



CalSWEC

California Social Work Education Center

Behavioral Health Career Pathways: Social Work

**OSHPD Behavioral Health Career Pathways Sub-Committee
July 9, 2013**

Social Work Workforce Estimated Needs

- ▶ There are approximately 60,000 social workers in California now.
- ▶ 22,000 new social workers will be needed in California by 2015
 - ❑ ACA implementation
 - ❑ Katie A. consent decree implementation
 - ❑ “Baby Boomers”
 - ❑ Regular attrition

Social Workers in Behavioral Health Services

- ▶ Mental health and substance use social work professionals are the largest sector of the workforce for these systems of care.
- ▶ Demand for social workers in these systems will increase by 35.4% in next few years.
- ▶ Surveys of public mental health groups found that positions that were hardest to fill were:
 - 1) General psychiatrists
 - 2) Licensed clinical social workers

Social Work Workforce is Diverse

Schools of Social Work in California graduate approximately 5500 MSW's annually

Ethnicity	%
White/Non-Hispanic Caucasian	36%
Latino/Hispanic	32%
African American/Other Black, Non-Hispanic	10%
Asian American	10%
Unknown/Declined to Answer	6%
Other	5%
Native American/Alaskan/American Indian	1%
Pacific Islander	1%
Multiple Race/Ethnicity	.1%

California Social Work Education Center

- ▶ **1991** – started at UC Berkeley School of Social Welfare to strengthen the child welfare workforce with funding from Title IV–E, California DSS, and matching funds from participating universities.
- ▶ **Today** – A consortium of 21 schools of social work, county departments of social services (CWDA), county mental health departments (CMHDA), the California Department of Social Services, and the California Chapter of the National Association of Social Workers.

CaISWEC Programs

PROGRAMS:

- ❑ Title IV–E Child Welfare (undergraduate and MSW)
 - ❑ Title IV–E In–service training;
 - ❑ Mental Health (MSW);
 - ❑ Aging (under construction)
-
- ▶ CW and MH Programs: provide stipends for students, operating costs and core competencies for schools.
 - ▶ Aging Initiative has developed core competencies for social work concentration in gerontology.
 - ▶ Competencies are grounded in CSWE accreditation standards

Mental Health Program

- ▶ MHSA funding since 2005 for stipends and program activities.
 - ▶ 196 stipends (\$18,500) for final-year MSW students and program operating costs.
 - ▶ Curriculum development and implementation
 - ▶ Program evaluation
- 

MHP Contributions to 2008–2013 WET Goals

WET Plan Goal #1: Develop sufficient qualified individuals for the public mental health workforce

- 1495 stipends have been awarded since 2005–06.
- Approximately 25% of students attended schools in primarily rural communities, and 75% attended urban schools.
- The cohorts are **ethnically and racially diverse**: Minority group members (59%); White/Caucasian (41%)
- The majority of graduates (57%) speak at least one other language in addition to English
- The majority (89%) of graduates have met a **one-year payback obligation** through employment in a county-operated or contract behavioral health agency. The other graduates have met the obligation monetarily.
- Among graduates of 2006 – 2009 cohorts who could be traced, 68% were **still in the behavioral health field** a year after payback completion, most often at the payback agency.

MHP Contributions To WET Goals

WET Plan Goal #2: Increase the quality and success of educating and training the public mental health workforce in the expressed values and practices envisioned by the MHSA

- 141 courses were offered in 2012–13 that addressed MHSA principles and practice
- On average, close to 7 classes were offered per school that addressed MHSA values and principles
- The majority of courses offered were 3 units.

1 UNIT	2 UNITS	3 UNITS	4 UNITS	5 UNITS	6 UNITS
1.4%	13.3%	60.1%	21.0%	2.8%	1.4%

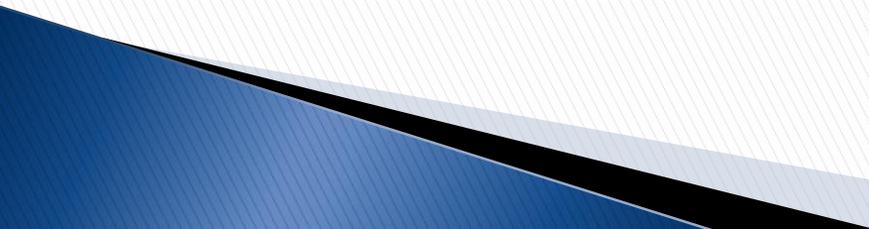
- The majority were required courses

Required	Elective
72.3%	27.7%

Teaching Methods

Method	Req	Elect	No-Credit
Individual supervision in internship (N=21)	95.2%	4.8%	0.0%
Seminars/meetings (N=19)	84.2%	5.3%	10.5%
Guest lectures/presentations by consumers, family members, providers, or others (i.e., are part of the syllabus for the course) (N=19)	73.7%	21.1%	5.3%
Lectures and reading assignments in courses taught by faculty/teaching staff (N=21)	71.4%	28.6%	0.0%
Group supervision in internship (N=18)	68.4%	26.3%	5.3%
Research project about an MHSA-relevant topic (N=19)	47.4%	52.6%	0.0%
Lectures and reading assignments in courses co-taught by consumers, family members, providers, or others (N=7)	46.2%	15.4%	38.5%
Guest lectures/presentations by consumers, family members, providers, or others at school institutes, annual lectures, "brown bag" gatherings, etc. (N=18)	38.9%	22.2%	38.9%
Job search trainings (N=17)	35.3%	29.4%	35.3%
Immersion (N=10)	33.3%	33.3%	33.3%
Placements in consumer-run organizations (N=9)	33.3%	50.0%	16.7%

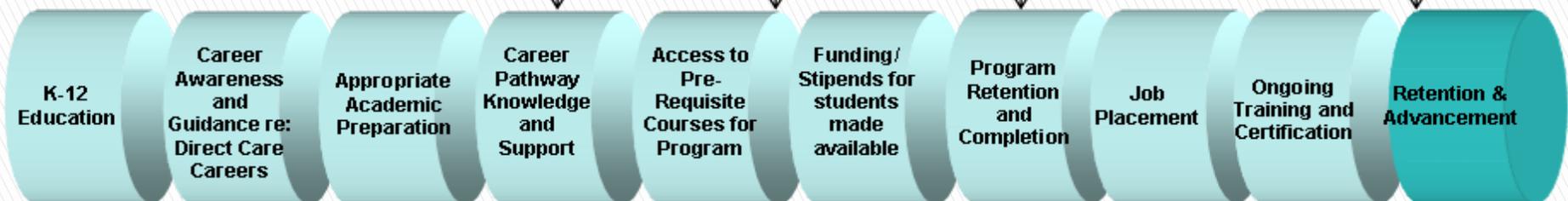
Methods for Pathway Development

- ▶ Literature Review
 - ▶ Identification of Need
 - ▶ Built on prior efforts (e.g. 2003 Master Plan for Social Workers, 2004 Ladder of Learning, individual schools' innovations)
 - ▶ Engagement of CalSWEC Board
 - ▶ Development of Pathway, Barriers and Recommendations
 - ▶ Prioritization of recommendations
- 

Social Work Workforce System Pathway



- Target Groups:**
- High School
 - Students:
 - Community Colleges
 - Private Schools
 - Bachelor level Graduates
 - Career Changers
 - Displaced Workers



Pre-Training Health Professions Education Workforce

Career Pathway Coordination and Support Infrastructure



Adapted from the coordinated health care pathway developed by Jeff Oxendine.

Barriers and Recommendations

- ▶ System Barriers
 - ✓ Table H-1 provides a comprehensive list of five pathway barriers and fifteen recommendations to address them
- ▶ Individual Pathways
 - ✓ Table H-2: Social Work Ladder of Learning (2004)
- ▶ Additional barriers: Stigma about mental illness and secondary stigma about mental health providers.

Conclusion

- ▶ Demand for social work professionals and paraprofessionals is increasing rapidly
- ▶ Need for more robust career pathways to meet workforce demands for individuals with a Bachelor's degree or a graduate degree who choose a career in behavioral health.
- ▶ Pathways should prepare the future workforce to work in the behavioral health system and in other settings (health homes, child welfare, older adult services, etc.) as behavioral health providers.