

OCCUPATIONAL PROFILE: MARRIAGE AND FAMILY COUNSELORS/THERAPISTS

In Washington state, marriage and family therapy refers to the diagnosis and treatment of mental and emotional disorders, whether cognitive, affective, or behavioral, within the context of relationships, including marriage and family systems. Marriage and family therapy involves the professional application of psychotherapeutic and family systems theories and techniques in the delivery of services to individuals, couples, and families for the purpose of treating such diagnosed nervous and mental disorders. (Washington State Legislature, 2001) Marriage and family therapists (MFTs, also referred to as LMFTs) are usually master's level professionals whose treatment is focused at a narrower scope than mental health counselors; when treating couples and families, MFTs direct their interventions from

a social and relational context and focus on the impact of family, school, and workplace on an individual's well-being. Marriage and family therapist associates (MFTA or LMFTA) are graduates who are still gaining the supervised experience necessary to obtain an MFT license.

MFTs on the integrated behavioral health/physical health team provide support to primary care providers by consulting on behavioral health issues and their impact on families, and connecting patients and families with community resources to facilitate care and promote overall positive behaviors toward well-being. They can also assist with patient diagnoses and treatment plan implementation, and provide direct therapy. (Skillman, Snyder, Frogner, & Patterson, 2016)

Size, Distribution, and Demographics of Supply

In 2017, there were 1,528 marriage and family therapists (MFT) who held an active license in Washington (Table 1). The mean age of the Washington MFTs was 51 years old, and 76.9% were female.

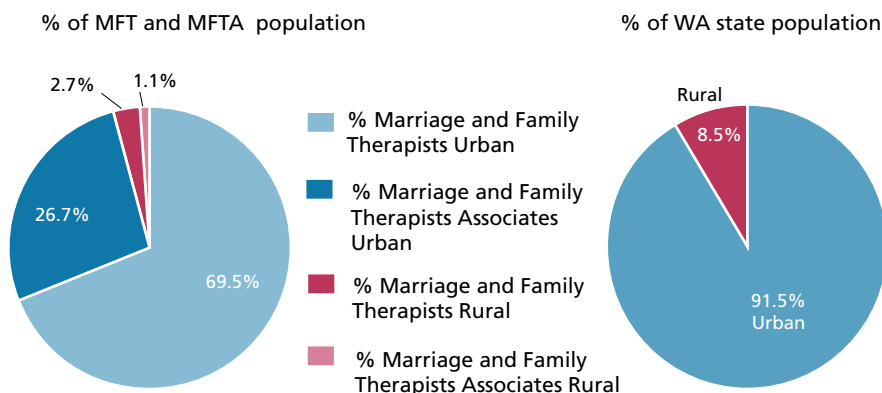
An additional 563 individuals held a conditional Washington license as a marriage and family therapist associate (MFTA) in 2014—about 27.8% of the

TABLE 1. Marriage and Family Therapists (MFT) and Counselor Associates (MFTA) with Washington State Licenses, 2017

	MFT	MFTA
With address in:		
Washington	1,387 (90.8%)	535 (95.0%)
Oregon	46 (3.0%)	11 (2.0%)
Idaho	3 (0.2%)	3 (0.5%)
Other	92 (6.0%)	14 (2.5%)
Total	1,528	563

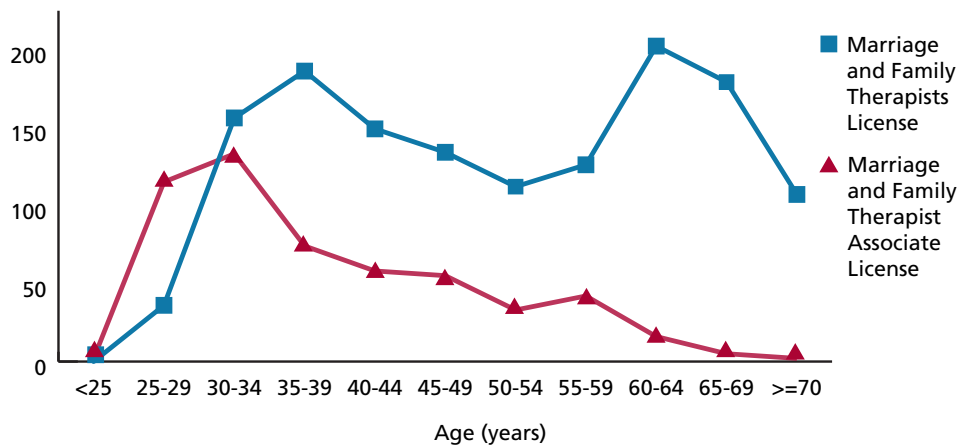
Data sources: Washington State Department of Health, 2017 Health Professions Licensing Data System.

Figure 1: Rural/Urban Distribution of Marriage and Family Therapists (MFT) and Associates (MFTA) and the General Population in Washington



Data sources: 2016 Washington State Office of Financial Management county population data; Washington State Department of Health, 2017 Health Professions Licensing Data System.

Figure 2: Age Distribution of Licensed Marriage and Family Therapists and Marriage and Family Therapist Associates in Washington State, 2017



Data sources: Washington State Department of Health, 2017 Health Professions Licensing Data System.

total Washington MFT workforce. The mean age of these Washington MFTAs was 39 years old, and 79.3% were female.

Nearly all (96.2%) of Washington's marriage and family therapists and associates had urban addresses.

Associates are younger than independent MFTs, which is unsurprising since they are earlier in their career path. There are two peaks in the number of licensed MFTs: aged 35-39, and aged 60-64. Those in the latter group will likely be retiring in the near future.

TABLE 2. Distribution, Age, and Sex of Marriage and Family Therapists and Therapist Associates in Washington by Accountable Community of Health, 2017

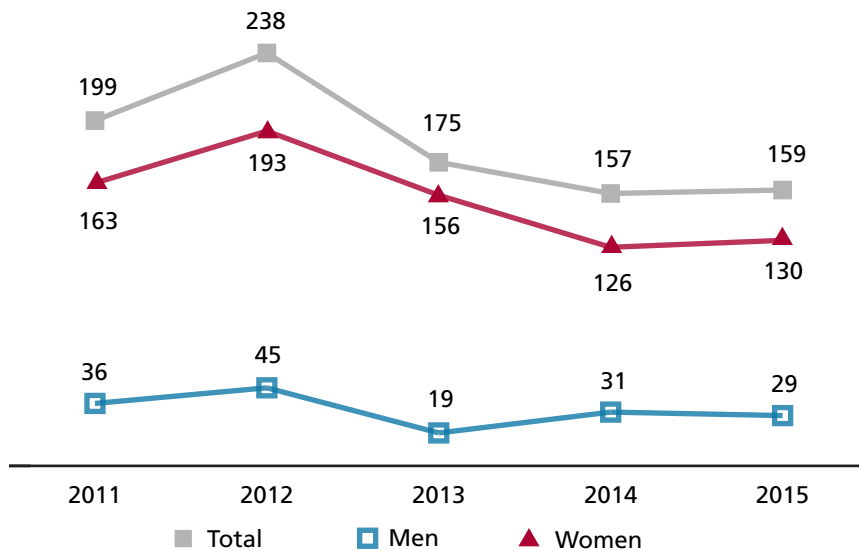
Marriage and Family Therapists	N	Population	Rate per 100,000	Mean Age	%, (N) >55 Years	%, (N) Female
Statewide*	1,387	7,183,700	19.3	51	44.3% (614)	76.9% (1,066)
By Accountable Community of Health (ACH) †						
Pierce County	204	844,490	24.2	49	35.8% (73)	75.5% (154)
North Sound	227	1,206,900	18.8	53	51.1% (116)	78.9% (179)
King County	599	2,105,100	28.5	50	40.7% (244)	79.8% (478)
Better Health Together	63	587,770	10.7	56	61.9% (39)	61.9% (39)
Cascade Pacific Action Alliance	91	614,750	14.8	54	57.1% (52)	71.4% (65)
Greater Columbia	39	710,850	5.5	48	30.8% (12)	69.2% (27)
Southwest Washington	56	493,780	11.3	47	26.8% (15)	80.4% (45)
Olympic Community of Health	91	367,090	24.8	56	61.5% (56)	73.6% (67)
North Central	17	252,970	6.7	48	41.2% (7)	(70.6%) 12
Marriage and Family Therapists Associates						
Statewide*	535	7,183,700	7.4	39	12.1% (65)	79.3% (424)
By Accountable Community of Health (ACH) †						
Pierce County	86	844,490	10.2	37	7.0% (6)	77.9% (67)
North Sound	72	1,206,900	6.0	40	15.3% (11)	80.6% (58)
King County	239	2,105,100	11.4	38	10.5% (25)	79.1% (189)
Better Health Together	36	587,770	6.1	37	11.1% (4)	80.6% (29)
Cascade Pacific Action Alliance	44	614,750	7.2	42	18.2% (8)	86.4% (38)
Greater Columbia	8	710,850	1.1	35	12.5% (1)	62.5% (5)
Southwest Washington	16	493,780	3.2	40	18.8% (3)	62.5% (10)
Olympic Community of Health	28	367,090	7.6	44	21.4% (6)	82.1% (23)
North Central	6	252,970	2.4	39	16.7% (1)	83.3% (5)

Data source: Washington State Department of Health, 2017 Health Professions Licensing Data System.

* MFTs and MFTAs with Washington State license address only.

† Counties in multi-county ACH's are Whatcom, Skagit, Snohomish, San Juan, Island (North Sound), Ferry, Stevens, Pend Oreille, Lincoln, Spokane, Adams (Better Health Together), Grays Harbor, Mason, Thurston, Pacific Lewis, Wahkiakum, Cowlitz (Cascade Pacific Action Alliance), Whitman, Asotin, Garfield, Columbia, Walla Walla, Franklin, Benton, Kittitas, Yakima (Greater Columbia), Clark, Skamania, Klickitat (Southwest Washington), Clallam, Jefferson, Kitsap (Olympic Community of Health), Okanogan, Chelan, Douglas, Grant (North Central).

Figure 3: Master's Degrees in Marriage and Family Therapy Professions in Washington State, 2011 - 2015



Data source: Integrated Postsecondary Education Data System (IPEDS). Institutions' program coding selections likely result in overestimation of MFT graduates due to inclusion of other programs in larger selected categories.

TABLE 3. Washington Schools Offering Master-Level Degrees in Marriage and Family Therapy, 2017

School	# Graduations 2016	COAMFTE Accredited
City University of Seattle*	13	
Whitworth University†	10	
Antioch University Seattle	9	X
Pacific Lutheran University	24	X
Seattle Pacific University	28	X
Seattle University	26	X

Data sources: Integrated Postsecondary Education Data System (IPEDS), 2016 provisional data; American Association for Marriage and Family Therapy Directory of MFT Training Programs, August 2017; Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) directory (accessed August 2017). Central Washington University's program was excluded as it was described as preparing graduates for Certified Family Life Educator or Certified Child Life Specialist professions.

* City University's counseling program with a Marriage, Couple and Family emphasis is CACREP accredited (Council for Accreditation of Counseling and Related Educational Programs), but the student handbook specifically details preparation for Washington state MFT licensure. Total graduates include Clinical Mental Health Counseling Program students who may apply for Mental Health Counseling license.

† Whitworth University's 2017 student handbook states that the MFT program is pursuing COAMFTE accreditation.

Education and Training

Universities in Washington may offer marriage and family therapy programs through psychology or education schools or departments. Some programs prepare graduates for clinical counseling work as a licensed marriage and family therapist, others for a mental health counselor license, and others towards school psychologist credentials. These are overlapping fields, but are credentialed separately. While available education data do not always distinguish graduates' program track, six schools in Washington offer masters in marriage and family therapy or counseling programs focused on preparing graduates to acquire a Marriage and Family Therapist license (Table 3). A seventh school, Gonzaga University, offers a master's program in Marriage and Family Counseling, but the program student handbook suggests students apply for a mental health counseling license, not marriage and family therapy license, and therefore their graduates were not included. (Table 3 and Figure 3)

Credentialing

Applicants for an MFT license must have a master's or doctorate degree in marriage and family therapy or an equivalent course of study from an approved behavioral science school. (Washington State Department of Health, 2017) A total of 45 semester hours or 60 quarter credits are required in all eight of the following areas study, and at least 27 semester credits or 36 quarter credits are required in the first five areas: marital and family systems, marital and family therapy, individual development, psychopathology, human sexuality, research, professional ethics and law, and one elective course.

In Washington state, applicants who have obtained clinical membership status in the American Association for Marriage and

Family Therapy (AAMFT) are considered to have met the educational requirements for licensure when verification is sent directly from the AAMFT to the Department of Health. A passing score on the board examination overseen by the Association of Marital and Family Therapy Regulatory Boards is also required for licensure.(Association of Marital & Family Therapy Regulatory Boards, 2017)

To gain the supervised experience necessary to become a licensed independent MFT, graduates apply for conditional licensure as a marriage and family therapist associate. Associates may provide and be paid for services only under approved supervision. The associate credential can only be renewed six times.

Applicants for MFT licensure must complete at least 3,000 hours of supervised postgraduate experience, 1,000 of which must be direct client contact, over at least two calendar years. (Washington State Legislature, 2017) At least 500 hours must be gained in diagnosing and treating couples and families, along with at least 200 hours of qualified supervision with an approved supervisor. At least 100 of the 200 hours must be one-on-one supervision, and the remaining hours may be in one-on-one or group supervision.

Of the total supervision requirement, 100 hours must be with a licensed marriage and family therapist who has at least five years of clinical experience. The other 100 hours may be with an equally qualified licensed mental health practitioner. Applicants who have completed a master's program accredited by the Commission on Accreditation for Marriage and Family Therapy Education of the American Association for Marriage and Family Therapy (COAMFTE) will be credited with 500 hours of direct client contact and 100 hours of formal meetings with an approved supervisor. Post-graduate supervised experience must be verified by an approved supervisor, on forms the Department of Health provides.

Practice Characteristics

Nationally, industries with the highest level of employment for MFTs are individual and family services, outpatient care centers, offices of other health practitioners, state governments, and residential care facilities.(Bureau of Labor Statistics, "Outlook Handbook", 2017) MFTs also work in private practice.

The 2016 mean annual wage¹ for MFTs in Washington was \$55,870 in May 2016.(Bureau of Labor Statistics, "Employment Statistics", 2017) The 10th percentile mean annual wage was \$34,170 and the 90th percentile mean annual wage was \$96,260.

Relevant Skills Needed for Behavioral Health – Primary Care Integration:

Generally, MFTs working in an integrated setting offer a mental health diagnosis, recommendations for or development of a patient support system; assessment and enhancement of patient motivation, patient education, and suggestions to optimize medication management.(Teater, 2011) To provide high quality care, MFTs should be able to understand the medical diagnosis, medical conditions, medications, specialty referrals, and physical changes that may impact therapy.

MFTs who wish to specialize in working in an integrated medical setting can pursue a post-graduate certificate in medical family therapy (MedFT). Seattle Pacific University is one of the few universities offering this program nationally, in both a post-graduate and master's track format.

The Commission on Accreditation of Marriage and Family Therapy Education's (COAMFTE) has not yet established the core competencies for the MedFT, and certificate curricula are not standardized. However, common characteristics of these programs include placement of MedFTs in primary care settings to learn medical culture, focus on those affected by chronic illness, trauma, disability or loss, and a theme of collaboration.(Tyndall, Hodgson, Lamson, White, & Knight, 2012) A biopsychosocial model of wellness is promoted in both standard marriage and family therapy and MedFT. Particularly in MedFT, the biological/physiological underpinnings of health should be understood.(Edwards & Patterson, 2006) Additional skills which MFTs need for working in the integrated setting include providing mental health services in a shorter time frame, learning electronic health record systems, and being able to read medical notes. MFTs should be prepared to encourage the patient to self-advocate in the medical setting.(Hodgson & Marlowe, 2011)

¹Estimates do not include self-employed workers.

Demand

Washington's "early warning" system of health workforce demand changes, the Washington Health Workforce Sentinel Network, allows employers to report workforce shifts and high-priority needs. (Workforce Training & Education Coordinating Board, 2017) Behavioral health and community health clinic sentinels mentioned MFTs to be among occupations with exceptionally long vacancies and increased demand in their facilities. Rural sentinels reported difficulty recruiting and retaining many occupations, including MFTs. Safety net sites reported low pay, on-call intensive work demands, and onerous paperwork requirements as reasons for long vacancies. They also expressed difficulty finding dual licensed (MH/SUD) treatment clinicians.

State data from the Washington State Employment Security Department (ESD) estimates that the average annual growth rate for mental health counselors between 2015 – 2020 will be 1.3% and for 2020 – 2025 will be 1.3%. (Washington State Employment Security Department, 2017) This equates to 9 annual openings due to growth, each. ESD estimates, however, are based on average health sector growth trends and do not necessarily take into account state initiatives that may increase demand for behavioral health occupations.

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TECHNICAL NOTES

- Washington State marriage and family therapist and marriage and family therapist associate data are from the Washington State Department of Health, Health Professions Licensing Data System, April 2017, as analyzed by the Washington State Office of Financial Management. All analyses include MFT/MFTAs ages 18 – 75 years with active license status and expiration of license \geq 2017.
- Washington population data are from the Washington State Office of Financial Management, 2016 data.
- Rural/urban status determined using Rural Urban Commuting Area (RUCA) taxonomy.(U.S. Department of Agriculture) and practitioner's license public address ZIP code.
- Included IPEDS CIP code includes 51.1505 (Marriage and Family Therapy/Counseling), 42.2811 (Family Psychology), and 42 (Psychology); excludes 19.0704 (Family Systems) and 42.28 (Clinical, Counseling and Applied Psychology) [42.28 coded as Mental Health Counselor designation]), Masters awards only, 1st/2nd major, no imputation variables. 2011 – 2015 Final Release Data.
- Washington State Employment Security Department, SOC code 21-1013 (Marriage and Family Therapists).

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SUGGESTED CITATION

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