



College of Education and Affiliated Programs
Annual Assessment Report Template – Fall 2012
Marriage & Family Therapy

Background

1. Describe your program (enrollment, number of faculty, general goals). Have there been any major changes since your last report?

The Marriage and Family Therapy (MFT) program is a Master's degree program that prepares students for licensed, independent MFT practice. Graduates of this program provide mental health services to adults, children, couples, and families in private practice, community agency settings, government, court settings, hospitals, clinics, as well as many other settings. The MS in Counseling, MFT option strives to provide education excellence that promotes intellectual, personal, and interpersonal growth for all students. Courses in the MFT program are rigorous, and reflection and practice are incorporated into most courses. In addition, all MFT students are required to get 30 hours of personal psychotherapy to augment their didactic training. Diversity is emphasized throughout the MFT curriculum, and students are encouraged to collaborate with professors, fieldwork supervisors, and the community as much as possible. Students learn interviewing and diagnostic skills early in the program and practice these skills throughout their education. One year of family systems training is also a requirement, and students are expected to be knowledgeable in the various family systems models and their application. Students also engage in one year of fieldwork, and they meet with University faculty and fieldwork supervisors throughout their training, present cases, and learn methods to provide mental health treatment for individuals, couples, and families with a variety of difficulties. MFT faculty have a variety of areas of expertise, and students often collaborate with faculty on research projects.

Table 1 provides an overview of the program outcomes and signature assignments, as well as how these map to relevant national and local standards. Tables 2-5 present data on student applications, enrollment and completion, while Table 6 presents data on faculty.

Table 1*Program Student Learning Outcomes and Relevant Standards*

	Outcome 1	Outcome 2	Outcome 3
SLOs	Demonstrate interviewing and diagnostic skills sufficient for entry level in a clinical or counseling setting	Draw upon family systems theoretical models and demonstrate ability to work in a systematic fashion with families	Draw upon case studies to develop an appropriate treatment plan that includes attention to: 1) developmental issues; 2) legal and ethical issues; 3) evidence-based approaches for treatment of specific disorders
Signature Assignment(s)	Diagnosis	Vignette, assessment, and treatment plan	Treatment Plan
National /State Standards	Board of Behavioral Sciences (BBS) requirement A.	BBS requirement C.	BBS requirement E.
Conceptual Framework	Evidence-based Practices	Effective Pedagogy; Evidence-based Practices; Collaboration; Innovation; Advocacy; Scholarship	Effective Pedagogy; Evidence-based Practices; Collaboration; Leadership; Innovation; Advocacy ; Scholarship
CSULB Learning Outcomes	Well prepared; Integrating liberal education	Knowledge and respect for diversity; Collaborative problem solving	Well-prepared; Engaged in Global and Local issues; Integrating liberal education

Table 2*Program Specific Candidate Information, 2011-2012 (snapshot taken Su12) – Transition Point 1 (Admission to Program)*

	Number Applied	Number Accepted	Number Matriculated
TOTAL	214	37	27

Table 3

Program Specific Candidate Information, 2011-2012 (snapshot taken Su12) – Transition Point 2 (Advancement to Culminating Experience)

	Number
Thesis (698)¹	8
Comps²	29

Table 4

Comprehensive Exam Results, 2011-2012 (snapshot taken Su12)

	Number
Passed	19
Failed	2
Total³	21

Table 5

Program Specific Candidate Information, 2011-2012 (snapshot taken Su12) – Transition Point 3 (Exit)

	Number
Degree	21

Table 6

Faculty Profile 2011-124

Status	Number
Full-time TT/Lect.	3
Part-time Lecturer	6
Total:	9

¹ This is data on students who were enrolled in thesis work during Fall 2011 and Spring 2012. This figure may include students who actually “crossed into” this transition point prior to Fall 2011 and were still making progress on their theses at this time.

² This is data on the number of students who *applied* to take the comprehensive examination in Summer 2011, Fall 2011, or Spring 2012. The data include students who may not have taken or passed the examination(s).

³ The number of pass + fail does not equal the number of students who advanced to take the comps (Table 3) because some students who have registered for the exam do not attempt it. This data reflects number of attempts at one or more parts of the comprehensive exam in Summer 2011, Fall 2011, or Spring 2012. Individuals who failed all or part of the exam and chose to retake it during AY 11-12 may be accounted for twice.

⁴ Faculty numbers reflect headcounts of any faculty member teaching a course in the program for the prior academic year (Summer through Spring). Faculty who teach across multiple programs will be counted in each program.

2. How many of the total full- and part-time faculty in the program reviewed and discussed the assessment findings described in this document? Please attach minutes and/or completed worksheets/artifacts to document this meeting.

Two of the full time faculty, Bitu Ghafoori and Paul Ratanasiripong, met to discuss the and review the data, and this is reflected in the worksheet attached that documents the meeting. We also discussed the data with part-time faculty during our annual Advisory committee meeting on February 19th, 2013.

Data

3. Question 3 is in 2 parts focused on *primary* data sources related to: student learning and program effectiveness/student experience:
 - a. Candidate Performance Data: Provide *direct* evidence for the student learning outcomes assessed this year and describe how they were assessed (the tools, assignments, etc. used). Describe the process used for collection and analysis. Present descriptive statistics such as the range, median, mean, percentage passing as appropriate for each outcome.

Table 7

Program Student Learning Outcomes and Signature Assignments

Student Learning Outcomes	Student Learning Outcomes Description	Signature Assignment(s)	Description of the Assignment
1	Demonstrate diagnostic skills sufficient for entry level in a clinical or counseling setting	COUN 643d	Review a vignette describing an individual with a mental health issue, identify symptoms and problems, write 5 Axis diagnosis based on DSM-IV criteria including rationale.
2	Draw upon family systems theoretical models and demonstrate ability to work in a systematic fashion with families	COUN 508b	Create a vignette describing a family requesting counseling, choose family therapy models, write assessment of family system, treatment goals, and therapeutic interventions.
3	Use an actual case to develop an appropriate treatment plan that includes attention to: 1) developmental issues; 2) legal and ethical issues; 3) evidence-based approaches for treatment of specific disorders	COUN 644d	Develop comprehensive treatment plan.

Figure 1

AY11-12 SLO Comparison

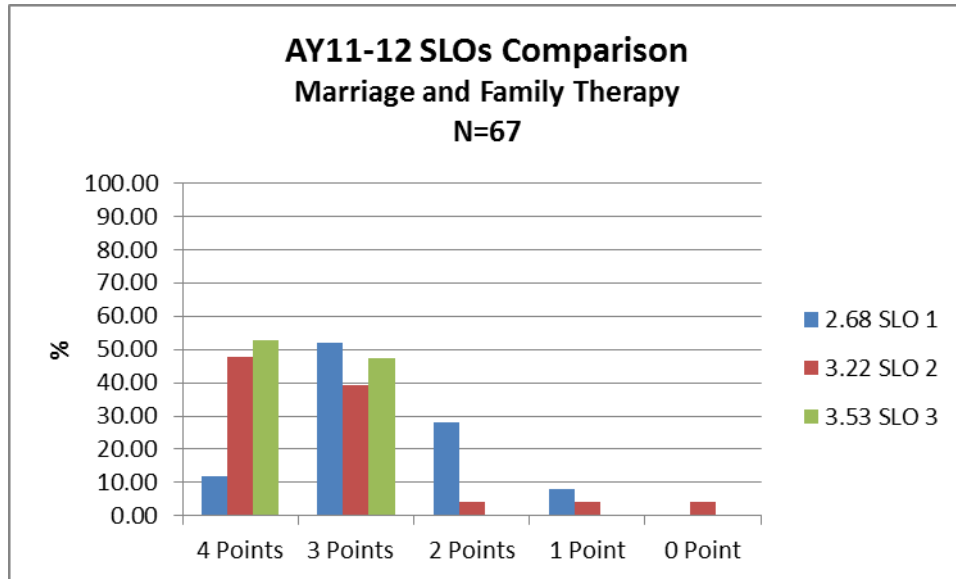
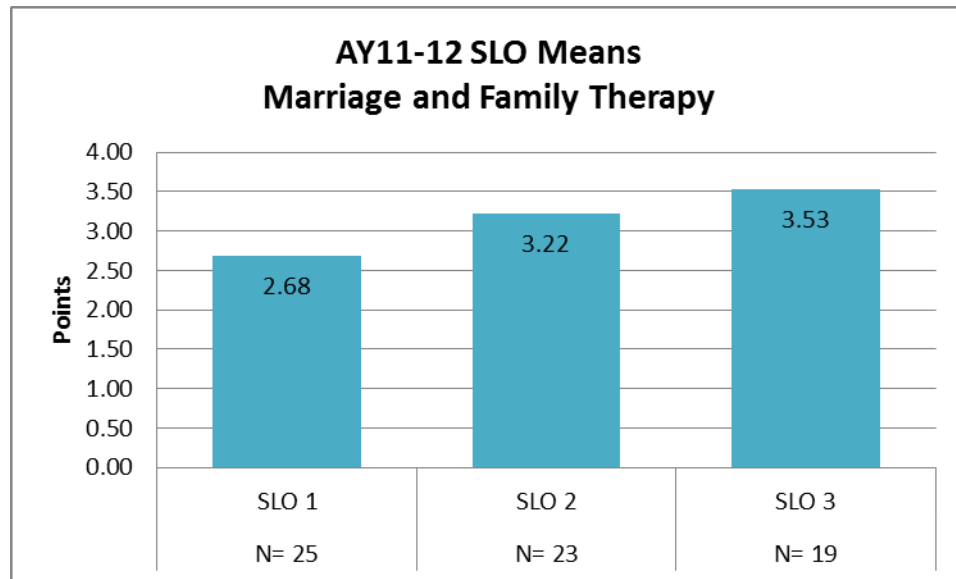


Figure 2

AY11-12 SLO Means



Outcome 1: Demonstrate diagnostic skills sufficient for entry level in a clinical or counseling setting

Figure 3

AY11-12 Score Distribution-SLO 1

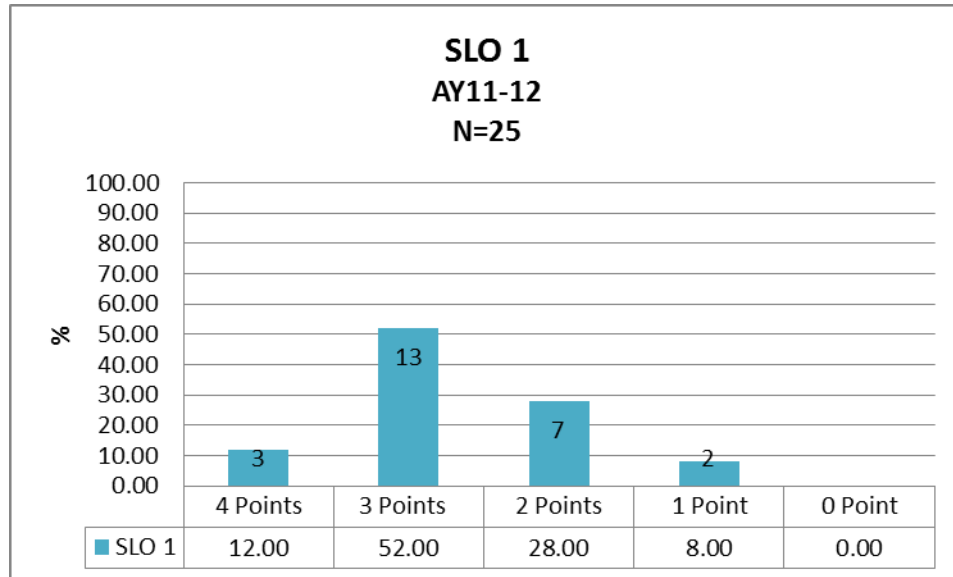
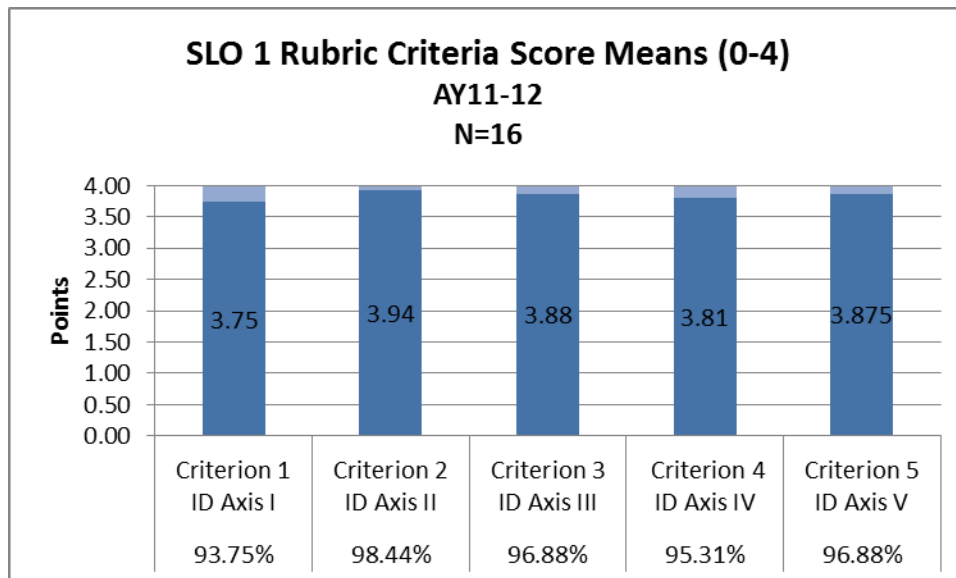


Figure 4

AY11-12 Criteria Score Means-SLO 1



Outcome 2: Draw upon family systems theoretical models and demonstrate ability to work in a systematic fashion with families

Figure 5

AY11-12 Score Distribution-SLO 2

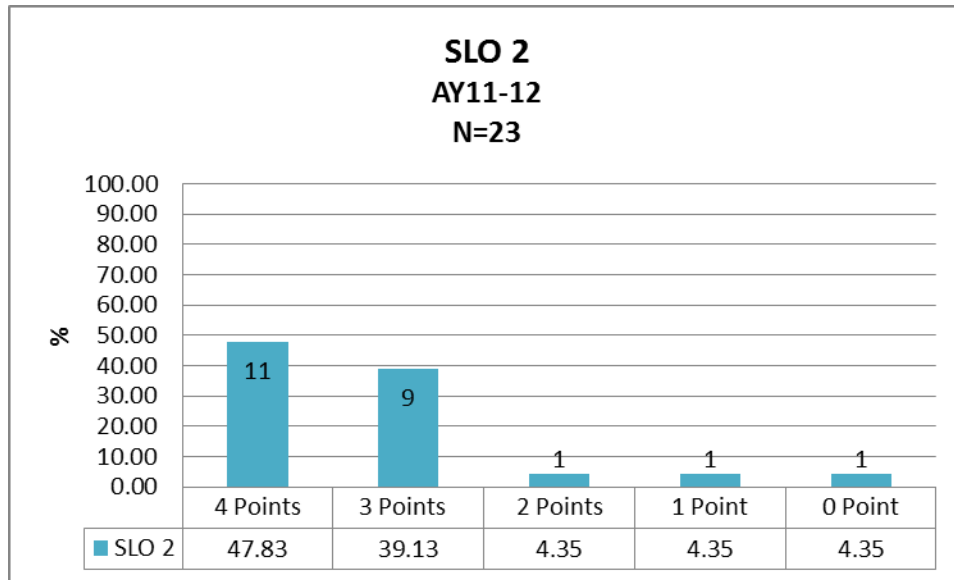
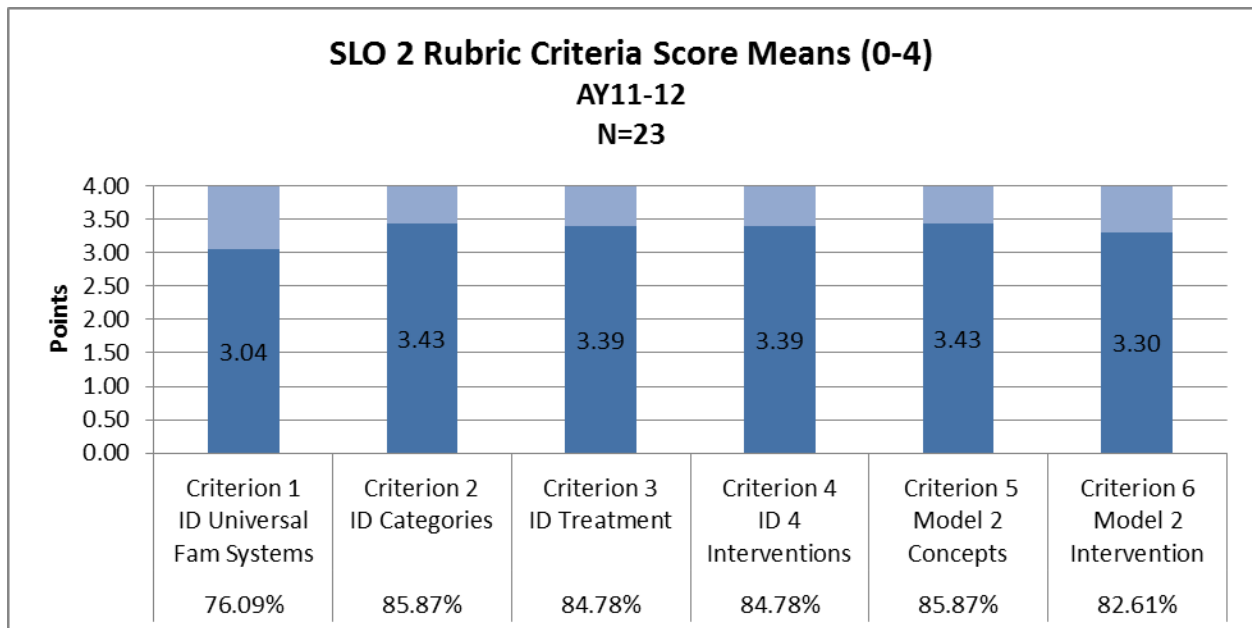


Figure 6

AY11-12 Criteria Score Means-SLO 2



Outcome 3: Use an actual case to develop an appropriate treatment plan that includes attention to: 1) developmental issues; 2) legal and ethical issues; 3) evidence-based approaches for treatment of specific disorders

Figure 7

AY11-12 Score Distribution-SLO 3

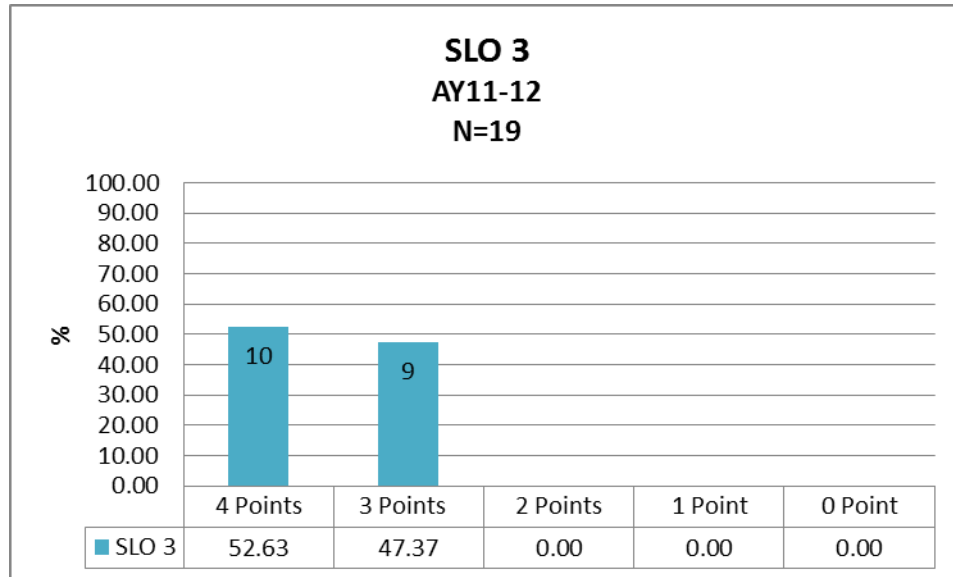
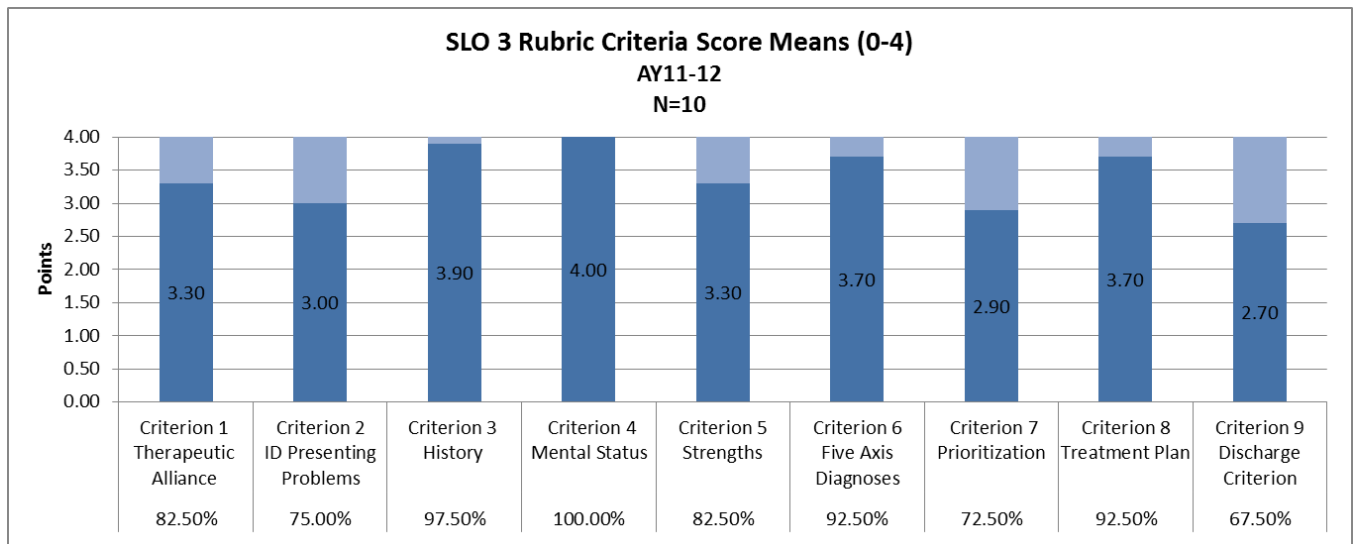


Figure 8

AY11-12 Criteria Score Means-SLO 3



- b. Program Effectiveness Data: What data were collected to determine program effectiveness and how (e.g., post-program surveys, employer feedback, focus groups, retention data)? This may be indirect evidence of student learning, satisfaction data, or other indicators of program effectiveness. Describe the process used for collection and analysis. Present descriptive statistics such as the range, median, mean, or summarized qualitative data, for each outcome.
4. OPTIONAL: You may provide *additional* information (e.g., other data, copies of letters of support from granting agencies or school staff, etc.) about candidate performance, the student experience or program effectiveness used to inform programmatic decision making. This may include quantitative and qualitative data sources.

N/A

Analysis and Actions

5. What do the data for each outcome say regarding candidate performance and program effectiveness? Please note particular areas of strength or in need of improvement.

We feel our candidates are doing particularly well in SLO 1 and SLO 2. Specifically, we feel the data for SLO 1 indicates our students are understanding diagnoses and demonstrating diagnostic skill development. The data for SLO 2 indicates our students are able to work in a systematic way with families. We feel the data for SLO 3, which is intended to measure development of knowledge and skills in treatment planning is mixed. Although students are doing well in most areas, prioritization of key issues and discharge planning data indicate that some students may not grasp these concepts.

6. How do these findings compare to past assessment findings?

Compared to last year's assessment findings, these data indicate improvement in teaching and learning in all three SLOs measured.

7. What steps, if any, will be taken with regard to curriculum, programs, practices, assessment processes, etc. based on these findings in Questions 5 and 6? Please link proposed changes to data discussed in Q5.

We have discussed the data in our MFT program meeting, and we will make changes in our treatment planning class, COUN 608, in order to teach prioritization of key issues and discharge planning in a more effective manner.

Table 8

Action Plan

Priority	Action or Proposed Changes To Be Made	By Whom?	By When?	CTC Standard (If Applicable)
SLO 3	Make changes to teaching in COUN 608	B. Ghafoori	Summer, 2013	