

INTERNSHIPS FOR FUTURE FACULTY: MEETING THE CAREER GOALS OF THE NEXT GENERATION OF EDUCATORS IN MARRIAGE AND FAMILY THERAPY

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A key component of a doctoral education in marriage and family therapy (MFT) is the completion of an internship. Virtually all MFT doctoral internships are focused on advanced clinical practice and often are located in agencies unconnected with an academic setting. This article describes an MFT doctoral internship specifically designed to foster the skills needed as a faculty member. The primary purpose of this “future faculty” internship is to expose doctoral interns to faculty life, including participation in graduate teaching, clinical supervision, research, and faculty service—while still meeting typical clinical requirements. Results of semistructured qualitative interviews with five doctoral interns associated with the site are reported. Guidelines for the development of other doctoral internships designed for future MFT faculty members are discussed.

Students earning a doctorate from a program approved by the Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) are required to complete a doctoral internship in marriage and family therapy (MFT). Doctoral internships typically last 9–12 months and are structured to further prepare students for advanced clinical work. Recent standards and requirements set by COAMFTE move beyond clinical practice to include more research experience (COAMFTE, 2006). The literature describing experiences and expectations for MFT doctoral internships is growing, yet virtually no literature details how internships can be designed to increase the competencies associated with careers in academia.

In most mental health disciplines, clinical internships have been viewed as an essential part of training (Freidheim, 1994). In regard to the overall training experience, some rate the importance of choosing the internship site as important as choosing the graduate program itself (Williams, 1994). Ivey and Wampler (2000) report that community mental health agencies are the most frequent setting for the internship. Other settings include medical schools, private practice, chemical dependency treatment agencies, psychiatric facilities, private training institutes, in-house MFT clinics, non-MFT specific university clinics, and counseling centers.

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Several programs have explored ways to develop doctoral internships in specialized areas, such as multidisciplinary health care settings (Gawinski, Edwards, & Speice, 1999). Ivey and Wampler (2000) contend that overall MFT internships are narrowly defined and underdeveloped. At times, family therapy has struggled to provide enough quality internship sites to meet the need (Johnson, 1990; Solomon, Ott, & Roach, 1986; Williams, 1994). Some areas of difficulty experienced by students during their internship include a lack of compatibility with their research agenda, limited availability of sites, lack of financial support, limited supervision, and limited institutional support (Ivey & Wampler, 2000).

Another challenge facing MFT doctoral interns is the limited training and preparation in how to be a good teacher (Fagen & Suedkamp Wells, 2004; Nyquist, 2002). A recent survey of the career aspirations of MFT doctoral students revealed that more than half pursue doctoral work with the goal of becoming a professor (Miller & Lambert-Shute, 2009). Although there is a growing body of literature within family therapy regarding the process of training clinicians and supervisors, very little has been said about the process of training professors in MFT. Some authors have argued that doctoral programs are under-preparing the future professoriate through a lack of attention to andragogical training (Boyer, 1990; Golde & Dore, 2001).

Doctoral candidates across the nation seem to agree that there is a lack of focus in doctoral programs on teacher preparation, as is evidenced in a recent nationwide survey of doctoral candidates sponsored by the National Association of Professional Graduate Students (Fagen & Suedkamp Wells, 2004). The survey, collected from more than 30,000 doctoral candidates in various departments at universities across the United States, asked a wide variety of questions regarding graduate training. On average the students gave some of the lowest ratings to their preparation in the skills required to be a good teacher.

THE MFT FUTURE FACULTY INTERNSHIP

In the fall of 1999, the University of Oregon's COAMFTE-accredited master's-level MFT program launched a doctoral internship in MFT for students from COAMFTE doctoral programs. The goal of this "future faculty" internship is to create an opportunity for doctoral interns to complete the clinical requirements of their respective programs while also gaining experience as a teacher, supervisor, researcher, and junior faculty member in an accredited master's program. The position is designed for MFT doctoral students who have completed the majority of their doctoral coursework and are qualified as American Association for Marriage and Family Therapy (AAMFT) Supervisor Candidates. Interns are also required to have 3 years of clinical experience with children and families as well as 1 year of college teaching experience. Since the inception of the future faculty internship in 1999 the University of Oregon has hired six doctoral student interns. Only one intern is taken at a time. Five have completed the internship and their doctoral degrees, and one is in the process of completing the internship. All interns who completed the future faculty internship at the University of Oregon and subsequently sought a faculty position (4 of 5) have earned faculty positions at universities across the United States.

The primary aim of the internship is to assist the doctoral intern in completing the clinical requirements of the degree while also providing an opportunity to engage in experiences that are typical of a junior faculty member in a master's-level MFT program. With this in mind, the following requirements were developed for the internship:

- *Maintain an active caseload at the program's on-site training clinic.* This involves an average of 10 weekly active client cases and participation in live team practice and co-therapy with the master's-level students at the clinic. A member of the MFT faculty supervises the clinical work of the doctoral intern.
- *Provide individual and group supervision for two to six master's-level interns at the on-site training clinic.* Generally, during the first term of the internship the intern is given only two supervisees, then four supervisees in the second term, and six supervisees in the final term. An appointed member of the MFT core faculty provides supervision of supervision on a weekly basis.

- *Teach three didactic master's-level MFT courses (one course each 10-week term).* Courses taught by interns in the past have included Introduction to Marriage and Family Therapy, Families Across the Lifecycle, Stress and Family Crisis Intervention, Families in Later Life, Contemporary Issues, Ethics, Existential & Spiritual Issues in MFT, Gender & Ethnicity, Child & Adolescence, Human Sexuality, Practicum, and Group Psychotherapy. Interns are given some choice with regard to the three classes they teach in the MFT curriculum.
- *Participate in designated faculty meetings and committees.* These may include staff search committees, department meetings, MFT faculty meetings, comprehensive exam review committees, MFT final project review committees, curriculum review committees, ad hoc program committees, and committees related to the development of procedures at the program's on-site training clinic.
- *Assist in the ongoing clinical evaluation of master's-level interns and participation in formal evaluation of master's-level MFT students in their last term of study.*

An appointed member of the MFT faculty provides mentoring of the activities related to the intern's teaching. To assist the intern and maintain program continuity over time, examples of sample syllabi, supporting videos, past lecture notes, and PowerPoint files are provided by the MFT program faculty. Moreover, faculty provide research support and human subjects mentoring, often specific to the intern's dissertation, as desired. The program's training clinic, for example, has been used by doctoral interns as a dissertation data collection site for two of the past six doctoral interns. In order to gain a better understanding of the experiences of doctoral interns who completed the future faculty internship, the authors conducted a qualitative study of past interns.

METHOD

This exploratory qualitative descriptive study examined the experiences of MFT doctoral interns in the future faculty internship at the University of Oregon. MFT doctoral interns were questioned about the attributes, benefits, and challenges of this unique internship. The study's organizing question was *What do MFT doctoral interns believe about the overall experience of an internship site that is specifically designed to prepare them for a faculty position?* Qualitative description (Sandelwoski, 2000) formed the basis of this study. Qualitative descriptive research is designed to portray "a comprehensive summary of events of everyday terms of those events" (p. 334). Using this framework, our aim was to accurately reflect participants' view of the future faculty internship with a lower degree of synthesis and interpretation that is common of other forms of qualitative research (e.g., ethnography, grounded theory). Our findings, as such, are best thought of as a descriptive summary of participants' points of view.

While qualitative description was the organizing framework for this study, we used Spradley's (1979) developmental research sequence (DRS) methods to organize our data analysis. Spradley's DRS is informed by ethnoscience theory (Frake, 1961; Goodenough, 1957), which assumes that our language reveals our beliefs. DRS begins with broad questions and, based on participants' responses, creates related, more precise questions in an effort to attain a detailed description of the phenomenon of interest. In addition, when very little is known about an area of inquiry (such as doctoral interns' experiences with a "future faculty" internship site), qualitative research can be a useful method of inquiry since it grounds data in the phenomenon itself (Glaser & Strauss, 1967).

Sampling Strategy

This study used purposive sampling (Babbie, 1973; Goetz & LeCompte, 1984). Participants were selected due to their direct experience with the site as doctoral interns. All interns who previously completed their internship at the site were invited to participate and all agreed. Therefore, this exploratory study includes all eligible participants ($n = 5$).

Description of the Site

The study occurred at the University of Oregon, a COAMFTE-accredited master's-level program in a small city in the Pacific Northwest. The MFT program is located in the College

of Education and in a department that includes a doctoral program in Counseling Psychology and an undergraduate program in Family and Human Services. During their internship tenure all participants taught at least three didactic classes, provided clinical services at the university's family therapy clinic, taught supervision courses including live and videotape supervision, attended program and department faculty meetings, and received supervision of supervision and teaching mentoring. The university-based clinic, where doctoral interns see their own clients and supervise master's-level students, provides approximately 4,400 sessions annually and is structured in the tradition of family therapy (e.g., videotape and live supervision, practica, capacity to phone-in, reflecting team dialogue). Although it is university based, the clinic largely serves a nonuniversity clientele on a sliding-scale basis. The internship is paid; interns earn a salary, health care benefits, and other benefits commensurate with a Visiting Faculty appointment.

Description of the Researchers

The first and second authors are AAMFT-approved supervisors and core faculty members in the program, each with 12 years of teaching experience. The first author conceived and developed the doctoral internship in collaboration with program faculty, and based on feedback from doctoral interns. The first and second authors developed the research questions, and the second author conducted the data analysis and trained two master's-level interns to conduct the interviews. The third, fourth, and fifth authors were themselves doctoral interns in the program and participated in the interviews.

Description of the Participants

Participants include all interns who have completed their doctoral internship with the program since the inception of the future faculty internship ($n = 5$). All participants (three female, two male) were doctoral students in COAMFTE-accredited doctoral programs. All had completed a supervision course in their doctoral program prior to beginning the internship. The length of their clinical experience ranged from 3 years to nearly 10 years. All had taught an undergraduate class or assisted in undergraduate or graduate-level teaching prior to beginning the internship.

Interview Procedures, Questions, and Data Analysis

Following approval from the university's Institutional Review Board, a total of eight interviews were completed, spanning a 6-year period between 2000 and 2006. Three participants were interviewed twice in an effort to confirm or disconfirm tentative findings. All interviews were conducted by phone, were 45–60 min in length, and occurred at least 6 months following completion of the internship. The interviews were conducted by a master's student trained by the second author and who was unknown to the former doctoral intern. For those interviewed on a second occasion, their interview occurred 2–3 years following their initial interview.

Semistructured, open-ended (descriptive) questions were asked throughout the study (Sells, Smith, Coe, Yoshioka, & Robbins, 1994; Spradley, 1979). Open-ended questions were used to elicit a range of responses from participants while avoiding the imposition of premature categories. For instance, participants were asked: "What were the primary benefits of your internship at the University of Oregon? What were the largest challenges?" And, "How well did this internship prepare you for your work as a professor, supervisor, and clinician?" A list of all interview questions is provided in Table 1.

All interviews were transcribed verbatim and analyzed using Spradley's (1979) developmental research sequence methods. Once a surface understanding of participants' main points of view were identified, themes that seemed to be particularly relevant to the future faculty internship were pursued in greater depth. For this study, we were particularly interested in doctoral students' perceptions of the MFT internship, how it was or was not useful for their career aspirations, and the usefulness of the internship for the field of family therapy.

In an effort to ensure that participants' points of view were accurately understood, we engaged in a process to confirm and disconfirm participants' ideas. For instance, to capture participant agreement and disagreement about the domains, three participants were asked to confirm or disconfirm tentative findings. In one interview, for example, a former intern

Table 1
Interview Questions

When you first saw the advertisement for the University of Oregon pre-doc internship, how did it strike you; what initial thoughts did you have about it at that time?
What were the primary benefits of your internship at the University of Oregon? What were the largest challenges?
What were the most important attributes of the internship?
When moving and starting your internship, what were some of the transitional issues you faced with the internship (personal and professional)?
How well did this internship prepare you for work as a professor, supervisor, and clinician? Please explain.
How, if at all, did the internship shape your career?
From your current standpoint, in what ways, if at all, is the University of Oregon pre-doc internship useful for the field of family therapy?
From your current standpoint, what changes should be made to the internship to be most useful for preparation as a faculty member?

indicated that the primary benefit of the internship is the “opportunity to build a skill set that is directly applicable to being a professor.” All participants mentioned this benefit in initial open-ended questioning. In the subsequent interview, the three participants agreed that this was among the primary benefits of the internship—and that in their understanding of current doctoral internship offerings, this benefit is particularly unique and valuable for interns considering and seeking faculty positions.

Data Analysis

Following completion of all interviews, a domain analysis was conducted as described by Spradley (1979). Domain analysis is a process wherein text (transcribed interviews) is examined through the lens of semantic relationships. Semantic relationships are essential to domain analysis since they operate as a vehicle through which subtle meaning differences can be identified. This is achieved by transforming semantic relationships into questions. For instance, while perusing a transcribed sentence, one asks: What is a reason for doing Y? (rationale); What is the use of Y? (function); and What is/are characteristics of Y? (attribution). In attempting to determine the meaning of participants’ responses, statements were reviewed in light of the nine semantic relationships proposed by Spradley (1979). After completion of the interviews and the initial domain analyses, a taxonomic analysis collapsed all related domains into several descriptive categories (Spradley, 1979). Categories were created and named using participants’ words and were organized in a manner that seemed to accurately summarize their points of view.

RESULTS

The data analysis produced three themes: (a) Benefit of the Internship, (b) Internship Challenges, and (c) Career Impact. There was very little variation in participants’ perceptions of the internship—all indicated that the internship was very beneficial, included inherent challenges, and had a large impact on their career and career decision making.

The content and meaning of each theme will be described via a descriptive summary of participant statements. Verbatim statements will be presented throughout in order to illuminate participants’ perceptions.

Benefit of the Internship

All participants reported several benefits associated with the internship and were very similar in the types of benefits reported. Benefits included marketability, learning about academia

through a “real world experience as a member of a faculty team,” and unique preparation for academia. With regard to marketability:

This internship makes me more marketable and will help me transition into academics—I have been a supervisor, I have [graduate-level] teaching experience, I have done research, and I’ve been able to make network connections. I’ll be able to communicate [while on interviews for faculty positions] that this is exactly what I want to be doing and have done.

All participants reported that the internship facilitated a shift in their professional identity:

One of the main things that has happened is I’ve shifted from thinking of myself as a clinician to thinking of myself as an educator. I left my doctoral program knowing I wanted to be an educator, but I really had the mindset of a clinician. Through this experience I think of myself as an educator, and now I [think about] what’s my role as an instructor and what’s my role as a supervisor?

All participants spoke at length about the benefit of having an “inside” view of being a part of a faculty team:

It looks like a faculty position. . . . I’ve been involved in faculty meetings, teaching, and supervision. It is a faculty position rather than a clinical position. I want to be an academic; these are all the things I want to be doing in my career. It is an opportunity to start doing those things, and get support.

Another participant stated:

This is one of the main things . . . the opportunity to be actively involved in a program essentially as a junior faculty member so you get a sense of what it is like and if it is something you really want to do. It just seems like a golden opportunity. . . . I can do some supervision, teach a class, work in a university program. For my own growth, I want to continue to learn how other people do things—whether it be teaching or supervision or anything else we do; having exposure to all of that is a real benefit.

Internship Challenges

Participants identified several challenges associated with the internship. And, again, they were very similar in their perceptions. The challenges include developmental issues, workload demands, and transitions. The primary developmental issues centered on gaining clarity about faculty-student relationships and boundary setting:

This is my first time being a teacher of record for master’s level students and I’m not too far removed from being in a master’s program. When I was a student, and even in the doctoral program, I was involved in the students’ culture. While I was a student, I was observing the faculty from a student’s perspective, not from a colleague’s perspective.

It was challenging to set boundaries with master’s level students, as I am also a student as well as an instructor. At times I felt myself being triangulated and being pulled into representing the students rather than representing the faculty.

Workload was also mentioned by all participants as a challenge of the internship:

It’s a juggling act. . . . It’s definitely not busy like being a graduate student, because there is some break time. You don’t have as many deadlines and essays aren’t due. There is still the pressure to complete my own clinical hours and teach classes all in one year and the added stress of completing my dissertation. I was lucky because I

had some lecture notes and was able to recycle some assignments which freed up a lot of time. It was helpful to borrow lecture materials from other faculty members.

Finally, all participants described practical issues associated with transitioning to a new location and the need to rapidly become oriented to an academic system with which they were previously unfamiliar:

[When I arrived] I had a month before classes started; that time was important because of the diverse experience—there was a lot to learn . . . trying to soak in everything about scheduling, class, clinical experience, and understanding what supervision should be like.

Orienting to a new city and culture and also the moving on from where you had been in relationships, and being a graduate student. It's hard; a little isolating in that you don't have somebody going through your specific experience at the same time.

Career Impact

Participants indicated that the internship sharpened their career decision making, bolstered their confidence in their ability to handle the demands of faculty life, and strengthened their clinical skills. With regard to career decision making:

It's easy to imagine what a pure clinical position would be. . . . I thought if I jumped into an internship with more diversity it would give me more of an idea what a faculty position would be like. This is consistent with my larger career goals . . . my ideas and what I do (as a result of the internship) are more in harmony. It has set a course for me professionally.

It helped me decide if I wanted to continue in academia. I had a hard time thinking what I wanted as a professional goal. Taking a year to explore the option—it was so hypothetical before that—you never do it all at the same time. By surviving and finding strength in knowing that I could find a balance I was able to say, yes, this is something I want to do.

All participants also indicated that the internship built their confidence in their ability to be a successful faculty member:

When I moved on from there [the internship] I didn't have any doubt in my ability to do it because I felt like I have done it. And so I don't have that question in my mind that you might have when you are making a transition in your career—am I going to be any good at this? Because, I have done it.

Finally, several participants remarked that the internship, although it is designed to prepare interns more broadly for the realities of faculty life, improved their clinical skills as well:

Even if I decided to never teach again, and move instead into a purely clinical career, I'm going to be a stronger clinician due to this experience.

DISCUSSION AND IMPLICATIONS

Our findings highlight some of the possible advantages of future faculty MFT doctoral internships for the field of MFT in general. First, the internship addresses the need for more internship sites. Secondly, it is clear that the internship provides unique opportunities for those doctoral students who are seeking academic careers in MFT. The participating programs benefit from the “cross-fertilization” of ideas, research, and networking opportunities. Also, it is evident that MFT master's-level students benefit from the experience of working with MFT

doctoral interns in that it helps to demystify the process of doctoral-level work. Many master's-level students who worked with MFT doctoral interns have commented that their exposure to these future faculty interns helped them to consider pursuing doctoral work themselves. Although many factors have likely contributed to this, since the inception of the future faculty internship, the percentage of our students who apply for and are accepted into doctoral programs has dramatically increased. We naturally cannot claim that the future faculty internship has contributed to this increase, though the impact of the unique presence of future faculty interns embedded in a COAMFTE master's program on the career choices of master's-level students is a worthwhile area for further inquiry.

As MFT faculty members at the internship site (including the first and second authors), we believe that we have benefited personally, as has the program overall from the regular infusion of doctoral students into our master's-level program. For example, the routine addition of doctoral students from COAMFTE programs has sharpened our awareness of ourselves at individual and program levels. The sense of responsibility to create a high-quality experience and positive launch for interns' academic careers has pushed us to become much more aware of the climate created within the internship program and within our master's program overall. In addition, our contact with family therapy doctoral students has given us unique windows into current activities and emerging scholarship in COAMFTE programs in the United States. This has increased our sense of connection to the field overall and has contributed to our own professional development. For these reasons we believe that the future faculty internship is mutually beneficial for doctoral interns and for faculty members at our internship site. Doctoral interns benefit by having opportunities to experience responsibilities commonly associated with junior MFT faculty, and they are afforded access to the culture and operations of a COAMFTE program beyond their home university. Concurrently, as core faculty, we are given an opportunity to work with bright and talented doctoral students who represent the future of our field.

Of the five interns who have completed the internship, all four who have pursued careers in academia have secured faculty positions with MFT programs across the country. Former interns universally report that the internship helped prepare them for their chosen career path. Specifically, past interns reported that their "future faculty" internship experience helped them to be more marketable for academic positions, better prepared for teaching and supervision, and more confident and competent in the various duties of academic life. Past interns also discussed the utility of the internship in helping them negotiate challenges of transitioning from student to faculty member. For instance:

I didn't feel like an intern, you feel like a faculty member and that is how you are treated in terms of the decision making process and everything that goes on.

It felt like a different world to come into. When I was a student I was involved in the student's culture. I think [while I was a student] I was observing the faculty, but I was observing them from one perspective, but coming here I got a completely different perspective, things that I didn't realize or had not connected.

As is true of most professional associations across the United States, MFT is facing a record number of retirements as the baby boomer generation approaches retirement age, resulting in a drop in the ranks of professional members. This has also had an impact on the profession in MFT, promoting an increasing need for new faculty in the field. The future faculty internship is one response in meeting the demand for well-prepared faculty.

Recent reports from the Bureau of Labor Statistics indicate that a third of the ranks of professional therapists will retire in the next several years (Bureau of Labor Statistics, 2006). This translates into more available counseling and therapy positions than there will be graduating students to fill them. Most states now have MFT licensure as well as at least one COAMFTE-approved training program. Undergraduate internships in MFT are beginning to spring up around the country as MFT moves toward parity with other mental health disciplines and university training programs like psychology and social work (Prouty, Johnson, & Protinsky, 2000). The doctoral internship created at the University of Oregon's Marriage and Family Therapy Program is one effort to provide a unique resource for MFT doctoral students. It is

an endeavor easily replicated by other graduate MFT programs and one that will lead to new and better ideas for recruiting the next generation of MFT educators and supervisors.

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