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A Measurement Instrument to Determine Curricula Competency of Licensure Track Graduate Psychotherapy Programs in the United States

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Abstract: We developed a novel measurement instrument to assess Knowledge of Educational Programs in Professional Psychotherapy Programs (KEP-PPP or KEP-Triple P) within the United States. The instrument was designed by a Panel of Experts (PoE) that consisted of Licensed Psychotherapists and Medical Care Providers. Licensure track psychotherapy programs are listed in the databases of the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE); American Psychological Association (APA); Council on Social Work Education (CSWE); and the Council for Accreditation of Counseling & Related Educational Programs (CACREP). A complete list of psychotherapy programs can be obtained from these professional databases, selecting search fields of (All Programs) in (All States). Each program has a Web link that electronically and directly connects to the institutional program, which can be researched using the KEP-Triple P. The 29-item KEP Triple P was designed to consist of six categorical fields; Institutional Type: Degree: Educational Delivery: Accreditation: Coursework Competency: and Special Program Considerations. The KEP-Triple P was designed to determine whether a specific course(s) is offered in licensure track psychotherapy programs. The KEP-Triple P is designed to be modified to assess any part or the entire curriculum of licensure graduate programs. We utilized the KEP-Triple P instrument to study whether a graduate course in Addictions was offered in Marriage and Family Therapy (MFT) programs. Marriage and Family Therapists are likely to commonly encounter patients with Addiction(s) due to the broad treatment scope providing psychotherapy services to individuals, couples and families of all age groups. Our study of 124 MFT programs which concluded at the end of 2016 found that we were able to assess 61 % of programs (N = 76) since 27 % (N = 34) of programs were inaccessible due to broken Web links. From the total of all MFT programs 11 % (N = 14) did not have a published curriculum on their Institutional Web site. From the sample study, we found that 66 % (N = 50) of curricula did not offer a course in Addiction Treatment and that 34 % (N = 26) of curricula did require a mandatory course in Addiction Treatment. From our study sample, we determined that 15 % (N = 11) of MFT doctorate programs did not require an Addictions Treatment course and that 1 % (N = 1) did require such a course. We found that 99 % of our study sample offered a Campus based program and 1 % offered a hybrid program with both online and residential components. From the total sample studied, we determined that 84 % of programs would be able to obtain reaccreditation within a five-year period. We recommend that MFT programs initiate procedures to revise curricula to include a required course in Addiction Treatment prior to their next accreditation cycle, to improve the escalating addiction crisis in the United States. This disparity in MFT curricula raises serious ethical and legal consideration for national and Federal stakeholders as well as for patients seeking a competently trained psychotherapist.

 $\textbf{Keywords:} \ \, \textbf{addiction, competency, curriculum, psychotherapy} \\$

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