November 6, 2020

Dr. Manijeh Daneshpour
Marriage and Family Therapy Program
Alliant International University (PsyD)

Dear Dr. Daneshpour:

The Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE), at its October 9-10, 2020 meeting, reviewed the Marriage and Family Therapy (PsyD) program at Alliant International University for Renewal of Accreditation. This review included consideration of the program’s Eligibility Criteria, Self-Study, COAMFTE’s Self-Study Review Letter, Program’s Additional Information, Site Visit Report, Program’s Response to Site Visit Report, and any additional materials submitted by the program.

The Commission voted to grant Renewal of Accreditation for a period of seven (7) years, November 1, 2020 - November 1, 2027 with Stipulations on the following Key Elements:

Key Element II-C
Key Element III-A
Key Element III-F
Key Element V-B
Key Element V-D

The Commission’s review of the program’s Renewal of Accreditation materials is below:

ELIGIBILITY CRITERIA

Commission’s Response:
The program provided sufficient information to meet all the Eligibility Criteria.
STANDARD I: OUTCOME-BASED EDUCATION

Key Element I-A: Outcome-Based Education Framework
The program has an overall outcome-based education framework that includes the following:

- A description of the program’s mission, and how it fits with the larger institutional setting of the program.
- Specific program goals (which describe broad aspirations for the program and for students/graduates of the program) are clearly derived from the program’s mission and that promote the development of Marriage and Family Therapists (including knowledge, practice, diversity, research, and ethics competencies).
- Measurable Student Learning Outcomes (SLOs) for each program goal.
- Programs must include SLOs that measure student/graduate achievement appropriate to the program’s mission and goals.
- Specific assessment measures for operationalizing the achievement of Student Learning Outcomes (including student/graduate achievement) including targets and benchmarks. Measurement includes assessment of students’ academic and professional competencies by the faculty and others, appropriate to the program’s mission, goals, and outcomes.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of the Program Goals and Student Learning Outcomes that linked the program’s mission and larger institutional setting as well as measurable Student Learning Outcomes and assessment measures for the achievement of those Student Learning Outcomes.

Key Element I-B: Assessment Plan with Mechanisms and Timeline
The program has an overall assessment plan that includes:

- Mechanisms in place for evaluating/reviewing the Student Learning Outcomes, including student/graduate achievements (utilizing specific measures identified in I-A).
- Mechanisms in place for evaluating student support services; curriculum and teaching/learning practices; fiscal and physical resources; technological resources; and instructional and clinical resources to determine sufficiency for attainment of targeted program outcomes.
- An assessment plan and corresponding timeline that addresses when, from whom, and how data is collected, and a description of how data will be aggregated and analyzed and the findings used for program improvement (feedback loop). The assessment plan should include a specific description of how the program will review and revise, as needed, their overall outcome-based education framework and assessment plan.
- The assessment plan must incorporate feedback from Communities of Interest (as defined in Key Element I-C).

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of having mechanisms in place for evaluating and reviewing the Student Learning Outcomes, student
achievements, programmatic resources and demonstrated how data was collected and utilized to contribute to program improvement.

**Key Element I-C: Communities of Interest**

*The program identifies its Communities of Interest, obtains formal and informal feedback from them, and describes how they inform the program’s mission, goals, and Student Learning Outcomes. Communities of Interest vary according to the program’s mission, goals, and outcomes and may include, but are not limited to, students, administrators, faculty, supervisors, consumers, graduates, potential employers, germane regulatory bodies, germane private and public funding sources, and diverse, marginalized, and/or underserved groups within these communities.*

**Commission’s Response:**

The program meets the requirements of this Key Element. The program provided evidence of Communities of Interest, the process of feedback, and how that feedback informs the program’s mission, goals, and outcomes.

**STANDARD II: COMMITMENT TO DIVERSITY AND INCLUSION**

**Key Element II-A: Multiculturally-informed Education Approach**

*The program has a multiculturally-informed educational approach that includes:*

1) specific program goals with specific Student Learning Outcomes reflecting a commitment to diversity and inclusion;

2) an overarching definition of diversity; and

3) curriculum elements with accompanying teaching/learning practices consistent with the program’s mission. The educational approach includes the teaching of ideas and professional practices for MFTs that address a range of diversity, including (but not limited to) race, age, gender, ethnicity, sexual orientation, gender identity, socioeconomic status, disability, health status, religious, spiritual, and/or political beliefs, nation of origin or other relevant social categories, immigration or language.

**Commission’s Response:**

The program meets the requirements of this Key Element. The program provided evidence of implementing a multiculturally informed approach committed to diversity and inclusion. Additionally, the program responded to the site visit feedback by updating their Internship Completion Form with additional questions related to sensitivity to marginalized and diverse populations and provided this updated form to the Commission.

**Key Element II-B: Program Climate of Safety, Respect, and Appreciation**

- The program has demonstrated systematic efforts and has an ongoing comprehensive strategy in place to attract and retain a diverse student body, faculty, and supervisors.

- The program demonstrates a climate of safety, respect, and appreciation for all learners including those from diverse, marginalized, and/or underserved communities, and has
mechanisms in place for evaluating the climate and responding to any feedback regarding the climate.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of a climate of safety, respect, and appreciation for all learners by responding to student feedback, making faculty changes, and adding didactic course content related to social justice, self-awareness, and introspection.

Key Element II-C: Experience with Diverse, Marginalized, and/or Underserved Communities
The program demonstrates student experience in Couple or Marriage and Family Therapy practice with diverse, marginalized, and/or underserved communities. Experiences may include:
1) professional activities (such as therapy, research, supervision, consultation, teaching, etc.) with diverse, marginalized, and/or underserved communities; and/or
2) other types of activities (such as projects, service, interviews, workshops, etc.), as long as the program can demonstrate that the experience is directly related to MFT activities, and students are in interaction with members of these communities.

Commission’s Response:
The program does not meet the requirements of this Key Element. The program indicated evidence to meet this Key Element for the San Diego and Los Angeles campuses but not for all of the branch campuses. The program needs to provide evidence of student experience with diverse, marginalized, and/or underserved communities for the Irvine and Sacramento campuses.

STANDARD III: INFRASTRUCTURE AND ENVIRONMENTAL SUPPORTS

Key Element III-A: Fiscal and Physical Resources
The program demonstrates that fiscal and physical resources are sufficient to achieve the program’s mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.

Commission’s Response:
The program does not meet the requirements of this Key Element. The program indicated that resources are sufficient and provided evidence of new benchmarks; however, the program failed to demonstrate how resources are revised and support program effectiveness specific to the PsyD program. Additionally, the program needs to provide evidence of how resources are revised to support the effectiveness of the PsyD program as separate from the MA program.

Key Element III-B: Technological Resources
The program demonstrates that technological resources (e.g., laptops, audio/visual equipment, EMRs and Billing Systems, Virtual Meeting Space) are secure, confidential, Health Insurance Portability and Accountability Act compliant (if relevant), and sufficient to achieve the program’s mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.
Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of established benchmarks to determine sufficiency of resources as well as a plan to address those benchmarks that were not met.

Key Element III-C: Instructional and Clinical Resources
The program demonstrates that instructional and clinical resources (e.g., space, personnel, supplies) are sufficient to enable the program to meet the program’s mission, goals, and outcomes. These resources are reviewed, revised as needed, and support program effectiveness.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of implementing an annual survey to the community, presenting the resulting data, and establishing benchmarks for sufficiency of these resources.

Key Element III-D: Academic Resources and Student Support Services
The program demonstrates that academic resources (e.g., library, advising, writing centers) and student support services (e.g., access to counseling, financial advising) are accessible to students and sufficient to achieve the program’s mission, goals, and outcomes. These resources are reviewed based on core faculty and student input, and the program takes action or advocates for institutional change to address areas required for program effectiveness.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of implementing an annual survey to the community and included the resulting data, and established benchmarks for sufficiency of these resources. Surveys, results, and meeting minutes of containing the survey result follow-up was provided.

Key Element III-E: Faculty Qualifications & Responsibilities
The faculty roles, in teaching, scholarship, service, and practice are identified clearly and are congruent with the program’s mission, goals, and outcomes.

- The faculty members are academically, professionally, and experientially qualified to achieve the program’s mission, goals, and outcomes. The qualifications must be identified in documented descriptions of roles and responsibilities. Faculty members must have documented expertise in their area(s) of teaching responsibility and knowledge of the content delivery method (e.g., distance learning).

- The program must demonstrate that it has mechanisms for reviewing and evaluating faculty effectiveness in support of the program’s mission, goals, and outcomes. Faculty evaluations include explicit links to the program’s mission, goals, and outcomes.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of completed Faculty Qualification Documents for all faculty.
Key Element III-F: Faculty Sufficiency
The faculty must be sufficient in number with a faculty-student ratio that permits the achievement of the program’s mission, goals, and outcomes and ensures that student educational needs are met. These resources are reviewed, revised as needed, and support program effectiveness.

- The program must have sufficient core faculty members who are knowledgeable and involved in ongoing program development, delivery, and evaluation required to achieve the program’s mission, goals, and outcomes.
- The program must have a stated process for evaluation of ongoing sufficiency of faculty resources.
- The program must demonstrate there are sufficient faculty and effective linking mechanisms with feedback loops, such as regular coordination, meetings, and/or communication, to connect and involve all faculty members in the achievement of expected and actual Student Learning Outcomes of the program.
- The program is permitted to use a combination of full-time, part-time and/or multiple adjuncts.

Commission’s Response:
The program does not meet the requirements of this Key Element. The program included survey data and benchmarks in the response to the site visit report as evidence. However, the program indicated that they are not meeting the benchmark that they identified for faculty sufficiency. The program also indicated they are attempting to hire additional faculty as a result of survey data and benchmarks not being met. The program needs to provide evidence of their hiring search and updated faculty sufficiency survey results.

Key Element III-G: Governance of Program
Roles of faculty and student participation in the governance of the program are clearly defined and enable the program to meet the program’s mission, goals, and outcomes. The program must describe decision-making processes and procedures at the program and institutional levels regarding the operation of the program that support program effectiveness.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of faculty roles and student participation in the governance of the program as well as decision-making processes that support program effectiveness.

Key Element III-H: Supervisor Qualifications & Responsibilities
Supervisors must be AAMFT Approved Supervisors or meet the supervisor equivalency definition in the glossary. Supervisor roles, as distinguished from teaching faculty, are identified clearly and are congruent with the program’s mission, goals, and outcomes.

- Supervisors are academically, professionally, and experientially qualified to achieve the program’s mission, goals, and outcomes. The qualifications must be identified in documented descriptions of roles and responsibilities.
- If supervisor equivalency is used, there must be full disclosure to students in order for them to make informed decisions and evaluate regulatory implications for other states/provinces/locations.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of supervisors being academically, professionally, and experientially qualified to achieve the program’s mission, goals, and outcomes as well as identified their roles and responsibilities.

Key Element III-I: Supervisor Sufficiency
Supervisors must be sufficient in number with a supervisor-student ratio that permits the achievement of the program’s mission, goals, and outcomes, especially Student Learning Outcomes. Supervisory resources are reviewed, revised as needed, and support program effectiveness.
- The program must have a stated process for evaluation of ongoing sufficiency of supervisor resources.
- The program must demonstrate there are sufficient and effective linking mechanisms with feedback loops, such as regular coordination, meetings, and/or communication, connecting and involving all supervisors in the achievement of expected and actual achievement of Student Learning Outcomes within the program.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of supervisor sufficiency as well as a process of evaluation and feedback loops for evaluation of sufficiency.

STANDARD IV: CURRICULUM

Key Element IV-A: Curriculum and Teaching/Learning Practices
The program must provide:
- A description of the logical sequencing of the curriculum and practice components, including rationale for how the program’s goals and accompanying Student Learning Outcomes fit within the program offered (e.g., where goals and outcomes are addressed and assessed within the curriculum).
- A description of key teaching/learning practices used to accomplish program goals, and Student Learning Outcomes.
- A description of processes and procedures to ensure and monitor student progress and completion of requirements.
- A description of governance processes and procedures for designing, approving, implementing, reviewing, and changing the curriculum.
Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of logical sequencing of the curriculum as well as revisions, teaching practices to accomplish program goals and Student Learning Outcomes as well as processes and procedures for monitoring student progress.

Key Element IV-B: Foundational and Advanced Curricula

Advanced Curriculum
The advanced curriculum advances knowledge and skill by addressing the curricular areas below.

- Doctoral degree programs demonstrate that they offer course work in all the Advanced Curricular Areas (ACA) that make up the advanced curriculum.
- Post-degree programs may offer components of the advanced curriculum.
- Within each area, the balance of skills and competencies developed should be appropriate to the program’s mission, goals, and outcomes as well as the program’s local context.
- Programs may emphasize some of the areas more than others and include other areas that are consistent with their program’s mission, goals, and outcomes.

ACA 1: Advanced Research
This area facilitates students in developing competencies in: a) advanced research, including demonstrated proficiency in quantitative methods and analysis techniques, qualitative methods and analysis techniques, or mixed methods and analysis techniques appropriate to carrying out research in relationships; b) demonstrated working knowledge of other methodologies and analysis techniques outside of their proficiency area (e.g., if a student decides to become proficient in quantitative methods, s/he will have a working knowledge of qualitative methods as well); c) demonstrated understanding of the theoretical complexity of change within relationships and how this complexity informs research; d) understanding and demonstrated sensitivity to and awareness of how issues of diversity in terms of culture, gender, sexual orientation, age, SES, etc. play a role in their choice of research topics and their conduct of research activities; and e) students should have opportunities to participate in grants and grant-writing activities, and in the publication and presentation of research material.

ACA 2: Advanced Relational/Systemic Clinical Theory
This area facilitates students developing advanced clinical competencies including: a) demonstrating an advanced understanding and application of multiple family and couple models and empirically-supported interventions; b) skill in working with diverse populations across the lifespan through direct clinical work or in supervision of the therapy of others; c) demonstration of an awareness of cultural issues, differences, and personal blind spots in their clinical and supervisory work; and d) development of a specialized clinical area that is grounded in research and is at an advanced level of intervention and understanding.

ACA 3: Advanced Relational/Systemic Applications to Contemporary Challenges
This area facilitates the development of leading-edge professionals who develop relational/systemic innovations. This includes application to controversial moral and advanced ethical dilemmas, international, cross-cultural, and multicultural issues in Couple or Marriage and Family Therapy
professional roles, responsibilities, practices, and applications to other contemporary problems. This area also includes a focus on family policy and/or family law.

ACA 4: Foundations of Relational/Systemic Teaching, Supervision, Consultation, and/or Leadership

This area facilitates the development of competencies in relational/systemic teaching, supervision, and/or MFT consultation. This may include educational/learning theories, relevant research, multicultural content, evaluation and assessment methods, ethics and professional issues, and personal philosophy. This area also addresses administrative competencies including program development and policy, leadership roles and evaluation of MFT educational and service-oriented institutions and agencies. Students who intend to teach at the higher education level will develop and apply a teaching philosophy, as well as demonstrate the capacity to develop and apply course evaluation methods and Student Learning Outcomes. All students will demonstrate skills in clinical supervision. Students who have teaching opportunities in formal or informal settings will demonstrate a sensitivity to issues of diversity in the material they teach, to the persons they are teaching, and in the ways in which information and correction is provided.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of the advanced curricula and how it is implemented.

Key Element IV-C: Foundational and Advanced Application Components

The program must demonstrate they offer an application component with appropriate placement in the curriculum, duration, focus, and intensity consistent with their program’s mission, goals, and outcomes.

Advanced Practical Experience Component

- Programs that teach the advanced curriculum must offer the advanced experience component.
- Areas include selected experiences consistent with the program’s mission, goals, and outcomes in any of the following: advanced research, grant-writing, teaching, supervision, consultation, advanced clinical theory, clinical practice/innovation, program development, leadership, or policy. In addition, programs may offer experiences in presenting and professional writing.
- The program must demonstrate appropriate and adequate mentoring of students during the experience.
- The advanced experiences offered by doctoral degree programs must address a minimum of two of the areas noted above and combined be over a minimum of 9 months.
- The advanced experiences offered by post-graduate programs must address a minimum of one area and combined be over a minimum of 6 months.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence that they offer an application component with appropriate placement in the curriculum, duration, focus, and intensity consistent with their program’s mission, goals, and outcomes.
Key Element IV-D: Program and Regulatory Alignment
The program demonstrates that graduates have met educational and clinical practice requirements (e.g., coursework, clinical experience, and supervision) that satisfy the regulatory requirements for entry-level practice in the state, province, or location in which the program physically resides or in which the student intends to practice. Programs must also document that students are informed (e.g., demonstrate review of appropriate regulatory sites or licensing laws) about the educational, clinical, and regulatory requirements for entry-level practice in the state, province, or location in which each student resides or intends to practice.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence that graduates have met educational and clinical practice requirements that satisfy the regulatory requirements for entry-level practice in the state as well as provided licensing information for those students who wish to practice outside of the state.

Key Element IV-E: Curriculum/Practice Alignment with Communities of Interest
The program demonstrates that it considers the needs and expectations of identified Communities of Interest in developing and revising its curriculum and application component.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of implementing an annual assessment with benchmarks in July 2020. The program provided evidence of reviewing Community of Interest feedback and survey data that informed the curriculum in meeting minutes.

STANDARD V: PROGRAM EFFECTIVENESS AND IMPROVEMENT

Key Element V-A: Demonstrated Student/Graduate Achievement
The program provides aggregated data regularly collected on student/graduate achievement.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of aggregated data on student and graduate achievement.

Key Element V-B: Demonstrated Achievement of Program Goals
The program describes how data was analyzed and provides aggregated data that demonstrates achievement of each program goal via data from measured Student Learning Outcomes, based on targets and benchmarks provided in the program’s outcome-based education framework—data from Student Learning Outcomes demonstrate that the program is meeting program goals.

Commission’s Response:
The program does not meet the requirements of this Key Element. The program indicated that they are changing their benchmarks and rubrics but have not yet collected and analyzed data to determine if they have met benchmarks. The program needs to provide evidence of the results of implementing this feedback loop and provide data demonstrating the achievement of program goals.
Key Element V-C: Demonstrated Achievement of Faculty Effectiveness

The program must demonstrate faculty effectiveness in achieving the program’s mission, goals, and outcomes.

- The program provides aggregated data that demonstrates the Program Director provides effective leadership for the program to achieve its program’s mission, goals, and outcomes.
- The program provides aggregated data that demonstrates the performance and achievements of faculty that support attainment of the program’s mission, goals, and outcomes.

Commission’s Response:
The program meets the requirements of this Key Element. The program provided evidence of aggregated data that demonstrates the Program Director’s effective leadership as well as data demonstrating the faculty’s performance which supports the attainment of the program’s mission, goals, and outcomes.

Key Element V-D: Demonstrated Program Improvement

The program demonstrates how evidence is used to maintain the achievement of Student Learning Outcomes and/or foster program improvement with plans for future improvement based on the evidence. Evidence includes but is not limited to findings regarding program goals and outcomes, student/graduate achievement, Communities of Interest, and evaluations (as described in the assessment plan) of curriculum and teaching/learning practices; fiscal and physical resources; technological resources; instructional and clinical resources; academic resources; and student support resources. Data should demonstrate that the program is meeting its goals and outcomes, especially specified targets and benchmarks and if not, what plans the program has for meeting or modifying its goals.

Commission’s Response:
The program does not meet the requirements of this Key Element. The program indicated that there is a plan to include Communities of Interest in the review of data for program improvements; however, the plan did not specify how that would happen. The program needs to provide evidence of the revised review process which includes the Communities of Interest and how the outcomes of the reviews have led to program improvements.

NOTE: Consistent with the COAMFTE Corrective Action Policy (COAMFTE Accreditation Manual: Policies and Procedures, pp. 20-21), COAMFTE accredited programs carrying stipulations will have a maximum of two years from the date of stipulation to come into compliance with the standards. Year One will include Imposing of Stipulations; Year Two will include Probation and hosting a Focused Site Visit. Programs that fail to rectify such compliance issues will be subject to revocation of accreditation status at the beginning of Year Three.

Please note that the program is now in its Year 1 – Impose Stipulations stage. Consistent with the Corrective Action Policy, programs must submit a compliance report addressing deficiencies by the noted deadline, review accreditation materials, and consult with Accreditation Staff. Additionally,
it is recommended that the program attend accreditation trainings and seek consultation from an external consultant (a list of consultants can be obtained from the Accreditation Office).

Programs may elect to submit their response to stipulations earlier, for an interim review, to clear their stipulations. The interim response can only be submitted during the first year of the Corrective Action Policy. Following the interim response, programs will continue to report on the established timeline. Programs interested in submitting an interim response should contact COAMFTE staff to confirm the submission deadline.

Program’s Response to Stipulations Instructions:
1) Program’s response should address all Key Elements that have Stipulations and include definition of all referenced Key Elements.
2) Program’s response should not refer to previously submitted documents (Eligibility Criteria, Self-Study, appendices, etc.).
   • Programs may provide additional information as supporting evidence of the program’s response.
3) Program’s Response to Stipulations and any supporting documentation must be in one document, in a PDF format with bookmarks linked to the individual components. The bookmarks MUST follow the order of the individual components. The PDF document must not exceed 30 MB in size.
4) Program’s Response to Stipulations must be submitted on or before the due date to coa@aamft.org.

The following documents must be submitted in the required format by the noted deadlines:

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<th>Document</th>
<th>Submission Deadline</th>
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<tr>
<td>Interim Response to Stipulations (optional)</td>
<td>January 31, 2021</td>
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<tr>
<td>Response to Stipulations</td>
<td>July 31, 2021</td>
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<tr>
<td>Annual Report</td>
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In accordance with COAMFTE policy, the program will need to submit an Annual Report on July 31st of every year of your accreditation term.

Please feel free to contact the Accreditation Office by e-mail at coa@aamft.org or by phone at (703) 253-0448 if you have further questions or if you would like any additional information.

Sincerely,

Bobbi Miller, PhD  
COAMFTE Chair

Jill Fogolin  
Director of Accreditation