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Overview of Program

The Family Therapy Program at the University of Houston-Clear Lake (UHCL) is a graduate level program providing academic coursework and clinical training for obtaining a Master’s degree in Family Therapy (Track 1). A certification of hours completed (Track 2) is also available for students who have a clinical master’s degree but want training and supervision in the profession of Marriage & Family Therapy (MFT). The certification indicates a skill and theory building supervisory experience through the program that also may indicate support for obtaining the Licensed Marriage & Family Therapy (LMFT) in Texas (Track 2 – minimum 28 graduate hours). The Track 1 - 60 hour program is one of three Professional Psychology programs and provides academic coursework as well as clinical training and supervision which prepare students for careers as creative, caring and competent MFTs. This program is accredited by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) since 1982. The program can be completed in 3 years.

Track 1 (60 hour program) provides a variety of coursework including introductory and advanced family therapy, family assessment and research, psychopathology, cross cultural perspectives, couple and sex therapy, group dynamics, human development, and a two semester practicum and three semester internship experience. For Track 2, similar coursework is available; however, the curriculum is developed depending on the gaps in the student’s previous academic history in MFT.

In addition to accreditation, the Family Therapy Program at UHCL has been designated as a model master’s level training program by the Texas Higher Education Coordinating Board. The program is based primarily on relationship therapies and/or systems theories which enable clinicians to describe mental health challenges and patterns through a relational lens. Therefore the theoretical choice of the program is primarily to work with relationships to solve every day human dilemmas. We see relationships or connections, along with the culture to which these connections are a part, as important sources from which each of us derives meaning and understanding of ourselves. Thus, it is the connections or relationships to which we as therapists in the Family Therapy Program at UHCL have directed most of our attention. We also understand the importance of MFTs working from the individual level to the societal level and seeing those views as important components of effective treatment processes.

Program Mission, Educational, Student Learning, & Faculty Outcomes

The Family Therapy Program at UHCL provides academic coursework, clinical training, and supervision, which prepare graduate students for careers as creative, caring, competent, and culturally sensitive professional Marriage & Family Therapists (MFTs). The mission of the family therapy program is as follows:
**UHCL Program Mission**
The mission of the Family Therapy Program at the University of Houston-Clear Lake is to be a vanguard of clinical and leadership empowerment by developing influential and diverse family therapists that strive to exert clinical, theoretical, and research-informed skills within the professional MFT community as well as the mental health community at large.

To accomplish this mission, the faculty has established four program goals and seven student learning outcomes.

**Program Goals**
Students graduating from the UHCL master’s program in family therapy will demonstrate competence in the following four areas:

- **Clinical**: Graduates will demonstrate clinical competence in providing therapy to individuals, couples, families, and groups.
- **Theoretical**: Graduates will demonstrate theoretical competence with individuals, couples, families, and groups.
- **Research-Informed**: Graduates will demonstrate research-informed competence with individuals, couples, families, and groups.
- **Professional Issues**: Graduates will demonstrate competence in professional issues in the field of couple and family therapy.

**Student Learning Outcomes**
To accomplish the educational outcomes, the faculty has developed the following six Student Learning Outcomes.

**Clinical**
1. Students demonstrate understanding and application of a wide-array of MFT therapeutic skills and techniques, and an awareness of their own emotional reactions.
2. Students demonstrate knowledge and sensitivity (not limited to) special issues such as diversity, gender, power and privilege relating to age, culture, ethnicity, religion, spirituality, addictions, sexual orientation and socioeconomic status.
3. Students will demonstrate understanding and application of systemic and individual assessment skills, hypothesis formulation and reformulation, and continuous evaluation of the therapeutic process as guides for the course of treatment.

**Theoretical**
4. Students assess individual, family, couple, and group dynamics, development, and structure from theoretical perspectives in both oral and written processes; demonstrate the ability to apply theory to practice.

**Research-Informed**
5. Students demonstrate research-informed clinical conceptualizations and critical research
evaluation skills.

**Professional Issues & Behavior**
6. Students demonstrate knowledge and responsibility for professional ethics and issues such as confidentiality, issues of dual relationships, record-keeping, time management, respect for other professions, exposure to local, state and national associations, involvement of the profession within community, and collaboration abilities and skills.
7. Students prepare for supervision (practicum and internship) by demonstrating critical thinking, well-reasoned questions, and thought-out goals to enhance their professional clinical development.

**Family Therapy Program Policies**

**FT Program Attendance Policy**
Students are required to attend every class. Missing 15 minutes of any class period (arriving late, leaving early, during class) will result in an absence, and will result in a 5% reduction of the total grade. Email the professor before missing any classes. One excused class is permitted without penalty. Students must request this excused absence and provide written documentation to the professor within 2 weeks of the absence and the professor determines whether the absence is excused. Missing class will result in 5% being reduced from your total grade for each class missed (with the exception of one excused absence). **Any student who misses three classes will have to retake the class.**

**FT Program Grading Scale**

<table>
<thead>
<tr>
<th>Grade</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>A</td>
<td>94-100</td>
</tr>
<tr>
<td>A-</td>
<td>90-93</td>
</tr>
<tr>
<td>B+</td>
<td>87-89</td>
</tr>
<tr>
<td>B</td>
<td>83-86</td>
</tr>
<tr>
<td>B-</td>
<td>80-82</td>
</tr>
<tr>
<td>C+</td>
<td>77-79</td>
</tr>
<tr>
<td>C</td>
<td>73-76</td>
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<tr>
<td>C-</td>
<td>70-72</td>
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<tr>
<td>D+</td>
<td>67-69</td>
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<tr>
<td>D</td>
<td>63-66</td>
</tr>
<tr>
<td>D-</td>
<td>60-62</td>
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</tbody>
</table>

**Course Workload**
Family Therapy students should expect and plan to do up to nine hours of class-related reading and work per week outside of class for each three semester-hour course.

**Confidentiality**
All personal information shared by anyone in the class that is both verbal and written is of the strictest confidence and no information may be shared outside our classroom experience. If you want to share themes or discussion points from the class that is permitted but no identifiers are allowed such that someone may be able to identify a particular person.

**Incompletes**
A grade of I (Incomplete) is given only in cases of documented emergency or special circumstances late in the semester, provided that the student has been making satisfactory progress. A full faculty review of each case is necessary before any arrangements for an
incomplete can be made. Additionally, an Incomplete Grade Contract must be completed with the professor teaching the course.

**Electronic Devices**
Cell phone use during class is strictly prohibited. Emergency situation require discussion with the professor prior to class. Laptops and tablets are permitted only when used for class related activity (i.e., class notes, class readings, or other assigned activities).

**Talking**
No talking during class unless it is part of a class or small group discussion. Side discussion or any other disruptions during classroom discussion will result in a deduction of participation points.

**Plagiarism**
All UHCL students are responsible for knowing the standards of academic honesty. Please refer to the UHCL catalog and the Student Life Handbook for the University Academic Honesty Policy. Plagiarism will result in the failure of the course.

**Disabilities**
Students needing special accommodations need to first contact the Student Disability Services, room 1.301 SSCB (phone: 281-283-2648), and fill out a special accommodation request form with this office. The student should then bring this form to the instructor.

**Changes to the Syllabus**
The instructor reserves the right to make changes to syllabus and to add or subtract readings if they are deemed necessary to improving the overall learning process. It is the student’s responsibility to keep updated on course information if absent.

**Commitment to Diversity**
The University of Houston-Clear Lake in its catalog makes the following statement:

UHCL is fully committed to providing equal educational and employment opportunities for all persons regardless of race, color, sex, age, religion, marital status, national origin, veterans status, mental or physical disability and/or any other category against which discrimination is prohibited by state or federal law.

Further, the program is committed to diversity as an educational process and aspires to a level of diversity that reflects the population at large. We are also committed to support the growth of diversity among MFT community and believe completely in the benefits of diverse thinking among people to benefit one’s mental health. Diversity is defined in the program as a blend of various peoples of different origins with support and tolerance for their thinking and feeling due to race, class, culture, gender, religion, sexual orientation, age, national origin, disability, or any other category that might distinguish one person from another. We are committed to diversity in
the program and the classroom in general and believe fully in its benefits to the learning process.

The FT Program currently has a gender breakdown in full-time faculty of two females and one male. Their ethnicity includes Southeast Asian, Native Hawaiian, and Caucasian, respectively. Our current student body is consistently quite diverse in terms of race, ethnicity, gender, sexual orientation, age, and academic/professional background.

**Administration**

The Professional Psychology Programs (PPP) are administered and coordinated by a committee of the professional psychology faculty including the Family Therapy Program (FTP) full-time faculty. Each of the three programs has faculty assigned to it and work together primarily for curriculum issues and admissions of students. Within the FTP, one of the full time faculty members assumes the position of program director and acts in a facilitating role of the FTP faculty team. The PPP are under the auspices of the Department Chair for Clinical, Health and Applied Sciences (CHAS) and the Dean of the School of Human Sciences and Humanities (HSH). All requirements of HSH must be met by the students in this program.

**Application & Selection Procedure**

Students are admitted to a specific program of PPP. Applications for admission to all PPP are evaluated once a year; the deadline for application is January 25th.

Admission to the program is competitive, and draws applications nationwide. Applicants must submit a personal essay describing interest in the family therapy area, a current resume, all transcripts of college courses, results from the GRE, and three letters of references with an official application form.

Approximately 18 students are accepted each year. The selection process generally proceeds as follows. Initially, the Family Therapy faculty reviews all applications. A pool of applicants are then selected and invited for group interviews and activities. In selecting candidates for the program, the faculty are concerned with (1) ability to do graduate level work, (2) personal maturity and interpersonal skills necessary for clinical work, (3) life and professional experience which could be expected to enhance professional competence, (4) motivation and commitment concerning a career in family therapy, and (5) personal readiness or appropriateness for training at this time.

**Criteria for Admission**

Applicants are generally required to have a B.A. or B.S. degree, with an undergraduate GPA of at least 3.25. All applicants must take the GRE for admission to the University. The Family Therapy program seeks scores of 297 or higher on the combined verbal and quantitative sections of the GRE.
PREREQUISITES: Admission to the University; Undergraduate courses in Introductory Psychology and Abnormal Psychology. Courses in Research Methods/Statistics and Child/Human development are recommended.

*Similar content across various undergraduate courses with different titles may fulfill the above course prerequisites.

No undergraduate course may be counted toward degree requirements in family therapy.

Recruitment Policy

The Family Therapy Program faculty members are in an ongoing recruitment process while participating in the program. Meeting the expectations of teaching, service to the profession, program, and school, and research and publications requires faculty to be in communication and collaboration with many individuals that may be referral sources or future students in the program.

The Mental Health Community professional needs are very important to the recruitment goals of the program. For example, the admissions committee (faculty in the program) may choose a candidate for admission even though he/she may not meet the above admissions criteria if they consider the candidate may reach an under-served part of the community.

Marginalized and Special Needs Recruitment. In addition, the program faculty members may seek to actively recruit persons identified with underserved, special needs groups. This is in accordance with the university’s Non-Discrimination Policy: The University of Houston-Clear Lake prohibits discrimination on the basis of race, color, sex (including pregnancy), religion, national or ethnic origin, age (40+), disability, veteran status, genetic information, gender identity, gender expression, and sexual orientation (collectively referred to as a "Protected Class"). The Equity, Diversity, Inclusion - Title IX (EDIT) Office is responsible for monitoring UHCL’s compliance with the University of Houston System Anti-Discrimination Policy.

Registration/Automatic Withdrawal

Once a student is admitted to the FTP, that student is expected to begin registration and continue to be registered until graduation. The student may skip registration for one semester, but upon missing registration for two long semesters in sequence (without prior written permission from the program director), the student is assumed to have withdrawn and must re-apply and be readmitted prior to continuing in the program.

Scholarships and Financial Aid

Some student aid and scholarships are available. The Financial Aid Office can help with loans and scholarships. Family Therapy Scholarships are available usually after the first year. Additional scholarship information is available from the Student Assistance Center (281-283-
2722). Or visit the UHCL website: www.uhcl.edu. There are scholarships set aside for family therapy students only.

**Curriculum**

The program includes course work, practicum, and internship. Students follow an approved Candidate Plan of Study (CPS) that will meet all requirements of the program. Full-time students can complete the program in 2 years. Part-time students can take up to 5 years to complete the program. There is a university requirement that places a five year limit on graduation; coursework must be completed within five years of starting the program.

If the faculty members feel it is necessary for the student's professional development, he or she may be asked to complete additional course work and/or clinical training. This could involve repeating a practicum or internship, writing additional papers, etc. Also, if the faculty members agree through majority that a student is not meeting the learning objectives of the program, that student may be advised out of the program.

**Grade Requirements**

No undergraduate coursework may be counted toward a degree requirement in FTP. Students may not count a course on the CPS (see Candidate Plan of Studies below) in which they make a grade of "C+" or lower; if the course with a grade of "C+" or lower is a required one, the student must repeat the course. A student whose permission to register is terminated for dropping below a 3.0 grade-point average is automatically withdrawn from any clinical program. Reinstatement into the university does not automatically carry with it reinstatement into clinical training.

**Candidate Plan of Studies**

Required coursework follows. As a general rule students should have completed all prerequisites before beginning the graduate coursework. At a minimum, any remaining prerequisites must be completed in the first year of the program. Please check with your advisor if you wish to do otherwise. Students will complete a candidate plan of studies (CPS) the first year of the program.

Specific graduate courses have specific (graduate and undergraduate) prerequisites. Students must take responsibility for making certain that they have all prerequisites before taking each course. If a student takes a course, without having first taken the prerequisites, he or she may have to repeat that course, after the prerequisites are completed. All prerequisites to the program need to be completed by the end of the first year as a student.
# 60 Hour Master’s Program

<table>
<thead>
<tr>
<th>Course Code</th>
<th>Course Name</th>
<th>Credits</th>
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<tbody>
<tr>
<td>PSYC 5233</td>
<td>INTRO FAMILY THERAPY</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 5731</td>
<td>BASIC PSYCHOTHERAPY SKILLS</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 6233</td>
<td>ADVANCED FAMILY THERAPY</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 5236</td>
<td>FAMILY ASSESSMENT</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 6137</td>
<td>FAMILY THERAPY RESEARCH</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 6531</td>
<td>PSYCHOPATHOLOGY</td>
<td>3</td>
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<tr>
<td>PSYC 5737</td>
<td>FAMILY THERAPY PROF ETHICS</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 5931</td>
<td>INDIVIDUAL &amp; FAMILY DEV</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 6534</td>
<td>COUPLE AND SEX THERAPY</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 5239</td>
<td>GROUP PSYCHOTHERAPY</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 5738</td>
<td>PRACTICUM - 1 Semesters</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 6636</td>
<td>INTERNSHIP - 4 Semesters</td>
<td>12</td>
</tr>
<tr>
<td>PSYC 5535</td>
<td>CROSS CULTURAL PERSPECTIVES</td>
<td>3</td>
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<tr>
<td>PSYC 5433</td>
<td>SUBSTANCE ABUSE</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 6234</td>
<td>SYSTEMS AND SYMPTOMS</td>
<td>3</td>
</tr>
<tr>
<td>PSYC 6236</td>
<td>CHILD/ADOLESCENT FAM THRPY</td>
<td>3</td>
</tr>
<tr>
<td>ELECTIVE</td>
<td>(PSYC 5231, PSYC 5335 or Other Faculty Approved Course)</td>
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**TOTAL SEMESTER HOURS/CREDITS = 60**
## Family Therapy Program Curriculum Sequencing

<table>
<thead>
<tr>
<th>Year 1</th>
<th>Year 2</th>
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<tbody>
<tr>
<td><strong>Fall</strong></td>
<td><strong>Spring</strong></td>
</tr>
<tr>
<td>PSYC 5233: Intro to Family Therapy</td>
<td>PSYC 6531: Psychopathology</td>
</tr>
<tr>
<td>PSYC 5737: Family Therapy Professional Ethics</td>
<td>PSYC 6137: Family Research</td>
</tr>
<tr>
<td>PSYC 5236: Family Assessment</td>
<td>PSYC 6233: Advanced Family Therapy</td>
</tr>
<tr>
<td>PSYC 5731: Basic Psychotherapy Skills(^b)</td>
<td>PSYC 5738: Practicum</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Fall</strong></td>
<td><strong>Spring</strong></td>
</tr>
<tr>
<td>PSYC 6534: Couples &amp; Sex Therapy</td>
<td>PSYC 5433: Substance Abuse</td>
</tr>
<tr>
<td>PSYC 6236: Family Therapy w/ Child. &amp; Adolescents</td>
<td>*PSYC 5239: Group Psychotherapy(^b)</td>
</tr>
<tr>
<td>Elective: PSYC 5231, 5335, or other faculty approved course</td>
<td>PSYC 6234: Systems and Symptoms</td>
</tr>
<tr>
<td>PSYC 6636: Internship</td>
<td>PSYC 6636: Internship</td>
</tr>
</tbody>
</table>

\(^b\) Must be taken from Family Therapy faculty
**Prerequisites**

**PSYC 5233 Intro Family Therapy:** Admission into Family Therapy Program or Instructor Permission.
**PSYC 5738 Practicum:** PSYC 5233 Intro Family Therapy; PSYC 5731 Basic Psychotherapy Skills; PSYC 6531 Psychopathology, Psyc 6233 Advanced Family Therapy, & PSYC 5737 Professional Ethics must be taken simultaneously in first semester of practicum or before beginning.
**PSYC 6636 Internship:** Must have completed ALL of the above courses (24 hours) listed under the heading of "Prerequisites" AND meet approval of faculty and supervisors.

**Internship**

PSYC 6636 (4 semesters, 12 credits): includes 300 hours of direct client contact with an approved supervisor.

**Practicum**

In the practicum, six-eight students meet one evening a week. They work with couples and families under the direct supervision of an AAMFT-Approved Supervisor. The therapy is performed on campus at the university's Psychological Services Clinic, which has one-way mirrors for observations as well as video facilities for recording sessions.

**Criteria**

Criteria for admission into practicum include admission to the program and successful completion of PSYC 5233 Introduction to Family Therapy and PSYC 5731 Basic Psychotherapy Skills. Additionally, in order to enroll in practicum, students must either have completed or be enrolled in PSYC 6531 Psychopathology, PSYC 6233 Advanced Family Therapy, & PSYC 5737 Professional Ethics. A faculty decision that the student is progressing appropriately in his or her training is also required (see sections on Student Evaluation and Withdrawal from Program).

**Practicum Policies**

The practicum is seen as a bridge between the theoretical classroom work and the internship. The faculty schedule students for practicum. The instructor for the practicum arranges for clients to be seen in practicum and supervises the assessment and therapy. Each student works with at least one case in the practicum and observes sessions done by others. The practicum instructor gives each student feedback. Students write case reports on families seen in treatment and various other assignments.

**Gateway Experience**

The evaluation of the student during the first semester of practicum is an important time as it is a ‘gateway’ to other options. Students by this time in the program have some clarification on what the profession of MFT is about and can make an informed decision on whether to continue in training or not. The Student Evaluation Form provides a context for both supervisor and student to make an informed decision. If the supervisor and student in collaboration come to
the decision that the student will not continue training, the program director and supervisor will advise the student into other options.

**Student Assistants**
During each semester a student who has completed two semesters of Practicum and who is not planning to immediately enroll in an Internship is welcome to apply for consideration to assist our faculty as a student assistant in a practicum.

The roles of the student assistant require attending the four-hour weekly practicum class during the semester, and assisting the supervising faculty member in a variety of administrative and clinical duties. Student assistants also meet with the faculty supervisor for supervision of the student assistant's work. The responsibilities and the specific details required of the student assistant are determined by each of the supervisors teaching the practicum.

In order to be considered as a student assistant, students who qualify should express their interest in writing to the Director of Training in Family Therapy. The full time faculty will consider each request and make a final decision as to whether to accept or decline these requests. No financial remuneration is available at present for student assistants. Students may sign-up for the assistant position as a course, but this is not required.

**Recording Policies**
All practicum students record all of their client sessions as a learning tool. The focus of the learning is on the student and the interactional process of therapy. All recordings should be recorded over from one session to the next. Great care will be taken to keep confidentiality and it is an expectation that all recordings will be destroyed at the end of any learning experience such as practicum. No session recordings of any kind may leave the clinic.

**Internship**

UHCL now has an average of 10 off campus facilities throughout the Houston area which provide internship training sites for students in the program. Students spend three semesters in a selected facility where they are supervised by approved supervisors who serve as UHCL adjunct faculty.

**Internship Policies**
An internship is a supervised opportunity for the translation of knowledge into practice. Of equal importance, the experience provides the opportunity to develop a professional role. In this context, students are expected to view the internship in a professional manner which includes striving to achieve the best possible performance rather than simply working for a grade. In staff relations, the student must be able to extend him or herself to establish rapport and to assimilate rapidly into an ongoing helping agency. It is with this approach in mind that the student will most benefit from the internship and gain acceptance into the mental health community. Internship sites vary widely. The internship coordinators will have available a number of internship sites with histories of satisfying the standards for internships. From among these he/she will make suggestions for placement based on student background, interest, personal style, and career goal. Students do not initiate his/her own internship with an agency.
The University must be concerned not only with the student's well-being, but with that of the agency and its clients, and of the University itself. Therefore, the University specifically reserves the right to deny to a particular student the option of doing a specific internship, or of doing any internship. Acceptance into a particular area of study or approval of a Candidate Plan of Studies which includes the internship does not constitute a guarantee that the University will, in fact, arrange such an internship. Likewise, the family therapy faculty may withdraw a student from internship if and when they feel this is in the best interest of the student, the agency, or the program.

The internship will be evaluated each semester regarding quality of experience offered the student, and regarding the student's work and progress.

Internship Requirements

1. One or two family therapy interns are normally placed at each site. Internship supervisors are given the rank of Adjunct Clinical Faculty by the university.

2. The internship shall be a placement of three semesters (summer, fall, spring) at a rate of 15-25 hours per week.

   The settings of the intern’s weekly schedule are left to the agency supervisor in conjunction with student's course schedule. A required course, for example, must take precedence. Students will provide the internship site their summer, fall, and spring course schedule upon stating the internship experience.

3. The placement agency must provide the student with a sufficient number of cases so that the intern can complete 500 clinical contact hours by the end of the internship (hours accumulated in Practicum count toward the 500). A clinical contact hour is defined as 45-50 minutes of face-to-face contact in which the intern is the therapist or co-therapist. Individual, couple, family and group therapy (or assessment) may be counted as clinical hours. However, 200 of the required 500 client contact hours must involve a couple, family, or group physically present in the room.

   100 hours of a participant-observer team process may count as part of the 500 client contact hours.

4. The placement agency shall provide a minimum of the one hour supervision each week by an approved supervisor. At least one hour of supervision per week (at least 40 hours during the internship) must be individual supervision. All supervision must be provided by the agency, i.e., not purchased by the student.

5. During the year interns meet once a month with the faculty internship coordinators. Interns’ schedules must accommodate these meetings.
6. During the year the internship coordinators will have regular contact with agency supervisors by email. A coordinator will also visit each agency at least twice during a student’s 3 semester experience to review each intern's work and site. The visit may include observation of a therapy session and review of relevant records.

7. Interns and the site supervisor are responsible for providing accurate and timely monthly reports of the intern's activities to the internship coordinator.

8. The site supervisor is responsible for the formal evaluation of each intern two times during the year. All evaluations are shared with the intern. The written reports become part of the student's university file.

9. Interns are covered by liability insurance through the university. The policy has a limit of $1,000,000 per incident.

10. Individual supervision is defined as not more than two students per supervisory session and group supervision is defined as not more than eight students per supervisory session.

**Internship Sites**
Internship sites vary from year to year. Currently, agencies at which we place interns include:

1. Houston Galveston Institute  
2. Children's Safe Harbor  
3. Therapy & Co  
4. Sanctuary Foster Care Services  
5. Ray Family Therapy  
6. Healing Pathways  
7. Flourish Mental Health  
8. Therapy for Families  
9. Modern Therapy  
10. The Family Relationship Center  
11. The Couple Zone  
12. Krist Samaritan Center  
13. Psychology Works  
14. Interfaith Community Clinic

**Internship Placement Process**
The internship placement process begins with a meeting of all possible interns in early spring of the year preceding internship. Students decide after this meeting whether or not to apply for internship. Those not applying complete an Internship Postponement Form describing their plans for the coming year. Students must complete a minimum of 24 hours of coursework in the program before application for internship will be accepted. This includes coursework on-going
in the spring before the start of the internship year. Students receive detailed information about possible internship sites. There is a meeting also with current interns to discuss sites.

Formal interviews are conducted in March or April. Students interview with three to five agencies. They then report their preferences to the internship coordinators. Based on resumes and interviews, agency supervisors request particular interns. The internship coordinators then arrange placements, based on the agencies' requests, and knowledge of each student's particular strengths and needs, and students' preferences.

The internship begins the first or second week of June and ends (for one year placements) on May 1st of the following year.

**Telehealth and In-Person Internship Policy**

Students will be required to track their client contact hours earned via telehealth and track their in-person sessions separately from telehealth sessions. In-person therapy is the expected standard in meeting the Internship direct client contact requirements. However, students and site supervisors are permitted to use telehealth services if the approved site uses telehealth services as a normal delivery of services. Students are required to follow the telehealth protocol and policies of their internship sites, e.g. certain sites will only allow students to complete telehealth sessions from their office/site and not from the students’ home.

If telehealth is used, students and site supervisors are expected to maintain a reasonable balance between in-person and telehealth services as a means of making sure students have a well-rounded internship experience using both modalities. **Internship students can have no more than 200 of their required 500 total direct client contact hours earned as telehealth.**

Supervision with site supervisors via telehealth is permitted.

Students will be responsible for the following when telehealth services are used:

1. Coordination of a balanced approach in the use of telehealth and in-person therapy services.
2. Completion of any mandatory telehealth training prior to conducting telehealth services, as indicated by Program Faculty.
3. Monthly tracking of in-person and telehealth hours separately on Internship Tracking Hours Log.

**Anticipation of using more than 200 hours of telehealth services during Internship must be approved by the respective Internship Coordinator and Program Director.**
Assessment of Students

There is a regular and on-going evaluation of student learning outcomes throughout participation in the Family Therapy Program.

Students are continuously evaluated in their academic and clinical experiences. Starting in practicum, students begin their assessments of the seven learning outcomes listed above with the Student Evaluation Form. This form is used by practicum students and supervisors in the university clinic for two semesters while working on community clinic cases on campus. The Student Evaluation Form is the instrument designed to measure student learning outcomes of the program. A ranking of 4 will be above average.

The importance of these rankings is that the first two evaluations out of the four are done by practicum supervisors/faculty on campus and the last two evaluations are done by internship supervisors in off-site experiences. Thus, students are evaluated by their on-campus experiences during the first two evaluations and in off campus experiences for the last two evaluations. All evaluations are given by either on campus supervisors of either approved AAMFT status or approved Texas LMFT supervisors. Most evaluations take place in an environment in which both student and supervisor are free to give feedback in a helpful and affirming process. Students are often asked to evaluate themselves before the process begins.

The academic and clinical progress of each student in the program is discussed and evaluated by the Family Therapy faculty once a year together in a faculty meeting. **The goal is to retain students** and for those who are struggling, an unsatisfactory evaluation may result in an advising meeting with student and PROGRAM DIRECTOR and/or advisor/faculty to suggest and develop remedial measures.

When prerequisites for the internship have been met (24 hours) including satisfactory learning outcome measures from the practicum experiences, readiness of students is assessed further by students filling out the internship application. This summarizes the student’s work and experiences in the program. After reviewing the student application and file, the student will begin the process of internship placement which includes an experience of interviewing of sites. Sites and students are matched by gaining feedback from both the student and supervisor/interviewers. The program director and internship coordinator assign students to the internship sites. After students receive their assignments, they register for PSYC 6636 Clinical Internship for each semester of participation. Malpractice insurance is provided for each student until graduation as long as the student is enrolled. Students continue to be assessed on learning outcomes by their field supervisors twice during the year with the Student Evaluation Form and the results of these evaluations will be reported to the internship coordinator. All evaluations are shared with the intern and placed in the student's folder.

Most of the Family Therapy students do exceptionally well in their internship placement experiences. However, an unsatisfactory evaluation of an intern by the agency supervisor or the
internship coordinator may result in the decision by the faculty to ask the student to add an internship semester, try a placement in a different setting, or in the most extreme situation, withdraw from the program. Again, the goal of faculty is to retain students and work for the best.

No student will be allowed to graduate from this program without a satisfactory evaluation and completion of their internship placement. Completion of the placement includes all required paperwork turned in by May 1 as well as 500 direct client contact hours completed through participation in both the practicum and internship experiences. Inability to successfully complete the internship requirements may result in a delay in graduation or at the most extreme, withdrawal from the program. (See section on Withdrawal).

Personal and professional growth of our students is one of the most important goals of this program. While the program does not usually require students to be in counseling or therapy, many students do become involved in individual, family or group therapy in order to enhance both their personal and professional lives. Full time family therapy faculty do not see family therapy students or their families in therapy.

**Remediation and Dismissal**

Retention of students is one of the most important goals of faculty members in the program. We want students to succeed and have a strong success rate. Advising of students is an active, ongoing process in which faculty members meet individually with each student once a year to go over the student's annual evaluation form, which faculty together complete at the annual faculty retreat. Faculty have official office hours and are available for consultation with some notice. Office hours are posted on office calendars each semester and on syllabi for courses.

Although faculty members work hard to support the graduation of all students who are admitted to the program, a student may withdraw from the program at any time. It is preferred that this withdrawal be made in consultation with the program director. The student who is withdrawing is requested to set up an appointment with the program director and write a letter to that effect, to be placed in the student's file. Any student who does not register for courses for two consecutive semesters is assumed to have withdrawn and may be administratively withdrawn from the program by the faculty.

The faculty members have the responsibility of withdrawing a student from the training program when the faculty involved with the student, in consultation with the program director, feel that withdrawal is in the best interests of the student, profession of MFT, and/or of the University. Withdrawal may be on the basis of the student's not meeting standards in the area of (1) course work, (2) clinical competence, (3) personal readiness for clinical work, or (4) professional issues.

At the time withdrawal is considered, the student will be informed and told the nature of faculty concerns by the program director with consultation of other program faculty. At that time, the student and faculty may come to a mutual decision that withdrawal is appropriate or inappropriate and other options may be pursued such as a transfer to another program on campus. If the student opposes withdrawal against the judgment of the program faculty, the matter will be
reviewed and discussed by the Associate Dean of HSH. A final decision on withdrawal is the responsibility of the family therapy faculty based on the consultation and recommendation of the Associate Dean for HSH.

In situations where faculty members feel that a student has personal issues which interfere with clinical training or future clinical practice, the student may be asked to try to resolve these problems in therapy. If these issues are resolved, it may be possible that the student may then be allowed to continue clinical training with agreement from the entire FT faculty.

**Evaluation of Faculty**

Students formally evaluate faculty at the end of each course and they formally evaluate the internship at the end of that experience.

Students are also encouraged to discuss any concerns they have about a faculty member with that person directly. They may also consult with their advisor, other family therapy faculty or with the Director of Training in Family Therapy. Our intent is to work out all difficulties, disagreements or misunderstandings in a professional way, with respect and concern for all. Formal grievance procedures are available as a last resort (see next section).

All full time faculty are reviewed through the annual faculty evaluation form, and the university annual review process. These documents and other criteria are reviewed by the Division Chair, The Associate Dean, and the Dean as part of an ongoing university review process.

**Student Grievance Policy**

Please read first the above section on faculty evaluation. The University has grievance policies for academic and non-academic grievances. Procedures for academic grievances are in the university catalog. Procedures for non-academic grievances are in Student Life Policies.

Students are encouraged to seek an informal resolution of a grievance - with the faculty involved, the other family therapy faculty, or other HSH faculty or administrators. If this proves to be inadequate or inappropriate, they would then arrange to meet with the Vice President for Student and Academic Services.

**Student Ethics**

All students must demonstrate the highest ethical standards in order to be graduated from this program. Students must adhere to local, state, and national laws regarding professional practice and to the ethical codes of the American Association for Marriage and Family Therapy. In
addition, students are expected to adhere to the ethical codes which govern the activities of students in universities, such as the prohibitions against plagiarism and cheating.

There are a number of special ethical issues relevant to mental health practitioners of which students must become aware. Prior to obtaining a degree, students generally confine the practice of therapy to the practicum and internship courses. Graduates are expected to obtain proper supervision, and engage in only those activities allowed by the laws of the state in which they are practicing.

Students present themselves as students (including "trainees," "interns," or other appropriate titles), making clear their status to others outside the program with whom they come into contact. Students’ work will be presented in a manner to avoid giving a misleading impression of affiliation or status with an agency or training institute, or of full clinical membership in a professional organization rather than student membership in such organizations.

Even beyond what is expected of practicing therapists, students are aware of the limits of their competence and are cautious to avoid making a promise of results to the clients they see during training. Students actively seek supervision and consultation on any situation about which they are in doubt.

Students provide therapy to clients seen during practicum and internship without direct payment of any kind from the client, including use of the relationship to further personal gain.

Students must adhere to the highest standards of confidentiality with regard to the personal information revealed by fellow students in experiential portions of classes, as well as information gained from clients in practicum and internship. Students make themselves aware of the statutes and ethical considerations surrounding confidentiality and assume responsibility for its maintenance with clients. This includes obtaining signed consent forms for audio- or videotaping interviews, and exchange of information with an explicit explanation to the client as to who will have access to the tapes and information. Also, the legal limits of confidentiality are explained to clients. Furthermore, students use utmost care in maintaining audio- and videotapes, notes, and all written records of clients and avoid inadvertent disclosure of information through casual conversations in public places, telephone messages, etc.

Students use information gained through the practicum and internship in research only with written permission of the clients and approval of the faculty. Any research project involving human subjects must have the approval of the Human Subjects Committee of the University.

Students are aware that the practicum and the internship impose the need for extra care in avoiding relationships with clients that would interfere with or be exploitative of the therapeutic relationship, and that sexual relationships with clients or supervisors are unethical. Students provide evaluative comments in a positive manner to improve skills, rather than disparaging the abilities of fellow students, faculty members, supervisors, or other therapists to others.
Students make efforts to familiarize themselves with community resources in order that they make appropriate referrals. If a referral is made, the student provides information to that agency or therapist, maintaining a copy of the client's signed release of such information.

Students having a direct and clear knowledge of a fellow student's unethical behavior will first discuss it with that person. If no satisfactory conclusion results, the student will then discuss the matter with a faculty supervisor. (This section on student ethics was originally drafted by Sherry Beeman when she was a student in the program.)

**Credentialing and Licensing**

Students are also expected to join the American Association for Marriage and Family Therapy (AAMFT), our national professional association, and to attend at least one national or state professional meetings (AAMFT or the Texas association, TAMFT) while they are in the program. Many of our students are active members and leaders in the Houston Association for Marriage & Family Therapy.

Upon completion of the program, students will have met the academic requirements for clinical membership in AAMFT and for licensure in Texas as a Licensed Marriage and Family Therapist (LMFT). While the program continues to ensure that our training meets requirements for the state board of Texas, it does not ensure or guarantee that it will meet the requirements of other state boards. Should a student desire to become licensed in another state, they will need to contact that state board to determine what, if any, adjustments they will need to make to their degree plan. Any changes must be discussed with and approved by the program director.

**Family Therapy Student Association**

The Family Therapy Student Association (FTSA) was established in 1981 to promote a sense of cohesion among UHCL students who have an interest in Family Therapy, to provide opportunities to share information about the field, and to create a forum for student-faculty interaction apart from the formal classroom experience.

The FTSA is a recognized student organization of the University. As such it is represented in the Student Forum, the umbrella organization for all student clubs and associations. Through the Forum the FTSA has access to funds collected, such as student service fees. In the past, these funds have been used by the FTSA to subsidize students attending Family Therapy conferences, and to pay fees of workshop presenters invited to the campus by the organization.

The FTSA meets regularly. Most of the meetings are in the homes of student members or faculty. At most meetings a speaker addresses a topic of special interest. Off-campus meetings also serve as social functions, since they are held in the evening, include a potluck supper, and spouses are invited to attend.
The Association also co-sponsored (with other professional family therapy organizations such as The Houston Association for Marriage & Family Therapy, and The Net) professional programs for the therapeutic community at large.

The FTSA also supports a newsletter, The Anchor, and has an active mentoring program.

**History of the Program**

In 1975 Israela Meyerstein, a social worker from the University of Texas Medical Branch at Galveston, taught the first course in family therapy at UHCL. Students began telling the dean that they wanted him to hire a family therapist. It happened that he also needed a social psychologist, so when he ran across Linda Bell (who was both) he invited her for an interview. Arriving as an assistant professor in the fall of 1976, Linda taught family therapy and social psychology. It soon became clear that if students were going to leave the university, intern in clinical settings, and then work as counselors, much more was needed in the way of training. So Linda instituted "Advanced Family Therapy" which was, in fact, a one semester practicum. It was held in the same location as the present day practicum, with family therapy students working with the parents of children being tested by diagnostic students in the School of Education.

Cheryl Rampage, a clinical psychologist and family therapist from Chicago, was hired in 1978. Cheryl and Linda then joined forces, and work toward developing a solid family therapy training program commenced in earnest.

Uri Rueveni joined the faculty in the fall of 1983, just in time for the first site visit by the Commission on Accreditation. The site visit went very well, and the program became accredited for the maximum period of time without any stipulations. Later, in 1986, the UHCL family therapy program was selected, by the Texas Coordination Board for Higher Education, as the model program for master's level training in Texas.

Many people have contributed to the development of the family therapy program. George Pulliam and Rob Hochschild taught as adjunct faculty for many years; in 1981-82, when Linda was on leave after the birth of her second child, Paul Dell served as visiting faculty; likewise, Joan McKirachan in 1986-87, while Linda was in Japan.

Cheryl returned home to Chicago in the summer of 1989 and Leslye Mize joined the faculty. Leslye herself is one of the early graduates in family therapy at UHCL. She brought particular strengths in the areas of substance abuse, feminist theory, qualitative research methods, and family therapy theory. She has since served as President of the Texas Association for Marriage and Family Therapy. Uri Rueveni retired in 1996. Kyle Killian was hired as an Assistant Professor and was on full-time status for 10 years. Linda Bell retired in 2006 and moved to Indiana. Leslye Mize was Director of Training and Professor of Family Therapy/Psychology until Fall, 2010. Dr. Brent Bradley was an Associate Professor of Family Therapy/Psychology, became Director in Fall 2010 when Leslye Mize served for one year as interim Dean before retiring. George Pulliam, MSSW was a longtime Visiting Lecturer, but retired in summer of 2011. Prudence Brooks was in a Visiting Assistant Professor position until summer, 2008, but has continued to teach occasionally.
The program has been enriched over the years by the efforts of many part-time and adjunct faculty, both on campus and at the various internship sites. Many of our internship supervisors are graduates of the program. George Pulliam, MSW and Rob Hochschild, Ph.D. have provided strong support for the program for many years, particularly in the area of clinical supervision. Richard Graves, Ph.D. has served as a master teacher, focusing primarily on basic psychotherapy skills, intro to family therapy, and therapy with children and adolescents. Kristen Benson served as a visiting faculty member in the program for two years and brought an expertise in working with transgendering family issues and other current trends in the profession to the classroom.

**Current Faculty**

Since 2010 the program has been in transition as many longtime faculty retired. The current faculty are as follows:

**Sophia Georiadou, Ph.D., – Assistant Professor**
Dr. Georiadou completed her B.A. in Psychology at the Aristotle University of Thessaloniki. As a Fulbright Scholar, she graduated with her M.A. and Ph.D. in Marriage and Family Therapy from the University of Louisiana at Monroe. She became a licensed professional counselor in Texas in 2012 and a licensed professional counselor-supervisor in 2017. Dr. Georiadou is also a licensed marriage and family therapist in Texas.

Dr. Georiadou is specializing in systemic family therapy approaches (solution-focused, structural, strategic and family-of-origin/intergenerational models). She previously served as the clinical director at Positive Steps Residential Treatment Center in Houston, TX. She coordinated the treatment program of young females ages 12 up to 21 years old, using a trauma-informed and trust-based approach. The population she served consisted primarily of young females in CPS/foster care or juvenile probation programs. Her research mission is focused on the fields of multicultural counseling and systemic family therapy.

Dr. Georiadou feels passionate about exploring the experiences of equity-seeking, underrepresented groups, particularly immigrants/refugees in the US. She uses qualitative methods and survey designs to understand the living narratives of individuals from equity-seeking communities. With her research, she is seeking to explore informed ways to improve underrepresented individuals’ access to social supports and experience of therapy outcomes.

She goes by “Dr. Sofia” for her students.

**Li Ping Su-Kubricht, Ph.D., – Assistant Professor**
Li Ping Su-Kubricht received her bachelor’s degree in international cultural studies-communication emphasis at Brigham Young University-Hawaii and her master's and doctoral degree in marriage and family therapy, also from Brigham Young University. She is a licensed marriage and family therapist in both Utah and Texas. She is also an AAMFT-approved supervisor.
She has worked in various settings, including a university community clinic, non-profit organization, private practice, and university counseling centers. She also taught at the MFT program at Utah Tech University last year.

When she is not working, she enjoys spending time with her family, hiking, running, and weightlifting.

**Leslye King Mize, Ph.D., - Professor Emeritus**
Leslye Mize is a Professor Emeritus from UHCL after 24 years of service. She came back from retirement in 2013 to serve as Director of Training and Internship Coordinator. She is in private practice as an MFT in the Clear Lake area and also supervises MFTs who are working toward full licensure status for LMFT and LPC. She is an Approved Supervisor for the American Association for Marriage & Family Therapy for 32 years as well as an LMFT and an LPC supervisor. She is past president of the Texas Association for Marriage & Family Therapy and is proud of her work with a team of MFTs to obtain licensure for MFTs in Texas in 1992

**Non-Academic Interests:** Leslye is an artist by hobby and loves to paint with watercolors and pastels. She is also an out of doors person and loves to go birding, picking up trash, and working in her garden.

**Robert Hochschild, Ph.D. – Adjunct Lecturer**
Rob has been an Adjunct Faculty at UHCL since 1982. While usually teaching the Family Therapy Practicum, he has also taught Introduction to Family Therapy, Advanced Family Therapy, and Family Life Cycle. Rob is also in private practice and an Associate of the Houston Family Institute since 1979.

Rob received his Ph.D. in Clinical and Community Psychology from the State University of New York at Buffalo in 1976. He completed his Clinical Psychology Internship and a Child and Family Fellowship at Baylor College of Medicine and a Marriage and Family Postdoctoral Fellowship at the Texas Research Institute of Mental Sciences. He then was the Founder and Director of the Family Therapy Program at the Michael E. DeBakey Veterans Administration Center in Houston before going into private practice.

Rob is licensed as a Marriage and Family Therapist and a Psychologist. He is a Clinical Member and Approved Supervisor of the American Association of Marriage and Family Therapy (AAMFT) and a member of the American Family Therapy Academy. He has been a Board Member of TAMFT and past president of HAMFT. He is also a member the American, Texas, and Houston Psychological Associations.

**Sarah Prinsloo, Ph.D. – Adjunct Lecturer**
Sarah is also an alumnus of the UHCL Family Therapy Program. She earned her Ph.D. in Family Therapy from St. Mary’s University where she was trained in applied neuroscience. She completed post-doctoral training in neuroimaging and neuro feedback at MD Anderson. She is currently principle investigator on several grants using neuro feedback with cancer patients. She is a Licensed Marriage and Family Therapists, Licensed Professional Counselor, and an AAMFT Approved Supervisor.