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To: The Education Committee and General Assembly of the Connecticut Legislature
Date: 3-6-16
Re: Raised Bill HB 5550, adding "candidate for licensure" amendment to An Act Concerning MFTs

I write in support of the bill to amend Subsection (h) of HB 5550, Section 11. The amendment adds "or a candidate for licensure as a marital and family therapist". Ten years ago, Dr. Ralph Cohen from CCSU and I helped enact HB 5550, the law certifying Marital and Family Therapists (MFTs) for school-based practice. We recognized the need for comprehensive mental health teams in schools to support student learning. That need is now more clearly recognized as school violence has grown and we know more about the broad range of systemic factors (family, social and cultural) that affect a student's ability to learn.

Ten years ago we faced guild issues from some groups, which resulted in the requirement that MFTs meet higher standards than other school-based mental health groups (school counseling, psychology and social work). At that time, the law that passed resulted in MFTs being the only mental health profession required to be fully licensed in order to obtain school certification.

Since 2007 we have designed a school-based training track at CCSU for MFTs. Our experience is that, when we place MFT graduate students in schools, they quickly acclimate and are welcomed, contrary to the objections voiced by those opposed to the original legislation. All six licensed mental health professions do share similar skill sets regarding training in individual, group and family counseling, a phenomenon I call "necessary redundancies". As a clinician who has four education and mental health credentials, and has worked with schools for over forty years, I appreciate both those redundancies as well as the effectiveness of multidisciplinary collaboration.

Mental health practitioners all have specialized training, as well. Two skills, namely systemic training and focus on helping families, equip MFTs uniquely to strengthen school teams. Although it takes time to build multidisciplinary support systems in schools, we were able to track and publish results that recognize the value of family based, systemic team support (Laundy, K.C. (2015). *Building School-Based Collaborative Mental Health Teams: A Systems Approach to Student Achievement*. Camp Hill PA, TPI Press, the Practice Institute). Just as primary health care is now moving to more integrated care through a concept called "medical home", schools are also creating systemic "educational homes", where students can receive services in the setting where they spend the bulk of their time outside of the home. This is called a "soft handoff", where children receive early preventive services during the school day and/or with partnering agencies to boost their readiness to learn. It helps to identify children at risk early, and prevents costly out-of-district district placements and other problems later.

Schools should have the freedom to hire the multidisciplinary health teams that best meet their system's needs. Because of the current licensure requirement for MFTs, however, schools cannot hire MFT clinicians as they graduate, even after a productive training experience. MFTs must seek employment elsewhere until licensure, and both schools and those MFT clinicians lose valuable time and opportunity. We urge you to remove this constraint by supporting the "license eligible" candidate amendment to the Act Concerning Marital and Family Therapists, as other Connecticut mental health professions enjoy. Schools will be better for it.