



**American Association for
Marriage and Family Therapy**

Advancing the Professional Interests
of Marriage and Family Therapists

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The Profession of Marriage and Family Therapy

Marriage and Family Therapists are mental health professionals trained and licensed to independently diagnose and treat mental health and substance abuse problems. A Marriage and Family Therapist (commonly referred to as an MFT or Family Therapist) specializes in treating mental disorders within the context of relationships. Family Therapists work with the individual, couple, or family to change behavioral patterns so that problems can be resolved. Currently, there are over 50,000 clinically active MFTs.

Qualifications:

Family Therapists are highly qualified to provide mental health services. All licensed MFTs must have a minimum of a master's degree and at least two years of post-graduate supervised clinical experience. Thirty percent of all MFTs have a doctoral degree. Currently, 48 states recognize and license Family Therapists as independent mental health providers.

Family Therapists are the only professionals required to be trained in family therapy. Marriage and family therapy is based on the research and theory that mental illness and family problems are best treated in a family context. Trained in psychotherapy and family systems, Family Therapists focus on understanding their clients' symptoms and interaction patterns within their existing environment. MFTs treat predominantly individuals, but also provide couples, family and group therapy. Whomever the client, Family Therapists treat from a relationship perspective that incorporates family systems.

Family Therapists are trained to handle serious mental health problems. In a survey that asked Family Therapists to rate the severity of their clients' problems, 94% of the 850 cases handled by these MFTs were rated as moderately severe, severe, very severe, or catastrophic. The primary diagnoses most commonly reported by Family Therapists are mood disorders, relationship problems, anxiety disorders, and adjustment disorders. Half of all primary diagnoses are for depression, anxiety and adjustment disorders, and substance abuse. Nearly half of the clients of Family Therapists are taking psychotropic medications.

Family Therapists perform the services of diagnosis and psychotherapy. Like members of the other mental health professions, Family Therapists are trained in diagnosis, assessment, and treatment. A study of the laws of 40 states found little variation among the states in the scope of practice allowed among MFTs, psychologists, social workers, and licensed counselors. State licensure laws create little difference between these professions in their ability to provide mental health services.

Federal Recognition:

Family Therapists are recognized by the federal government as qualified mental health providers. The Public Health Service Act recognizes Marriage and Family Therapists as one of the five core mental health professions under the Health Professional Shortage Area and the National Health Service Corps programs administered by the Health Resources Services Administration. The program identifies geographic areas that have a shortage of mental health professionals. Additionally, Family Therapists are eligible to participate in various programs or receive grants, loans, or compensation for services provided through the following federal departments or agencies:

- Department of Defense
- Department of Education
- Department of Transportation
- Indian Health Service

Effectiveness:

Family Therapists offer effective treatments that result in marked improvements for their clients. In a survey of 492 clients of Family Therapists, 83% of the clients stated that the therapy goals had been mostly or completely achieved. Almost 90% of the clients reported an improvement in their emotional health.

Family therapy is effective in treating severe mental illness and other disorders. Family involvement has been consistently linked to better individual and family functioning. Family therapy outcomes for severe mental illness include improved well being, fewer illnesses, and decreased medical care utilization. Family therapy is particularly effective with families who are providing care to elders and to a child with a chronic illness (e.g., asthma, diabetes, cystic fibrosis, cancer). Family-based therapy has been proven effective in treating a variety of other disorders and problems regularly encountered by MFTs, including:

- Conduct Disorder and Delinquency
- Childhood Behavioral and Emotional Disorders
- Substance Abuse and Alcoholism
- Marital Problems, Relationship Enhancement, and Domestic Violence

Cost savings:

Family Therapists offer cost-effective treatments. MFTs provide brief, solution-focused therapy that often results in lower costs. Because Family Therapists often treat more than one person at a time, MFTs are in a good position to offer cost-effective solutions. A study that examined the cost to Medicare of adding MFTs as eligible providers concluded that adding Family Therapists as providers would account for less than 0.0015% of total Medicare expenditures. Several studies of state and private health plans have demonstrated the cost-effectiveness of Family Therapists. For example, a study prepared for the Maine legislature concluded that a proposed bill requiring healthcare plans to reimburse MFTs for mental health services would have a negligible impact on insurance premiums. A report by the Texas Department of Insurance found that the total MFT claims as a percentage of the total claims paid by group insurance plans in Texas were 0%. A report by the Virginia State Corporation Commission found that the average percentage of total claims for MFT services in Virginia in 2004 was 0% for individual contracts and .01% for group contracts.

Family Therapists are more cost-effective than other mental health professionals. Family Therapists are as effective as other mental health professionals in diagnosing and treating mental health and substance abuse problems, but at a lower cost to payers. A survey of large insurers in Massachusetts found that licensed psychologists cost insurers, on average, \$5.00 to \$10.00 more per session than MFTs. A recent state-mandated study in Virginia found that the average claim cost per visit by MFTs for a 45 to 50 minute session of psychotherapy was \$35.05, which is lower than the average cost per visit for any of the other mandated mental health providers in Virginia. By comparison, the average claim cost per visit was 27% higher for social workers than for MFTs, 34% higher for professional counselors, 70% higher for psychologists, and almost four times higher for psychiatrists.

Family therapy reduces medical expenses. Many studies have concluded that a “cost-offset” phenomenon exists for mental health coverage. An offset effect occurs when people reduce their use of medical services following some type of therapy or behavioral health intervention. Mental health therapy helps people deal with their life circumstances more effectively, therefore reducing the tendency for emotional concerns to be expressed as physical problems. In a federal study that involved interviews with representatives from several large employers who offer generous mental health benefits to their employees, the employers stated that comprehensive mental health benefits ultimately reduces physical health costs and has a positive impact on their employees. A study of marriage and family therapy participants that compared the participants’ healthcare utilization for six months before and after family therapy began found that the participants significantly reduced their medical visits by 21.5%.

Family therapy reduces the cost of providing health care to those who are high utilizers. A study of whether family therapy is associated with a reduction of health care use by patients identified as high utilizers found that family therapy participants reduced their use of medical services by 53%. Additionally, this study found that family therapy has a positive impact on family members who are not the focal point of therapy. Parents who received family therapy for their children had a 57% drop in health care services themselves even though the parents were not the identified patients receiving therapy.

Family Therapists in Rural Locations:

Family Therapists are able to serve the needs of rural residents. Rural American suffers disproportionately from a shortage of mental health professionals. Over 85% of designated Mental Health Professional Shortage Areas in the U.S. are located in rural counties. Master’s level mental health practitioners, such as MFTs and social workers, are more likely to be located in rural areas than professions requiring a doctorate. A study of Maine and Massachusetts after the passage of laws that required reimbursement of social workers found that these laws appeared to increase the number of social workers in private practice in areas that have not attracted as many psychiatrists.

Family Therapists are more likely to practice in rural areas than are other mental health professions. Family Therapists are more likely to be in rural areas than psychiatrists and also to be in areas that do not have a psychiatrist. In the most rural counties in the U.S., which make up 15.5% of all counties in the U.S., there are twice as many MFTs as psychiatrists in those counties. An analysis by county of all of the core mental health professions in Texas found that there were fourteen Texas counties, all but one rural, that only had MFTs and no other core mental health provider. Including Family Therapists in health plans will lead to a greater number of covered providers in underserved rural counties.