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To: The Education Committee and General Assembly of the Connecticut Legislature
Date: February 15, 2016
Re: Raised Bill: An Act Concerning Marital and Family Therapists

I am writing in support of the bill to provide associate licensure for Connecticut Marital and Family Therapists through the Department of Public Health. Last year, **sHB 6861 - AN ACT CONCERNING MARITAL AND FAMILY THERAPISTS** had been passed by the Public Health Committee but did not make it to the floor.

I am writing as the director of the Master's program in Marriage & Family Therapy at CCSU. I am also a psychologist in private practice. Although I am a psychologist by degree, I am also credentialed and licensed as an MFT. Our program graduates approximately 30 students per year into the Connecticut work force.

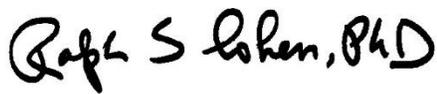
There are some very strong reasons why the Associate Licensing credential is important to the state:

- (1) As a workforce development issue, the current licensing law prevents graduating MFTs from participating in many venues for which they are qualified due to "payer issues" (i.e. ability to charge insurance companies for services) in various clinical settings;
- (2) As a parity issue, the field of social work has such an "associate license" on the books, which precludes MFTs from competing for jobs that they are equally qualified for and prevents potential employers from having a choice of whom they wish to hire, based on specialized skills and knowledge in family therapy;
- (3) MFTs are trained differently from the other mental health disciplines and have a unique, evidence-based skill-set that others do not have; namely, the ability to look at the larger context to understand how both relationships and symptoms are inter-connected and to seek resolution to the relationship problems that create, maintain, and exacerbate symptomatic reactions to stress. The current laws and regulations impede new MFTs' ability to hone and utilize their trade, thus constraining the larger system from availing itself to a valuable resource;
- (4) There currently is a teacher certification for school-based MFTs on the books; the law that created this certification also included the proviso that MFTs must be licensed by the Department of Public Health in order to qualify. Since the current licensing law precludes MFTs from obtaining their license for at least 12 months after they graduate, with all other qualifications for the teacher certificate being met, the inability to obtain a license prevents them from obtaining said certificate for at least a year (most often, it takes more than a year to meet all of the current licensing requirements; particularly the 100 supervision hour requirement, which amounts to 2 hours of supervision per week – which most employers do not provide). The Associate License will allow otherwise-qualified candidates for the educator certificate to be eligible to seek employment in this specialty area at point of graduation and successful passing of the MFT Board Exam.

Given the recognized added value of MFTs in the workforce of the Mental Health field, the excessive lag-time between graduation with the Master's degree and access to relevant employment needs to be corrected. Creation of the Associate License in MFT will serve both the professionals involved and the public in providing access to supervised clinical practice to professionals and the ability for agencies and clinics to be able to hire and train entry-level clinicians during these times of cutbacks in services due to shrinking budgets.

Thank you for the opportunity to provide testimony on this important issue.

Sincerely,



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Clinical Psychologist
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