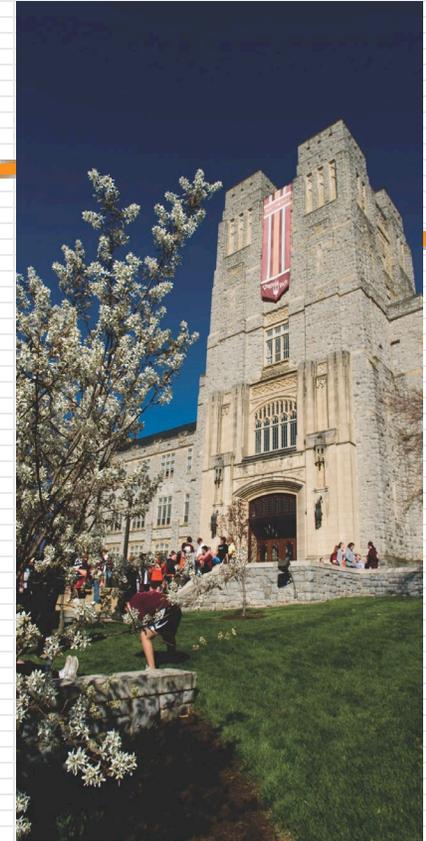


Integrating Advocacy into Every MFT Identity

Amy A. Morgan, M.S., LMFT
Lorien Jordan, Ph.D., LAMFT
Jessica Goodman, M.S.

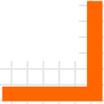


Background

- When and why do clinicians engage in social and political advocacy?
 - Integrated into training programs (Heinowitz et al., 2012; Teater, 2009)
 - MFTs express moderate interest but low participation in advocacy (Jordan & Seponski, 2017)
- Where do we stand with training in social and political advocacy skills?
 - Excellent training standards in social work
 - Lack of training for MFT and Counselor Ed
- MFTs are uniquely positioned to excel in enacting larger system change



Guiding Questions



- To what degree are family therapists involved in social and political advocacy?
- What are family therapists' beliefs and barriers to engaging in political and policy processes?

Method

- ❑ 500 surveys mailed
 - ❑ Items included: 13 demos; 29 yes/no; 2 open-ended questions
 - ❑ Based on SW measure (Gray et al., 2002)

- ❑ Participants
 - National sample (N= 174; 34% response rate)
 - 38 states represented
 - Homogeneity representative of AAMFT membership
 - Woman identified ($n = 126$)
 - White ($n = 151$)
 - Mean age 50.74 (28-82)
 - Fully licensed ($n = 166$)
 - Masters degree ($n = 126$)
 - Private practice ($n = 113$)

Analytic Plan

- Integration of Quant/Qual for depth and breadth
 - Quantitative plan
 - Descriptive statistics, frequencies, and mean scores
 - SPSS v23
 - Qualitative plan
 - 129 written responses
 - Braun and Clarke's (2006) inductive thematic analysis
 - Code and analyze open-ended questions

Results

- Discrepancies between beliefs and actions
 - 83% held belief that FTs should be politically active
 - Rate of participation significantly decreased as the level of involvement required increased
 - 73% felt lack of policy/advocacy knowledge was major reason for lack of FT action

- Internal Barriers for engagement
 - Knowledge
 - Feeling ineffective
 - Lack of interest

Discussion

- Findings highlight a gap in training for FTs
 - Interested and agree that public participation is fundamental to professional identity
 - Yet- do not have the skills for advocacy
- Lack of participation leaves field exposed to threats specific to our work; keeping FTs from higher profile discussions of family policy issues

Implications

- Primary practice implication is to reinforce the belief that part of a family therapist's identity is policy participation
- An important first step would be to incorporate advocacy skills both into our MFT core competencies as well as educational training
- There are realistic constraints to introducing this pedagogical shift, including space within curricula and a lack of experts in the family therapy field on this topic

Pedagogical Approaches to Teaching Advocacy

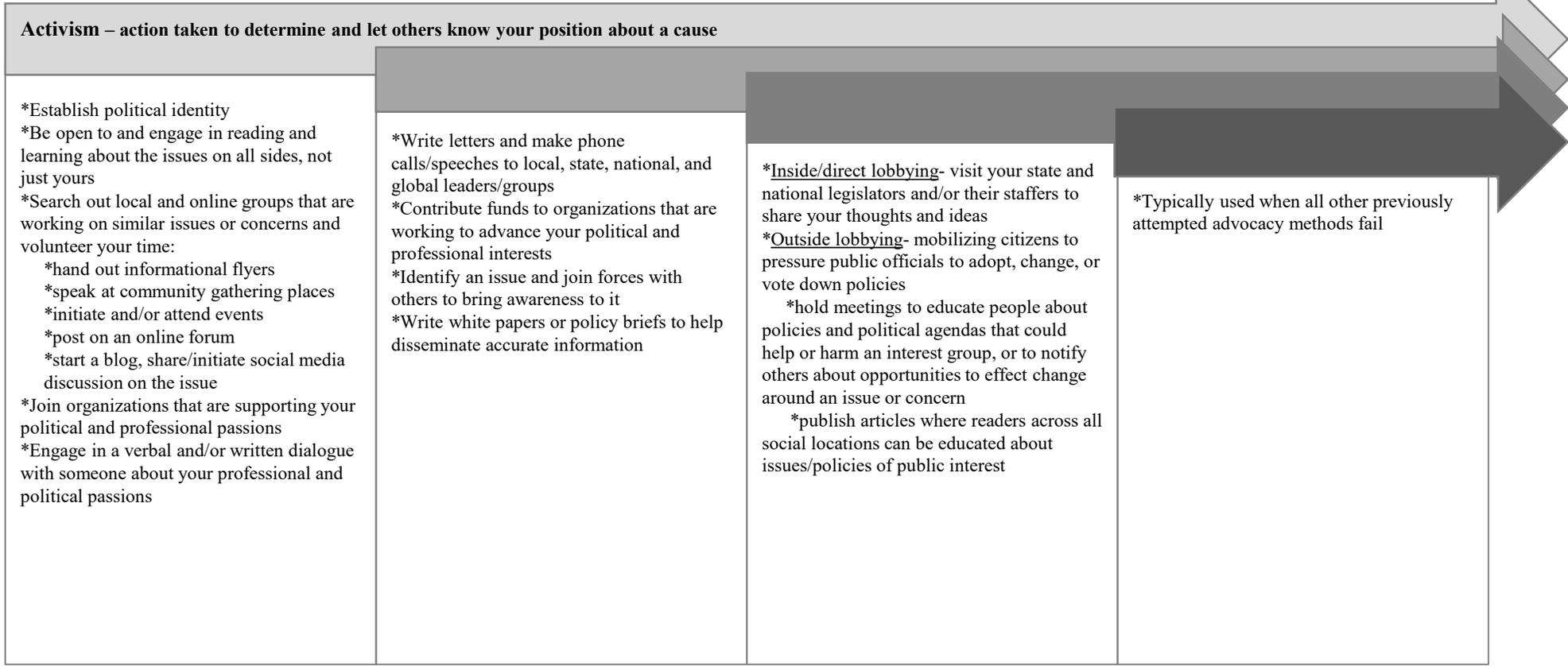
Table 1. Pedagogical approaches to training family therapists on political advocacy. Each approach builds on the former with increasing levels of applied practice.

Category	Pedagogical Approaches	Description
Classroom Preparation	Courses	Specific courses on advocacy, interdisciplinary courses with public health/policy, medicine, etc.
	Scaffolding activities	Teaching students to write policy briefs
	Decision-case method	Case presentation and defending one's position
	Mixed-media	Using documentaries, political blogs, and internet-based videos
Mentorship and Modeling	Mentorship	Pairing students with mentors who have advocacy experience
	Modeling	Guest speakers, pairing students together as peers
Applied Practice and Engagement	Legislative advocacy day	Application of advocacy skills with state legislators
	Advocacy Week	Week long events with mock legislative sessions
	3P approach	Practicing policy, pursuing change, and promoting social justice

Self-of-the-Advocate

- When people believe public participation is relevant personally, they also tend to believe the same professionally
- What is Self of the Advocate?
 - Cultivating awareness of one's biases and beliefs
 - Examining one's self-efficacy and political/advocacy identity
 - Leveraging a self-of-the-advocate awareness to make more conscious public participation choices

Advocacy Continuum



Citations

- Braun, V., & Clarke, V. (2006). Using thematic analysis in psychology. *Qualitative research in psychology*, 3(2), 77-101.
- Gray, M., Collett van Rooyen, C., Rennie, G., & Gaha, J. (2002). The political participation of social workers: A comparative study. *International Journal of Social Welfare*, 11(2), 99-110.
- Jordan, L., & Seponski, D. (2017a). Being a therapist doesn't exclude you from real life: Family therapists' beliefs and barriers to political action. *Journal of Marital and Family Therapy*. *Journal of Marital and Family Therapy*, 44(1), 19-31. doi:10.1111/jmft.12244.
- Jordan, L., & Seponski, D. (2017b). Moving beyond the therapeutic four walls: Family therapists' public participation. *Journal of Marital and Family Therapy*, 44(1), 5-18. doi:10.1111/jmft.12240.
- Goodman, J. S., Morgan, A. A., Hodgson, J. L., Caldwell, B. E. (2018). From private practice to academia: Integrating social and political advocacy into every MFT identity. *Journal of Marital and Family Therapy*, 44(1), 32-45. doi:10.1111/jmft.12298.

Contact Information

- Amy Morgan, *Virginia Tech*
 - aamorgan@vt.edu
- Lorien Jordan, *Mercer University School of Medicine*
 - Jordan_Is@mercer.edu
- Jessica Goodman, *East Carolina University*
 - goodmanj16@students.ecu.edu