



**American Association for  
Marriage and Family Therapy**

Advancing the Professional Interests  
of Marriage and Family Therapists

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## **Marriage and Family Therapy Core Competencies©**

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The marriage and family therapy (MFT) core competencies were developed through a collaborative effort of the American Association for Marriage and Family Therapy (AAMFT) and interested stakeholders. In addition to defining the domains of knowledge and requisite skills in each domain that comprise the practice of marriage and family therapy, the ultimate goal of the core competencies is to improve the quality of services delivered by marriage and family therapists (MFTs). Consequently, the competencies described herein represent the minimum that MFTs licensed to practice independently must possess.

Creating competencies for MFTs and improving the quality of mental health services was considered in the context of the broader behavioral health system. The AAMFT relied on three important reports to provide the framework within which the competencies would be developed: *Mental Health: A Report of the Surgeon General*; the President's New Freedom Commission on Mental Health's *Achieving the Promise: Transforming Mental Health Care in America*; and the Institute of Medicine's *Crossing the Quality Chasm*. The AAMFT mapped the competencies to critical elements of these reports, including IOM's 6 Core Values that are seen as the foundation for a better health care system: 1) Safe, 2) Person-Centered, 3) Efficient, 4) Effective, 5) Timely, and 6) Equitable. The committee also considered how social, political, historical, and economic forces affect individual and relational problems and decisions about seeking and obtaining treatment.

The core competencies were developed for educators, trainers, regulators, researchers, policymakers, and the public. The current version has 128 competencies; however, these are likely to be modified as the field of family therapy develops and as the needs of clients change. The competencies will be reviewed and modified at regular intervals to ensure the competencies are reflective of the current and best practice of MFT.

The core competencies are organized around 6 primary domains and 5 secondary domains. The primary domains are:

- 1) **Admission to Treatment** – All interactions between clients and therapist up to the point when a therapeutic contract is established.
- 2) **Clinical Assessment and Diagnosis** – Activities focused on the identification of the issues to be addressed in therapy.
- 3) **Treatment Planning and Case Management** – All activities focused on directing the course of therapy and extra-therapeutic activities.
- 4) **Therapeutic Interventions** – All activities designed to ameliorate the clinical issues identified.
- 5) **Legal Issues, Ethics, and Standards** – All aspects of therapy that involve statutes, regulations, principles, values, and mores of MFTs.
- 6) **Research and Program Evaluation** – All aspects of therapy that involve the systematic analysis of therapy and how it is conducted effectively.

The subsidiary domains are focused on the types of skills or knowledge that MFTs must develop. These are: a) Conceptual, b) Perceptual, c) Executive, d) Evaluative, and e) Professional.

Although not expressly written for each competency, the stem "Marriage and family therapists..." should begin each. Additionally, the term "client" is used broadly and refers to the therapeutic system of the client/s served, which includes, but is not limited to individuals, couples, families, and others with a vested interest in helping clients change. Similarly, the term "family" is used generically to refer to all people identified by clients as part of their "family system," this would include fictive kin and relationships of choice. Finally, the core competencies encompass behaviors, skills, attitudes, and policies that promote awareness, acceptance, and respect for differences, enhance services that meet the needs of diverse populations, and promote resiliency and recovery.

## Domain 1: Admission to Treatment

| Number | Subdomain    | Competence  |
|--------|--------------|---|
| 1.1.1  | Conceptual   | Understand systems concepts, theories, and techniques that are foundational to the practice of marriage and family therapy  |
| 1.1.2  | Conceptual   | Understand theories and techniques of individual, marital, couple, family, and group psychotherapy  |
| 1.1.3  | Conceptual   | Understand the behavioral health care delivery system, its impact on the services provided, and the barriers and disparities in the system.   |
| 1.1.4  | Conceptual   | Understand the risks and benefits of individual, marital, couple, family, and group psychotherapy.  |
| 1.2.1  | Perceptual   | Recognize contextual and systemic dynamics (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, spirituality, religion, larger systems, social context). |
| 1.2.2  | Perceptual   | Consider health status, mental status, other therapy, and other systems involved in the clients' lives (e.g., courts, social services).   |
| 1.2.3  | Perceptual   | Recognize issues that might suggest referral for specialized evaluation, assessment, or care.   |
| 1.3.1  | Executive    | Gather and review intake information, giving balanced attention to individual, family, community, cultural, and contextual factors.   |
| 1.3.2  | Executive    | Determine who should attend therapy and in what configuration (e.g., individual, couple, family, extrafamilial resources).  |
| 1.3.3  | Executive    | Facilitate therapeutic involvement of all necessary participants in treatment.  |
| 1.3.4  | Executive    | Explain practice setting rules, fees, rights, and responsibilities of each party, including privacy, confidentiality policies, and duty to care to client or legal guardian.              |
| 1.3.5  | Executive    | Obtain consent to treatment from all responsible persons.   |
| 1.3.6  | Executive    | Establish and maintain appropriate and productive therapeutic alliances with the clients.   |
| 1.3.7  | Executive    | Solicit and use client feedback throughout the therapeutic process.   |
| 1.3.8  | Executive    | Develop and maintain collaborative working relationships with referral resources, other practitioners involved in the clients' care, and payers.  |
| 1.3.9  | Executive    | Manage session interactions with individuals, couples, families, and groups.  |
| 1.4.1  | Evaluative   | Evaluate case for appropriateness for treatment within professional scope of practice and competence.   |
| 1.5.1  | Professional | Understand the legal requirements and limitations for working with vulnerable populations (e.g., minors).   |
| 1.5.2  | Professional | Complete case documentation in a timely manner and in accordance with relevant laws and policies.   |
| 1.5.3  | Professional | Develop, establish, and maintain policies for fees, payment, record keeping, and confidentiality.   |

## Domain 2: Clinical Assessment and Diagnosis

| Number | Subdomain  | Competence  |
|--------|------------|---|
| 2.1.1  | Conceptual | Understand principles of human development; human sexuality; gender development; psychopathology; psychopharmacology; couple processes; and family development and processes (e.g., family, relational, and system dynamics). |
| 2.1.2  | Conceptual | Understand the major behavioral health disorders, including the epidemiology, etiology, phenomenology, effective treatments, course, and prognosis.   |
| 2.1.3  | Conceptual | Understand the clinical needs and implications of persons with comorbid disorders (e.g., substance abuse and mental health; heart disease and depression).  |
| 2.1.4  | Conceptual | Comprehend individual, marital, couple and family assessment instruments appropriate  |

| Number | Subdomain    | Competence  |
|--------|--------------|---|
|        |              | to presenting problem, practice setting, and cultural context.  |
| 2.1.5  | Conceptual   | Understand the current models for assessment and diagnosis of mental health disorders, substance use disorders, and relational functioning.   |
| 2.1.6  | Conceptual   | Understand the strengths and limitations of the models of assessment and diagnosis, especially as they relate to different cultural, economic, and ethnic groups.   |
| 2.1.7  | Conceptual   | Understand the concepts of reliability and validity, their relationship to assessment instruments, and how they influence therapeutic decision making.  |
| 2.2.1  | Perceptual   | Assess each clients' engagement in the change process.  |
| 2.2.2  | Perceptual   | Systematically integrate client reports, observations of client behaviors, client relationship patterns, reports from other professionals, results from testing procedures, and interactions with client to guide the assessment process. |
| 2.2.3  | Perceptual   | Develop hypotheses regarding relationship patterns, their bearing on the presenting problem, and the influence of extra-therapeutic factors on client systems.  |
| 2.2.4  | Perceptual   | Consider the influence of treatment on extra-therapeutic relationships.   |
| 2.2.5  | Perceptual   | Consider physical/organic problems that can cause or exacerbate emotional/interpersonal symptoms.   |
| 2.3.1  | Executive    | Diagnose and assess client behavioral and relational health problems systemically and contextually.   |
| 2.3.2  | Executive    | Provide assessments and deliver developmentally appropriate services to clients, such as children, adolescents, elders, and persons with special needs.   |
| 2.3.3  | Executive    | Apply effective and systemic interviewing techniques and strategies.  |
| 2.3.4  | Executive    | Administer and interpret results of assessment instruments.   |
| 2.3.5  | Executive    | Screen and develop adequate safety plans for substance abuse, child and elder maltreatment, domestic violence, physical violence, suicide potential, and dangerousness to self and others.  |
| 2.3.6  | Executive    | Assess family history and dynamics using a genogram or other assessment instruments.  |
| 2.3.7  | Executive    | Elicit a relevant and accurate biopsychosocial history to understand the context of the clients' problems.  |
| 2.3.8  | Executive    | Identify clients' strengths, resilience, and resources.   |
| 2.3.9  | Executive    | Elucidate presenting problem from the perspective of each member of the therapeutic system.   |
| 2.4.1  | Evaluative   | Evaluate assessment methods for relevance to clients' needs.  |
| 2.4.2  | Evaluative   | Assess ability to view issues and therapeutic processes systemically.   |
| 2.4.3  | Evaluative   | Evaluate the accuracy and cultural relevance of behavioral health and relational diagnoses.   |
| 2.4.4  | Evaluative   | Assess the therapist-client agreement of therapeutic goals and diagnosis.   |
| 2.5.1  | Professional | Utilize consultation and supervision effectively.   |

### Domain 3: Treatment Planning and Case Management

| Number | Subdomain  | Competence  |
|--------|------------|---|
| 3.1.1  | Conceptual | Know which models, modalities, and/or techniques are most effective for presenting problems.  |
| 3.1.2  | Conceptual | Understand the liabilities incurred when billing third parties, the codes necessary for reimbursement, and how to use them correctly. |
| 3.1.3  | Conceptual | Understand the effects that psychotropic and other medications have on clients and the treatment process.                             |
| 3.1.4  | Conceptual | Understand recovery-oriented behavioral health services (e.g., self-help groups, 12-step  |

| Number | Subdomain    | Competence  |
|--------|--------------|---|
|        |              | programs, peer-to-peer services, supported employment).   |
| 3.2.1  | Perceptual   | Integrate client feedback, assessment, contextual information, and diagnosis with treatment goals and plan.   |
| 3.3.1  | Executive    | Develop, with client input, measurable outcomes, treatment goals, treatment plans, and after-care plans with clients utilizing a systemic perspective.                                |
| 3.3.2  | Executive    | Prioritize treatment goals.   |
| 3.3.3  | Executive    | Develop a clear plan of how sessions will be conducted.   |
| 3.3.4  | Executive    | Structure treatment to meet clients' needs and to facilitate systemic change.   |
| 3.3.5  | Executive    | Manage progression of therapy toward treatment goals.   |
| 3.3.6  | Executive    | Manage risks, crises, and emergencies.  |
| 3.3.7  | Executive    | Work collaboratively with other stakeholders, including family members, other significant persons, and professionals not present.   |
| 3.3.8  | Executive    | Assist clients in obtaining needed care while navigating complex systems of care.   |
| 3.3.9  | Executive    | Develop termination and aftercare plans.  |
| 3.4.1  | Evaluative   | Evaluate progress of sessions toward treatment goals.   |
| 3.4.2  | Evaluative   | Recognize when treatment goals and plan require modification.   |
| 3.4.3  | Evaluative   | Evaluate level of risks, management of risks, crises, and emergencies.  |
| 3.4.4  | Evaluative   | Assess session process for compliance with policies and procedures of practice setting.   |
| 3.4.5  | Professional | Monitor personal reactions to clients and treatment process, especially in terms of therapeutic behavior, relationship with clients, process for explaining procedures, and outcomes. |
| 3.5.1  | Professional | Advocate with clients in obtaining quality care, appropriate resources, and services in their community.  |
| 3.5.2  | Professional | Participate in case-related forensic and legal processes.   |
| 3.5.3  | Professional | Write plans and complete other case documentation in accordance with practice setting policies, professional standards, and state/provincial laws.                                    |
| 3.5.4  | Professional | Utilize time management skills in therapy sessions and other professional meetings.   |

#### Domain 4: Therapeutic Interventions

| Number | Subdomain  | Competence   |
|--------|------------|--|
| 4.1.1  | Conceptual | Comprehend a variety of individual and systemic therapeutic models and their application, including evidence-based therapies and culturally sensitive approaches.  |
| 4.1.2  | Conceptual | Recognize strengths, limitations, and contraindications of specific therapy models, including the risk of harm associated with models that incorporate assumptions of family dysfunction, pathogenesis, or cultural deficit.           |
| 4.2.1  | Perceptual | Recognize how different techniques may impact the treatment process.   |
| 4.2.2  | Perceptual | Distinguish differences between content and process issues, their role in therapy, and their potential impact on therapeutic outcomes.   |
| 4.3.1  | Executive  | Match treatment modalities and techniques to clients' needs, goals, and values.  |
| 4.3.2  | Executive  | Deliver interventions in a way that is sensitive to special needs of clients (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, disability, personal history, larger systems issues of the client). |
| 4.3.3  | Executive  | Reframe problems and recursive interaction patterns.   |
| 4.3.4  | Executive  | Generate relational questions and reflexive comments in the therapy room.  |
| 4.3.5  | Executive  | Engage each family member in the treatment process as appropriate.   |
| 4.3.6  | Executive  | Facilitate clients developing and integrating solutions to problems.   |

| Number | Subdomain    | Competence   |
|--------|--------------|--|
| 4.3.7  | Executive    | Defuse intense and chaotic situations to enhance the safety of all participants.   |
| 4.3.8  | Executive    | Empower clients and their relational systems to establish effective relationships with each other and larger systems.  |
| 4.3.9  | Executive    | Provide psychoeducation to families whose members have serious mental illness or other disorders.  |
| 4.3.10 | Executive    | Modify interventions that are not working to better fit treatment goals.   |
| 4.3.11 | Executive    | Move to constructive termination when treatment goals have been accomplished.  |
| 4.3.12 | Executive    | Integrate supervisor/team communications into treatment.   |
| 4.4.1  | Evaluative   | Evaluate interventions for consistency, congruency with model of therapy and theory of change, cultural and contextual relevance, and goals of the treatment plan.   |
| 4.4.2  | Evaluative   | Evaluate ability to deliver interventions effectively.   |
| 4.4.3  | Evaluative   | Evaluate treatment outcomes as treatment progresses.   |
| 4.4.4  | Evaluative   | Evaluate clients' reactions or responses to interventions.   |
| 4.4.5  | Evaluative   | Evaluate clients' outcomes for the need to continue, refer, or terminate therapy.  |
| 4.4.6  | Evaluative   | Evaluate reactions to the treatment process (e.g., transference, family of origin, current stress level, current life situation, cultural context) and their impact on effective intervention and clinical outcomes. |
| 4.5.1  | Professional | Respect multiple perspectives (e.g., clients, team, supervisor, practitioners from other disciplines who are involved in the case).  |
| 4.5.2  | Professional | Set appropriate boundaries, manage issues of triangulation, and develop collaborative working relationships.   |
| 4.5.3  | Professional | Articulate rationales for interventions related to treatment goals and plan, assessment information, and systemic understanding of clients' context and dynamics.  |

### Domain 5: Legal Issues, Ethics, and Standards

| Number | Subdomain  | Competence  |
|--------|------------|---|
| 5.1.1  | Conceptual | Know state, federal, and provincial laws and regulations that apply to the practice of marriage and family therapy.   |
| 5.1.2  | Conceptual | Know professional ethics and standards of practice that apply to the practice of marriage and family therapy.   |
| 5.1.3  | Conceptual | Know policies and procedures of the practice setting.   |
| 5.1.4  | Conceptual | Understand the process of making an ethical decision.   |
| 5.2.1  | Perceptual | Recognize situations in which ethics, laws, professional liability, and standards of practice apply.  |
| 5.2.2  | Perceptual | Recognize ethical dilemmas in practice setting.   |
| 5.2.3  | Perceptual | Recognize when a legal consultation is necessary.   |
| 5.2.4  | Perceptual | Recognize when clinical supervision or consultation is necessary.   |
| 5.3.1  | Executive  | Monitor issues related to ethics, laws, regulations, and professional standards.  |
| 5.3.2  | Executive  | Develop and assess policies, procedures, and forms for consistency with standards of practice to protect client confidentiality and to comply with relevant laws and regulations. |
| 5.3.3  | Executive  | Inform clients and legal guardian of limitations to confidentiality and parameters of mandatory reporting.  |
| 5.3.4  | Executive  | Develop safety plans for clients who present with potential self-harm, suicide, abuse, or violence.   |
| 5.3.5  | Executive  | Take appropriate action when ethical and legal dilemmas emerge.   |
| 5.3.6  | Executive  | Report information to appropriate authorities as required by law.   |

| Number | Subdomain    | Competence  |
|--------|--------------|---|
| 5.3.7  | Executive    | Practice within defined scope of practice and competence.   |
| 5.3.8  | Executive    | Obtain knowledge of advances and theory regarding effective clinical practice.  |
| 5.3.9  | Executive    | Obtain license(s) and specialty credentials.  |
| 5.3.10 | Executive    | Implement a personal program to maintain professional competence.   |
| 5.4.1  | Evaluative   | Evaluate activities related to ethics, legal issues, and practice standards.  |
| 5.4.2  | Evaluative   | Monitor attitudes, personal well-being, personal issues, and personal problems to insure they do not impact the therapy process adversely or create vulnerability for misconduct. |
| 5.5.1  | Professional | Maintain client records with timely and accurate notes.   |
| 5.5.2  | Professional | Consult with peers and/or supervisors if personal issues, attitudes, or beliefs threaten to adversely impact clinical work.   |
| 5.5.3  | Professional | Pursue professional development through self-supervision, collegial consultation, professional reading, and continuing educational activities.                                    |
| 5.5.4  | Professional | Bill clients and third-party payers in accordance with professional ethics, relevant laws and polices, and seek reimbursement only for covered services.                          |

### Domain 6: Research and Program Evaluation

| Number | Subdomain    | Competence   |
|--------|--------------|--|
| 6.1.1  | Conceptual   | Know the extant MFT literature, research, and evidence-based practice.   |
| 6.1.2  | Conceptual   | Understand research and program evaluation methodologies, both quantitative and qualitative, relevant to MFT and mental health services. |
| 6.1.3  | Conceptual   | Understand the legal, ethical, and contextual issues involved in the conduct of clinical research and program evaluation.                |
| 6.2.1  | Perceptual   | Recognize opportunities for therapists and clients to participate in clinical research.  |
| 6.3.1  | Executive    | Read current MFT and other professional literature.  |
| 6.3.2  | Executive    | Use current MFT and other research to inform clinical practice.  |
| 6.3.3  | Executive    | Critique professional research and assess the quality of research studies and program evaluation in the literature.                      |
| 6.3.4  | Executive    | Determine the effectiveness of clinical practice and techniques.   |
| 6.4.1  | Evaluative   | Evaluate knowledge of current clinical literature and its application.   |
| 6.5.1  | Professional | Contribute to the development of new knowledge.  |