video presentation preparation:

- The format is a bit condensed from a live presentation for your video presentation. You will conduct the pre-session, provide a handout as outlined above, and then share your clip(s).
- We should view about 15 minutes of “data” (your clip) as a team and you should have clarity about where in the video to cue your clip(s). During the viewing of the clips, I may pause and discuss. Overall, we are attentive to the clip(s) to gain context to the therapist’s identified needs/questions. We will stop at the desired stopping place as decided by the presenter and/or supervisor and then discuss the client system and the questions proposed by the presenter.

Each student will also turn in a Client Conceptualization Paper. This paper is a very abbreviated FCP, should be well written and follow APA standards/formatting throughout (styling, cover page, citation, references, etc), should be approximately 8-10 pages, and include the following sections. I highly recommend that you take the opportunity to write part of your FCP—we will discuss more as a class.

I. Sections 1-5 and section 7 in the Clinical Practicum Manual. Please give considerable attention to the context section. Your main task is to discuss what you understand about your client in regard to these specific sections. This is the first time you are writing a clinical presentation paper and it will make sense that you have questions. Overall, please consider what you understand about your client and how your systemic perspective applies. You will receive a great deal of written feedback to help you continue to build upon your existing theoretical framework to best prepare you for the FCP process.

II. Include a section that reviews your current theory of change and how you are applying this model/approach with the client system. Integrate information from your current model text. The main task of this section is that you demonstrate that you are continuing to build your theory of change. It is likely that you will not have “settled down” with a model/theory yet, but I want you to write about your model/approach and how it is informing your practice. There is not a great deal of expectations for this section, as it will depend on how you understand your current model, your clients, and how you have been applying your theory of change with the system.

Students can choose to write their conceptualization paper about any client system they are actively working with as the therapist of record. However, please note that I can provide the most valuable feedback to your paper with a system that I am familiar with (i.e. live or video session). Most students choose to write about the system they present for their live session, though please choose what is most helpful for you. Often, students report feeling they can better conceptualize a client system after writing the conceptualization paper.
<table>
<thead>
<tr>
<th>Stage of Live Presentation</th>
<th>Therapist/Presenter Tasks</th>
<th>Team Members’ Tasks</th>
<th>Approximate Time</th>
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</table>
| Pre-Session                | Present the **relevant** information about the clients to the team.  
- You will not be able to say *everything* about the client system. 
Choose the content of your pre-session presentation carefully given the amount of time you have to present (15-20 minutes). | Assist the therapist in formulating:  
- Relevant hypotheses for the session  
- Relevant questions related to hypotheses  
- Alternative explanations for the client situation | 15-20 Minutes |
| Session Part 1             | Conduct the session.  
- The therapist should not work to demonstrate any specific skill or intervention, but simply to conduct the session as routine. | Assist the therapist in formulating:  
- Additional hypotheses about the client system  
- Additional questions related to hypotheses  
- Alternative explanations for the client situation  
- A list of client strengths/concerns that can be shared with the therapist/client system  
- A list of possible interventions to be delivered in Session Part 2 | 30 Minutes |
| Session Break              | Receive feedback and input from the team. Bring follow-up questions to the team. | Share formulations made during Session Part 1 with the therapist  
- Dialogue with the therapist regarding additional questions that may have arisen  
- Formulate an “intervention” to share with the client system (when appropriate)  
- Support the therapist’s work and offer positive feedback. | 10-15 Minutes |
| Session Part 2             | Conduct the session as informed by the team input.  
- Engage in reflecting team with colleagues.  
- Debrief the reflecting team (if applicable) with the client before the end of the session. | Continue to develop ideas and possible interventions for future sessions.  
- Assist the therapist in developing any alternative systemic diagnosis  
- Provide a reflecting team if deemed useful for the client. | 15 Minutes |
| Post-Session               | Dialogue with team about the session. Listen for key feedback and responsiveness to initial questions/needs. | Support the therapist’s work and offer feedback.  
- Share any general questions about the client system.  
- Share feedback based on the therapists needs outlined in the pre-session  
- Assist the therapist in planning for future sessions. | 15 Minutes |
3. **Assessment/Diagnosis Assignment (20 points; SLO5)**
   In effort to further enhance assessment and diagnosis skills, students will complete a formal assessment and diagnosis for a client system as part of their winter term practicum course. Please use the attached document to guide your assessment narrative. It is important that your assessment guides your diagnosis. Meaning, the information gleaned from your assessment questions should directly inform your diagnosis. Your write up should be about 3-5 pages. Use objective language; be thorough in the discussion, yet succinct. This is due week 8.

4. **Formal Forms Submission & File Auditing (20 points; SLO1)**
   All CFT practicum students are required to turn in the following forms listed below at their respective due dates. Students are encouraged to keep copies of their paperwork (especially hour log forms). All forms are available in the “forms bank” across from the copy machine near the front desk.

<table>
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<tr>
<th>ITEM DUE</th>
<th>DEADLINE</th>
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<tr>
<td>Monthly Client Contact Hours Reporting Forms: Complete and correct with all signatures in place.</td>
<td>First week of the month for the period covering the previous month. First, gain a signature from your practicum supervisor. Then, please give to Lindsay.</td>
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<tr>
<td>Clinical Development Goals Form, PART I: This form allows students to set their personal/clinical goals for the term: Includes theory, practice, and professional development. Also when writing your goals, be sure to do so in a way that can be measured i.e. How will you know if you have completed this goal? This provides more practice in your development of measurable goals and objectives.</td>
<td>Second week of the term; save this form once you’ve received my signature for use at the end of term. DO NOT LOSE THIS.</td>
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<td>Student Self-Evaluation of Clinical Development Goals Form, PART II: Completed by the student at the end of the term as a way to evaluate their progress toward the goals they set at the beginning of the term.</td>
<td>To be discussed at your individual meeting with me at the end of the term. Please bring this form to our final meeting.</td>
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<tr>
<td>Site Supervisor Term Evaluation Form: Filled out by the student, evaluating the supervision experience of the externship supervisor(s) for the term.</td>
<td>To be discussed at your individual meeting with me. Please bring this form to our final meeting.</td>
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<td>End of Term Practicum Evaluation Form: Filled out by on-site supervisor and externship supervisor (one each) as an evaluation of the intern’s performance for the term.</td>
<td>To be discussed in your individual meeting with me. Please bring this form, completed by your externship supervisor (if applies this summer), to our final meeting. I will provide you with my evaluation form.</td>
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- Your clinical files will be audited toward the end of the academic term to ensure that you are following the ethical guidelines for client records as well as program requirements for treatment planning and supervision contact. As a reminder, clinical notes are to be written within 24 hours of a clinical session (no exceptions—set up a routine for yourself early in your career). Failure to properly manage clinical files may result in student remediation.

**Important Notes:**
Students are responsible for ensuring that they are maintaining an adequate level of client contact hours and that they are accruing sufficient supervision and relational therapy contact. Inform your practicum/group supervisor (me) immediately if you feel you are dropping below an adequate amount of client contact or supervision at either the CFT or your externship site. It is your responsibility to initiate this conversation throughout the term and academic year.
## COURSE SCHEDULE

<table>
<thead>
<tr>
<th>Week</th>
<th>Date</th>
<th>Assignments Due</th>
<th>Therapist Presentations</th>
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| Week #1 | Jan. 6 | • Hours due this week  
• Review term and group expectations  
• Assign days for client presentations  
• Client management and review; high risk clients review | No presentations       | No presentations       |
| Week #2 | Jan. 13 | • Turn in model text confirmation (attached form)  
• CFT client log due in individual supervision  
• Clinical Developmental Goals Due for signature in individual supervision  
• Therapist presentations |                       |                       |
| Week #3 | Jan. 20 | • Therapist presentations                                                      |                        |                       |
| Week #4 | Jan. 27 | • Therapist presentations                                                      |                        |                       |
| Week #5 | Feb. 3  | • Hours due this week  
• Therapist presentations                                                      |                        |                       |
| Week #6 | Feb. 10 | • Therapist presentations                                                      |                        |                       |
| Week #7 | Feb. 17 | • Therapist presentations                                                      |                        |                       |
| Week #8 | Feb. 24 | • Therapist presentations                                                      |                        |                       |
| Week #9 | March 3 | • Hours due this week  
• Therapist presentations                                                      |                        |                       |
| Week #10 | March 10 | • All Forms Received  
• Client Conceptualization Paper Due  
• Group Closure/Outing  
• |                        |                       |

**Course Grading:**  
≥ 80 Pass  
< 80 No Pass

***The contents of this syllabus may be altered as deemed appropriate by the instructor throughout the course. You will be notified of any changes.***
CFT Client Log (Due week 2 in individual supervision)

<table>
<thead>
<tr>
<th>A) Client Code</th>
<th>B) Who comes to session? (constellation)</th>
<th>C) # of sessions to date</th>
<th>D) Co-therapist, if applies (note the therapist of record)</th>
<th>Primary focus of therapy?</th>
<th>Any concerns or challenges you want to address in supervision related to this system that you want to discuss in supervision?</th>
<th>Note high risk/crisis issues (if any) that need to be discussed in supervision.</th>
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Comments:
Advanced Practicum  
Theory of Change Text Assignment  
(This form due Week 2)

Student Name:  

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<tr>
<th>Theory of Change Text Previously Read During Spring Term:</th>
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<tr>
<th>Theory of Change Text Previously Read for Summer Term:</th>
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<th>Theory of Change Text Previously Read for Fall Term:</th>
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<th>Theory of Change Text Planning to Read for Winter Term:</th>
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<tr>
<th>Currently I am most interested in these models (either to use for self in the room or just intrigue):</th>
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<th>Notes:</th>
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In effort to further enhance assessment and diagnosis skills, students will complete a formal assessment and diagnosis for a client system as part of their winter term practicum course. Please use the attached document to guide your assessment narrative. It is important that your assessment guides your diagnosis. Meaning, the information gleaned from your assessment questions should directly inform your diagnosis. Your write up should be about 3-5 pages. Use objective language; be thorough in the discussion, yet succinct. Therapists are to complete these sections in a separate document for one client system. All sections need to be included in the assessment narrative.

A. Client Information
   a. Name of identified client:
   b. DOB:
   c. Gender:
   d. Relationship Status:
   e. Race:
   f. Living Situation:
   g. Employment Status:
   h. Culture/Ethnicity/Religious Affiliation and Involvement:
   i. Social Network:
   j. Intimate Relationships:

B. Client Presenting Concern(s)
   a. Presenting Problem:
   b. Duration:
   c. Severity (on a scale of 1 to 10):
   d. Have they made any attempts to solve the problem? If yes, what?
   e. Has client noticed any improvement since they made the decision to seek help? If yes, how?

C. Contextual Problems
   a. Problems with primary support group:
   b. Problems related to social environment:
   c. Occupational problems:
   d. Housing problems:
   e. Economic concerns:
   f. Problems with access to health care services:
   g. Other psychosocial and environmental problems:
   h. List client’s current and past medical problems:

D. Self Care and Resources
   a. What does client do to relax or take care of self?
   b. What are the client’s eating, exercise, and wellness habits?
   c. What strengths and resources does client have?

E. Diagnoses
   a. DSM DIAGNOSIS (please use either DSM IV-TR or V)
   b. SYSTEMIC DIAGNOSIS/DESCRIPTION (including systemic notions of circularity, nature of the relationship, and person/persons in context):
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.