

2010

Personal and Family Finance in the Marriage and Family Therapy Domain

Dorothy B. Durband
Texas Tech University

Sonya L. Britt
Kansas State University

John E. Grable
Kansas State University

Follow this and additional works at: <https://newprairiepress.org/jft>



This work is licensed under a [Creative Commons Attribution-Noncommercial 4.0 License](https://creativecommons.org/licenses/by-nc/4.0/)

Recommended Citation

Durband, D. B., Britt, S. L., & Grable, J. E. (2010). Personal and Family Finance in the Marriage and Family Therapy Domain. *Journal of Financial Therapy*, 1 (1) 5. <https://doi.org/10.4148/jft.v1i1.242>

This Article is brought to you for free and open access by New Prairie Press. It has been accepted for inclusion in Journal of Financial Therapy by an authorized administrator of New Prairie Press. For more information, please contact cads@k-state.edu.

Personal and Family Finance in the Marriage and Family Therapy Domain

Dorothy B. Durband¹
Texas Tech University

Sonya L. Britt, Ph.D.
John E. Grable, Ph.D.
Kansas State University

The purpose of this study was to determine what changes have occurred in the past 20 years in accredited marriage and family therapy (MFT) programs in terms of student training and preparation for treating family financial concerns. MFT program directors (N = 18) and students (N = 102) responded to an emailed web survey. Findings indicated that only two master's degree programs, two doctoral programs, and one post-graduate program offered a personal or family finance course elective. A discussion about the implications this limited exposure to personal finance topics plays in professional training is provided.

Keywords: personal finance; marriage and family therapy

INTRODUCTION

Personal and family finance courses have not typically been offered in marriage and family therapy (MFT) program curriculums. Yet, family financial issues are consistently reported as an area of difficulty faced by many married couples (e.g., Aniol & Snyder, 1997; Dean, Carroll, & Yang, 2007; Grable, Britt, & Cantrell, 2007; Papp, Cummings, & Goeke-Morey, 2009). An internet search for relationship problems results in a large number of hits that claim money-related issues are a presenting problem and contributing factor to relationship distress; although, it should be noted that many of these stories are not backed by empirical evidence. Given the possibility of a high correlation between financial and relationship satisfaction (see Grable et al.), it seems appropriate not only to study

¹ Contact Information: Dottie B. Durband, College of Human Sciences, Texas Tech University, Box 41210, Lubbock, TX 79409; 806-742-5050 x. 234; dottie.durband@ttu.edu

possible explanations for the association, but also to evaluate the services available to individuals struggling with financial issues that have an impact on satisfaction. One such service is offered by marriage and family therapists.

Twenty years ago, Poduska and Allred (1990) reviewed 25 accredited MFT programs. They found only one that required a family finance course. Another two listed family finance courses as possible electives. The authors concluded that even though finances at the interpersonal level are a known source of marital problems, related courses were not an integral part of training offered by MFT programs. They recommended course outlines as well as content for addressing the deficiency in family finance courses in MFT programs. Today, it is worth reevaluating the effectiveness of their recommendations to determine if these strategies were implemented. The purpose of this paper is to report the results from a study designed to address this question.

CONCEPTUAL REVIEW

The potential for marital discord in relation to personal and family finances would appear to be high when reviewing recent statistics on U.S. household finances reported in the popular press and in scholarly articles. One topic worth noting is the rise in U.S. household debt levels over the past decade. The average 2007 household credit card debt reported in the Federal Reserve Board Survey of Consumer Finances was \$7,300, up 30% from 2004. The median balance for those with a balance was \$3,000, up 25% from 2004 (Bucks, Kennickell, Mach, & Moore, 2009). A recent survey showed that even though most consumers are taking on less debt, they are still experiencing difficulty paying their bills (Chu, 2009).

A 2008 review of the American Association of Marriage and Family Therapy's (AAMFT) Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) directory of accredited graduate and post-graduate clinical programs in the U.S. and Canada revealed little information on coursework or preparation related to personal and family finances. The primary purpose of this study was to determine what changes have occurred, if any, in accredited MFT programs in terms of student preparation for treating family financial concerns since Poduska and Allred (1990) first examined the issue.

COAMFTE Requirements

All MFT programs accredited by the COAMFTE must meet certain minimum education standards. Students must demonstrate competency in theoretical and clinical knowledge, individual and family relations across the lifespan, ethics, and research. In addition to these classroom objectives, students must complete supervised clinical hours (AAMFT, n.d.). Many master's degree programs do not

offer many, if any, additional elective courses. Doctoral programs often have greater flexibility since students have already completed some of the core competency requirements during their master's studies. One of the objectives of this study was to determine to what extent MFT programs offer personal and family finance courses as electives, and to report the interest level of program directors and students on the possibility and practicality of offering courses or seminars on personal and family finance topics.

Diagnosing Issues

In addition to understanding the COAMFTE requirements, it is important to understand the primary diagnostic textbook used in MFT programs. The Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition, Text Revision (DSM-IV®-TR) is published by the American Psychiatric Association (2000). It is the text used by physicians, psychiatrists, psychologists, and marriage and family therapists to diagnosis individuals with mental disorders ranging from Attention Deficient Hyperactivity Disorder (ADHD) to Schizophrenia to Substance Abuse.

The only specific money disorder in the DSM-IV®-TR is Pathological Gambling, which is categorized by "persistent and recurrent maladaptive gambling behavior that disrupts personal, family, or vocational pursuits" (American Psychiatric Association, 2000, p. 671). Money-related issues could also be included in a separate section of the DSM-IV®-TR titled "Relational Problems," referred to as V-codes. V-codes are not generally reimbursed on insurance claims. Program directors and students were asked to share their thoughts about including money and financial issues as one or more specific disorders impacting a family's ability to engage in effective financial management. Results are presented later in the paper.

Summary

Money is commonly cited in newspaper and internet articles as a leading cause of marital dissatisfaction and divorce. Although popular press citations are not always backed by empirical evidence, the academic literature supports the notion of a relation between family finances and relationship distress. However, as will be shown, it is evident from a review of AAMFT program curriculum requirements, money-related courses are not often included in plans of study.

METHODOLOGY

Instrument Development

Two survey instruments were created for use as web surveys in this study: one for MFT program directors and another for graduate students. A review of the literature was conducted to determine the types of measures used by others interested in assessing the inclusion of personal and family finance topics in MFT curriculums. Few questions were found in the literature. As such, new ones were

developed to assess the variables of interest. Of these, some were adapted from a questionnaire previously used by Geiss and O'Leary (1981). The web survey for program directors contained 19 questions. The survey was designed to be completed in approximately 10 to 15 minutes. The web survey for students contained 16 questions, which could be completed in approximately 10 to 12 minutes. Prior to launching the survey, the two instruments were sent to a survey review panel which included MFT faculty members and graduate students at two universities. The reviewers made suggestions for improvement. These were implemented and included in the final web survey instruments.

Procedures

The AAMFT website (<http://www.aamft.org>) publishes a "Directory of MFT Training Programs" which are master's, doctoral, and post-graduate programs (i.e., programs designed to provide additional specialized training to therapists who have already completed a master's or doctoral program) accredited by the COAMFTE. The website provides contact information for program directors in the U.S. and Canada. This directory was used to create an email list of MFT program directors.

Contact procedures for this research followed a modified Dillman email methodology (Dillman, 2000). In late April 2008, a pre-notice email was sent to program directors in the U.S. and Canada listed in the MFT Training Programs directory. This pre-notice email introduced the study and outlined the purpose of the two surveys: Part I was a web survey of the accredited MFT program directors. Part II was a web survey of the director's MFT graduate students. Three days later, a survey invitation was emailed to 85 program directors. The email contained instructions and a link to the anonymous web survey. Directors were informed that the survey would take 10 to 15 minutes to complete. In addition, they were sent a separate email containing instructions and a link to the student web survey asking if they would forward it to their current graduate students. The purpose of this request was to generate a snowball sample which relied on referrals from the initial sample of program directors. Two follow-up reminder email messages were sent to the program directors in early May 2008 to encourage participation in the study. One was for the program director survey and the other was to be forwarded to students.

The survey was conducted using a U.S. Midwestern university's proprietary web-based survey tool. Responses to both surveys were anonymous. No identifying information (e-mail address, name, etc.) could be linked to a respondent's answers. An optional incentive was offered to the graduate students in an effort to increase participation in the survey. Respondents had the option to submit their email address to register for a drawing for a \$75.00 *Barnes & Noble* gift card. To register for the drawing, respondents had to (a) close the web survey link, (b) initiate an email to one of the researchers, and (c) submit their email address for the random

drawing. The list of email addresses was shredded following completion of the drawing.

The survey remained open for three weeks. One email message to program directors was returned as undeliverable. Therefore, the final response rate of the program director survey was 21% ($n = 18$). Student responses from the snowball survey forwarded by the program directors resulted in 102 completed questionnaires. A response rate cannot be calculated for this sub-sample because it is unknown how many students were emailed the survey. The number of graduate students currently enrolled in accredited MFT programs is also unknown.

RESULTS

Sample Characteristics

As shown in Table 1, half of the program directors (50%) in the study were female. They ranged in age from 34 to 64 ($M = 50$ years). A majority (94%) identified themselves as Caucasian/White, while 6% reported their racial/ethnic classification as "Other." A little more than three quarters (78.4%) of the respondents to the student survey (see Table 2) were female. These individuals ranged in age from 22 to 68 ($M = 31$). Regarding racial/ethnic background, 76% reported themselves as Caucasian/White, while 11% self reported as African American/Black, with 7% as Hispanic/Latino, and 5% as Asian or Pacific Islander. The category of "Other" contained those student respondents who did not match the above racial/ethnic classifications or were racially mixed. This group comprised another 2% of the sample.

Table 1
Program Director Characteristics

<i>Variables</i>	<i>Category and Distribution (%)</i>	
Gender	Male	50%
	Female	50%
Racial or Ethnic Background	Caucasian/White	94.4%
	Other	5.5%
Age	Range 34-64	Mean = 50.0, SD = 10.2

Personal or Family Finance Course Electives

The results from this study mirrored those of Poduska and Allred (1990) in that currently few MFT programs offer course electives in the content area of personal or family finance. None *require* a personal/family finance course. Program directors sampled in this study reported only two master's programs, two doctoral programs, and one post-graduate program that listed a personal or family finance

course elective. It is not known which programs offer the electives because program directors were not asked to provide their school affiliation.

Program Director Responses

Factors influencing the decision to offer personal and family finance elective courses at the master's, doctoral, or post-graduate program level were explored through an open-ended question. Program directors could report more than one answer to the question. According to six program directors (i.e., 40% of the sample), the content already in place appeared to be more important as programs were already course maximized. Five program directors felt that the number of required credits makes it difficult to get another course approved. Four program directors stated that they would need a faculty member with the interest/ability to teach the course(s), as well as the need for student interest in the course(s) before considering adoption within their curriculum.

Graduate Student Responses

Graduate students reported that they would benefit from taking additional coursework in personal and family finance, financial counseling, or personal business ownership/management. Of the students, more than half (60.7%, n = 62) reported that they would take an elective course in personal and family finance if it were offered and accepted into their plan of study. Open-ended reasons for the desire, or lack thereof, to take a personal and family finance course included the following themes (respondents were allowed to indicate more than one reason):

- common client issue/want to help clients (n = 30)
- personal interest/would take it (n = 16)
- no time for electives/other electives more interesting (n = 15)
- already have background in business or personal finance (n = 10)
- no interest/not relevant (n = 9)
- prefer to refer financial issues to another professional (n = 5).

One respondent noted, "I think it could help me to better serve my clients. The majority of my clients argue about finances." Another stated, "As a therapist, this may provide background in determining if families who are experiencing financial difficulties need further consultation with a financial advisor." On the other hand, a respondent commented, "I would not because in our program there is no time for electives. Taking electives means postponing graduation."

When asked if they would take an elective course in financial counseling, if it were offered and accepted into their plan of study, over half (56.8%, n = 58) responded in the affirmative. Responses to the open-ended portion of this question were analyzed for common themes and are reported here, along with the number of students' responses:

- common client issue/want to help client (n = 18)
- no interest/not relevant (n = 12)

- personal interest/would take it (n = 9)
- no time for electives/other electives more interesting (n = 4)
- already have a background in financial counseling (n = 4)
- prefer to refer financial issues to another professional (n = 3).

One student noted, "I see the importance of it, but there's no time," while another wrote, "the need to effectively counsel clients on financial management basics constantly comes up with my current clientele."

Students were asked if they would take an elective course in personal business ownership and/or management. Of the respondents, 62.7% (n = 64) said they would take it if it were offered and accepted into their plan of study. Responses to this open-ended portion included the following themes:

- personal interest/would take it (n = 37)
- no interest/not relevant (n = 13)
- already have background in ownership/management (n = 9)
- no time for electives/other electives more interesting (n = 4)
- prefer to refer financial issues to another professional (n = 2).

Table 2
Student Characteristics

<i>Variables</i>	<i>Category and Distribution (%)</i>	
Gender	Male	21.5%
	Female	78.4%
Racial or Ethnic Background	Caucasian/White	76.4%
	African American	10.7%
	Hispanic	6.8%
	Native American	.98%
	Asian and Pacific Islander	4.9%
	Other	1.9%
Age	Range 22-60	Mean = 33.2, SD = 11.0
Year in the MFT Program	First Year Master's	25.5%
	Second Year Master's	21.5%
	Third Year Master's	7.8%
	Fourth Year Master's	3.9%
	Fifth Year Master's	.98%
	First Year Doctoral	5.8%
	Second Year Doctoral	8.8%
	Third Year Doctoral	10.7%
	Fourth Year Doctoral	5.8%
	Fifth Year Doctoral	3.9%
Highest Degree Attained	Undergraduate Degree	44.1%
	Master's Degree	50.9%
	Doctoral Degree	3.9%
Professional Background	Family Service Agency	22.5%
	Mental Health Agency	16.6%
	Private Practice	9.8%

	K-12 Teacher	6.8%
	Detention Worker	2.9%
	Clergy	.98%
	State Social Worker	.98%
	Other	54.9%
Areas of Clinical Specialization (students could provide up to three areas)	Adolescents	46.1%
	Single adults	26.4%
	Children	26.4%
	Couples	62.7%
	Trauma victims	13.7%
	Addictions	18.6%
	Multi-cultural issues	12.7%
	Sexual issues	20.5%
	Previously or currently incarcerated	4.9%
	GLBT clients	7.8%
	Mentally disabled	1.9%
	Financial issues	1.9%
	Psychosomatic problems	13.7%
	Parenting	31.3%
	Extramarital affairs	9.8%
	Self-image issues	14.7%
	Elderly	1.9%
Other	13.7%	

Top Presenting Issues of Adult Clients

Program directors were asked for their opinion about the top presenting issues of the adult clients that their student therapists see. They could report more than one answer to a list of 25 issues, with additional space to write in other issues not included on the list (e.g., anger management). One program director commented that this was tough to answer because, "We have a wide variety of folks presenting with multiple problems (which can be framed a number of ways, depending on the therapist/client)." The top four issues are listed with the number of program directors who chose them:

- communication issues (n = 17)
- psychosomatic problems, including depression (n = 14)
- lack of intimacy (n = 13)
- childrearing issues (n = 12).

The top presenting issue reported in this study (i.e., communication) was the same as that reported in a study by Geiss and O'Leary (1981), where communication was the most common client issue reported by therapists.

Following this question, program directors were asked to rank the top three presenting issues of the adult clients seen by their student therapists. The overall top three issues, regardless of rank, were (a) communication (selected in 83% of the responses); (b) psychosomatic problems, including depression (selected in 50% of the responses); and (c) childrearing issues (selected by 33.3% of respondents). In terms of ranking, over one-half (55.5%) of program directors reported communication as the number one issue. Other

frequently chosen topics were lack of intimacy, decision making/problem solving, and psychosomatic problems, including depression.

Students were asked to identify the most common presenting issues that they encounter with their adult clients. Student respondents could select more than one answer in response to a list of 25 issues with additional space to write in other issues not covered on the list. As with the program directors, 83 students (81.3%) selected communication issues as the most common presenting issue of the adult clients that they see. Other common issues reported (by frequency of being selected) were:

- decision making/problem solving issues (n = 50)
- unrealistic expectations (n = 45)
- lack of intimacy (n = 42)
- childrearing (n = 42).

It should be noted that a little more than 10% of students (n = 13) reported that they had not yet had any clinical experience to address this question.

Students were also asked to report the top three presenting issues of the adult clients that they see. While five students listed “other” as one of the top issues, these topics were not specified in the additional comments section. The top three issues are listed with the number of students who chose them: (a) communication issues (n = 81); (b) unrealistic expectations (n = 25); and (c) psychosomatic problems, including depression (n = 19), tied with decision making/problem solving (n = 19). One student suggested that family of origin and parenting issues be added to the list.

Program directors were asked to rank the top three presenting issues that are most difficult for their master’s level MFT students to treat. The overall top three issues, regardless of rank, were alcoholism (50%), sexual trauma (44%), and extra-marital affairs (22%). When ranking from one to three, five program directors selected sexual trauma as the first (28%) and second (16%) top issues, with alcoholism (16%) at number three. One program director responded as not having a master’s program. When asked the same question, but referring to doctoral and post-graduate students, the top presenting issues that were identified as most difficult for students to treat were alcoholism (39%) and sexual trauma (28%). Five program directors reported not having a doctoral or post-graduate program.

Program of Study Reflecting Presenting Problems Seen

Program directors were asked to describe how well their programs of study (i.e., master’s, doctoral, and post-graduate programs) reflect the presenting problems seen by student therapists. In terms of those with master’s programs, when combining responses, 83% responded with fairly well or very well (67%). In terms of those who were in a doctoral program, when combining responses, 4% responded with fairly well or very well. Only three program directors reported that they offered post-graduate programs with one reporting fairly well and the other reporting very well.

In comparison, student responses to the question, “My program of study reflects the presenting problems I see in therapy” on a 5-point Likert-type scale, from completely

disagree to completely agree, showed that a little less than half (46%) of students agreed with this statement, while less than 10% (7%) disagreed with the statement. Additional responses were neither agree nor disagree (26%) and completely agree (14%).

Finance Discussions

When asked how often conflicts about household finances are discussed during practicum/supervision, more than one-third of students (38%) reported finances were rarely discussed. Another 15% reported that finance topics were never discussed during practicum. Students reporting that they sometimes discussed finances during practicum/supervision totaled 27%, with 11% reporting often. Nearly 10% of students did not provide a response to this question.

Both program directors and students were asked if they think there is a need for a DSM diagnosis related to problems experienced with money matters. More than three-quarters of the program directors (83%, n = 15) selected 'no' as their response. Responses to the open-ended section of the question were analyzed for common themes. Four themes emerged, and responses were coded into the four categories as follows:

- only reason is for insurance reimbursement/medicalize/pathologize (n = 4)
- money is connected to other mental illness (n = 2)
- money issues may be related to addiction issues (n = 1)
- prefer to make referrals for financial issues (n = 1).

Among the students, when asked the same question, one quarter (25%, n = 25) said 'yes' that they think there is a need for a DSM diagnosis. Responses to the open-ended section of the question were analyzed for common themes. Five themes emerged, and responses were coded into the following five categories:

- some form of diagnosing is ok (n = 9)
- there is too much diagnosing already (n = 6)
- money management is a symptom of other issues/stressors (n = 5)
- it is acceptable as a V-code (n = 3)
- there are more pressing issues/money is not a mental illness (n = 3).

Student Preparation Regarding Treatment of Financial Issues

Program directors were asked to assess the preparation of their MFT students regarding the treatment of family financial issues during therapy (see Table 3). The first question asked, "On average, how much exposure do your master's students receive related to personal and family finances from their previous education prior to entering the program?" Responses were scored on a 6-point Likert-type scale ranging from "none" to "a lot" with two responses being "unable to observe" and "we do not offer this program." Of the 17 responses, 11 program directors reported that their master's students received very little exposure to personal and family financial issues from their previous education. The same question was asked about the preparation of doctoral and post-graduate students. Regarding the exposure of doctoral students, 15 responses were provided with six program

directors indicating very little exposure to personal and family financial issues from their previous education and seven indicating that the program is not offered. Post-graduate student exposure mirrored the graduate students' in that four program directors reported that their post-graduate students had very little exposure to personal and family finances and 13 indicated that they do not offer this program.

Table 3
Perceived Student Exposure to Personal and Family Finance Education Prior to Entering the Program

<i>Item</i>	<i>None</i>	<i>Very Little</i>	<i>Some</i>	<i>A Lot</i>	<i>Unable to Observe</i>	<i>Not Offered</i>
On average, how much previous exposure master's students received	2	11	1	0	2	1
On average, how much previous exposure doctoral students received	0	6	1	0	1	7
On average, how much previous exposure post-graduate students received	0	4	0	0	0	13

Student perceptions of the preparation of today's MFT students regarding the treatment of financial issues during therapy was assessed by asking four questions: (a) subjective knowledge about personal finances compared to one's peers, (b) comfort level with talking to clients about their financial concerns, (c) exposure to personal and family finances from previous studies, and (d) preparation to work with clients who present personal and family financial issues. The first question asked, "On a scale of 1-10 with 10 being the highest level, how knowledgeable are you about personal finances compared to your peers?" After combining categories, those who indicated the second and third lowest level (see Table 4) comprised 6% of the respondents. After combining categories, those who marked the lower half of the scale by indicating a five or less, comprised 26% of the sample. Of the students, 32% marked the upper three categories (i.e., 8, 9, or 10) evaluating themselves as knowledgeable about finances compared to their peers (see Figure 1).

When asked to rate their comfort level with talking to clients about the family's financial concerns on a scale of 1-10, with 10 being the highest level, 8% of student respondents indicated the second and third lowest level (see Figure 2). After combining categories, those who marked the lower half of the scale by indicating a 5 or less, comprised 23%. Further, 39% marked the upper three categories (i.e., 8, 9, or 10).

Two statements were measured on a 5-point Likert-type scale ranging from completely disagree to completely agree. The first was, "I received adequate exposure related to personal and family finances from previous studies prior to entering my current program." Of the students, 12% agreed with this statement. Other responses were as follows: completely disagree (34%); disagree (29%); neither agree nor disagree (20%); and one respondent marked completely agree.

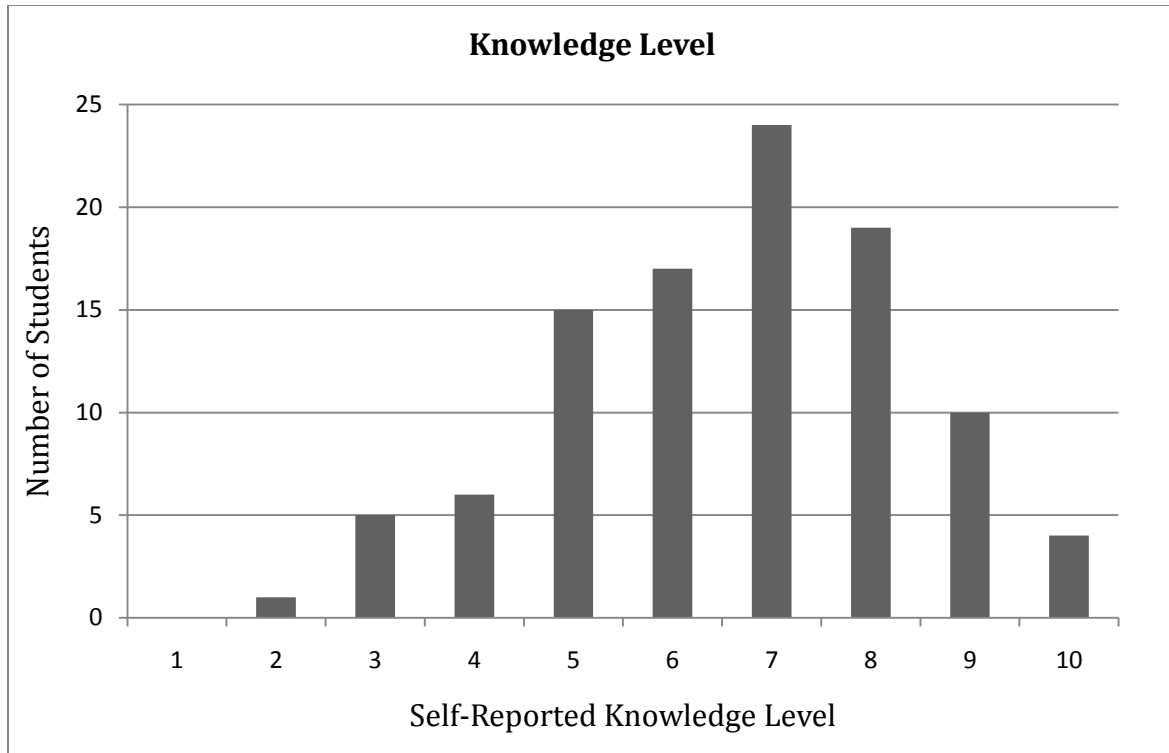


Figure 1. MFT Student Knowledge about Personal Finances Compared to Peers

Table 4
Perceived Adequacy of Student Exposure to Personal and Family Finance Education to Work with Clients

<i>Item</i>	<i>Not at all</i>	<i>A little</i>	<i>Fairly well</i>	<i>Very well</i>	<i>Unable to Observe</i>	<i>Not offered</i>
Master’s students are adequately exposed to personal and family finance concepts to work with clients who present financial issues	3	11	1	0	1	1
Doctoral students are adequately exposed to personal and family finance concepts to work with clients who present financial issues	1	5	2	0	6	3
Post-graduate students are adequately exposed to personal and family finance concepts to work with clients who present financial issues	1	3	0	0	0	13

Regarding the statement, “I feel adequately prepared to work with clients who present personal and family financial issues,” 19% of students responded that they agreed with it and an additional 4% completely agreed with it. About one-third of the students

reported neither agreeing nor disagreeing, a little less than a quarter reported disagree, and another 13% noted that they disagreed with the statement.



Figure 2. MFT Student Comfort with Talking to Clients about Financial Concerns

DISCUSSION AND CONCLUSIONS

The severity and frequency of personal financial problems in marriages has been reported in scholarly work and in the popular press, yet a review of MFT programs indicates that courses addressing personal and family finance topics are not being widely offered in MFT programs. What are some of the potential factors that likely affect MFT program course offerings? First, some program directors in this study noted that they felt constrained by COAMFTE accreditation requirements which may not allow them any leeway beyond their degree plan for the addition of courses. Second, the theoretical orientation, training objectives, and clinical focus areas of many MFT programs may provide additional insights into why certain elective courses are suggested for MFT degree plans versus others, such as the three electives asked about in the current study (i.e., personal and family finance, financial counseling, and personal business ownership). Finally, if a MFT program is housed within an interdisciplinary department or college associated with a personal finance, financial planning, or consumer economics program, this proximity and potential relationship may influence the type of courses offered. A limitation of this study is that it is unknown how many programs surveyed have proximity to personal or family finance faculty. It would be helpful in future studies to know where programs are housed.

When comparing responses, there were notable differences in the responses of the MFT program directors as compared to MFT graduate students regarding personal and family finance or financial counseling courses. Despite the lack of personal or family finance courses required or offered, the results of this study indicate that more than half of the students surveyed were interested in personal and family finance and financial counseling courses. Yet, MFT programs are generally not offering such courses because it would presumably increase the length of the degree plan; alternatively, the paucity in coursework can be attributed to perceptions that current courses are more important. Both students and program directors agreed that required coursework is already at maximum capacity.

A potential solution emerged from the analysis. That is, personal and family finance seminars or non-course credit options could meet the desires of students for this additional content without extending the time to degree completion. A suggestion is to create an outlet for discussion of personal and family financial issues that arise during student training sessions during the students' practicum/supervision. Poduska and Allred (1990) noted that efforts should be made to integrate such courses and seminars, which may already be in existence in universities and colleges.

Communication was cited by program directors and their students as the top presenting problem of adult clients seen by the students in this sample. Money and financial management issues may be a source of arguments in marriage (Stanley, Markman, & Whitton, 2004), and therefore money related problems may be perceived as a symptom of issues but not a primary presenting problem in therapy. It is also possible that arguments about money management behavior may be interpreted by MFTs as a communication problem rather than a money management presenting problem. This conclusion is mirrored in a comment provided by a student who wrote, "I think financial aspects of life are stressors that bring people to therapy and may be useful in working with clients."

Models of Collaboration

Based on a web search, at least two schools are known to have collaborative relationships in the areas of marriage and family therapy and financial counseling/personal finance. One university recently opened a Financial Therapy Clinic to help clients who are struggling both financially and emotionally ("Financial therapy clinic", 2008). A press release issued about the clinic notes that clinic faculty plan to bridge MFT with financial counseling and planning to provide comprehensive treatment to individuals who have money issues that are causing conflict, anxiety, or depression.

Another university recently announced a clinical relationship between academic programs in MFT and personal financial planning (PFP) ("New program," 2009). This program offers faculty and staff three to five sessions which pair M.S. and Ph.D. level graduate students in PFP and MFT to meet with couples. The program director noted, "We know that financial problems can strongly impact a couple's relationship and vice versa, this is a way to provide expert guidance in both areas" ("New program", 2009, para 3). It should be noted that in both schools there is a PFP degree program. With a greater awareness of the desire for MFT students to take a personal finance course, additional ideas will emerge on how to accomplish the incorporation of personal and family finance

courses and materials into MFT degree training programs. The two collaborative examples provided are a starting point. Given the interest of the students in the current study, program directors and MFT faculty are encouraged to consider a focus on personal finances through the exploration of existing credit or non-credit courses and faculty expertise on their campus, as well as discussion in practicum/supervision.

REFERENCES

- AAMFT. (n.d.). *Commission on Accreditation for Marriage and Family Therapy Education*. Retrieved April 9, 2009, from <http://www.aamft.org/>
- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders*. (4th ed. text rev.). Washington, DC: Author.
- Aniol, J. C. & Snyder, D. K. (1997). Differential assessment of financial and relationships distress: Implications for couples therapy. *Journal of Marital and Family Therapy*, 23(3), 347-352.
- Bucks, B. K., Kennickell, A. B., Mach, T. L., & Moore, K. B. (2009, February). Changes in U.S. family finances from 2004 to 2007: Evidence from the Survey of Consumer Finances. *Federal Reserve Bulletin*, 95. Retrieved April 22, 2009 from <http://www.federalreserve.gov/pubs/bulletin/2009/pdf/scf09.pdf>
- Chu, K. (2009). Average college credit card debt rises with fees, tuition. USA Today, April 13, 2009. Retrieved May 22, 2009 from http://www.usatoday.com/money/perfi/credit/2009-04-12-college-credit-card-debt_N.htm
- Dean, L. R., Carroll, J. S., & Yang, C. (2007). Materialism, perceived financial problems, and marital satisfaction. *Family and Consumer Sciences Research Journal*, 35(3), 260-281.
- Dillman, D.A. (2000). *Mail and internet surveys* (2nd ed.). New York: John Wiley & Sons.
- Geiss, S. K. & O'Leary, K. D. (1981). Therapist ratings of frequency and severity of marital problems: Implications for research. *Journal of Marital and Family Therapy*, 7, 515-520.
- Gable, J. E., Britt, S., & Cantrell, J. (2007). An exploratory study of the role financial satisfaction has on the thought of subsequent divorce. *Family and Consumer Sciences Research Journal*, 36 (2), 130-150.
- Kansas State University. (2008). *Financial therapy clinic, to be opened by K-State's institute of personal financial planning in Manhattan, first of its kind*. Retrieved March 12, 2009 from <http://www.k-state.edu/media/newsreleases/nov08/fpclinic112408.html>
- Papp, L. M., Cummings, E. M., & Goeke-Morey, M., C. (2009). For richer or poorer: Money as a Topic of Marital Conflict in the Home. *Family Relations*, 58, 91-103.
- Poduska, B. & Allred, G. H. (1990). Family finances: The missing link in MFT training. *The American Journal of Family Therapy*, 18(2), 161-168.
- Stanley, S., M., Markman, H. J., & Whitton, Sarah, W. (2004). Communication, conflict, and Commitment: Insights on the foundations of relationship success from a national survey. *Family Process* (41) 4, 659- 675.
- University of Georgia. (2009). *New program provides relationship, financial counseling to couples*. Retrieved March 12, 2009 from <http://www.uga.edu/columns/090120/news-couple.html>