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Testimony Before the District of Columbia Council  
Committee of the Whole  
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Public Hearing:  
B25-0055, Pathways to Behavioral Health Degrees Act of 2023

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## Introduction

Good Morning, Chairman Mendelson and members of the Council. My name is Sharra E. Greer, I am the Policy Director at Children’s Law Center and a resident of the District. Children’s Law Center believes every child should grow up with a strong foundation of family, health and education and live in a world free from poverty, trauma, racism and other forms of oppression. Our more than 100 staff – together with DC children and families, community partners and pro bono attorneys – use the law to solve children’s urgent problems today and improve the systems that will affect their lives tomorrow. Since our founding in 1996, we have reached more than 50,000 children and families directly and multiplied our impact by advocating for city-wide solutions that benefit hundreds of thousands more. CLC is also the chair of the Strengthening Families Through Behavioral Health Coalition, which brings together a diverse group of advocates who share a commitment to improving DC’s behavioral health care system for children and families.

I appreciate the opportunity to testify in support of B25-0055, Pathways to Behavioral Health Degrees Act of 2023, to “support the University of the District of Columbia to establish a Master of Social Work degree pathway and to establish a scholarship program for District residents and employees who are seeking higher education in behavioral health.”<sup>1</sup> My testimony will underscore the critical need for workforce development in behavioral health care, and note opportunities to enhance this initiative and others. Our recommendations draw from our 2021 report, [\*A Path Forward: Transforming the Public Behavioral Health System for\*](#)

## **DC has a Critical Need for Behavioral Health Care Workforce Development**

The mental health of children and adolescents are trending in dangerous directions. Experts including the U.S. Surgeon General, the American Academy of Pediatrics, the American Academy of Child and Adolescent Psychiatry, and the Children’s Hospital Association have declared a national youth mental health crisis.<sup>3</sup> It is important to note that the trends in the national and local data are not just remnants of the COVID-19 pandemic. Mental health symptoms – including depressive symptoms and suicidal ideation – have been steadily increasing among American youth for over a decade. In 2021, suicide was the second leading cause of death for young Americans ages 10–24.<sup>4</sup> Nearly 15% of DC high school students reported attempting suicide in 2019, a full 5% more than the national rate.<sup>5</sup> About 23% of DC children had one or more emotional, behavioral, or developmental conditions in 2019-2020.<sup>6</sup>

We know that early intervention, from screening to treatment, can change lives of individuals and improve the health of families and communities. However, only one-fifth of children with some form of mental illness ever receive care from a specialized provider.<sup>7</sup> Further, this unmet need for mental health services is worse for children of color than for white children.<sup>8</sup>

The District of Columbia government has made strategic investments to increase access to care in recent budgets, through programming, staffing and reimbursement. For example, the Department of Behavioral Health’s School-Based Behavioral Health expansion program

(SBBH) envisions a licensed clinician embedded in every public school in DC. Unfortunately, programs like SBBH are struggling to recruit and retain qualified clinical social workers.<sup>9</sup> Staffing challenges are driven by the shortage of behavioral health care professionals in the District and across the country, from California<sup>10</sup> to New York<sup>11</sup> and everywhere between.

We have testified in the Committee on Health this year about another reason for concerted attention to the behavioral health workforce: the District is required by federal Medicaid rules to meet “network adequacy” standards and ensure a sufficient field of behavioral health providers “to achieve greater equity in health care and enhance consumer access to quality, affordable care.”<sup>12</sup> We do not believe we are currently in compliance, especially for practitioners working with children, speaking languages other than English, and/or delivering specialty therapies.<sup>13</sup> The clients at Children’s Law Center are often confronted with long waits – if they find a practitioner at all – for the services they need. An “adequate” workforce should be sufficiently diverse, multi-lingual, culturally competent, trauma-informed, and specializing in the necessary areas, as well as available to all insurance types.

### **The Pathways to Behavioral Health Degrees Act of 2023 Helps Build an Adequate Workforce**

This legislation creates an accredited master’s degree program at the University of the District of Columbia (UDC) that sets us on the right track to our ultimate destination – an adequate, resilient workforce to meet the District’s needs. Importantly, the funding for the program includes financial assistance to program participants for: “(A) Tuition at UDC, to the

extent charged; (B) Academic costs, including the cost of books and supplies; and (C) A monthly stipend to be used toward living expenses and transportation for participants pursuing master's degrees at UDC; and (D) Fees associated with obtaining a license for a behavioral health occupation in the District."<sup>14</sup>

To be eligible for this assistance, an individual must meet relevant enrollment requirements, as well as one of the following: "(A) Be a resident of the District; (B) Be a graduate of a District public school; or (C) Be employed by a District government agency or health care provider organization." Further, the students must "have a stated interest in pursuing a license in a behavioral health and human services occupation and to work in a behavioral health or human services occupation in the District," and "commit to working at a District LEA, government agency, or health care provider organization for a minimum of 2 years after receiving an accredited master's degree and earning the appropriate licensure or certification needed to practice in a behavioral health and human services occupation in the District."<sup>15</sup> We appreciate the effort to obtain these commitments, so that the District's investment will pay dividends to our residents.

For models elsewhere, we suggest looking at the Washington State Behavioral Health Workforce Development Initiative (WDI) – a similar scholarship program for behavioral health degrees launched between the Ballmer Group and the University of Washington School of Social Work.<sup>16</sup> As with this legislation, the Washington effort attempts to expand "the diversity and numbers of well prepared, debt relieved students graduating from master's programs in

social work and mental health counseling who go on to work in community based behavioral health programs.”<sup>17</sup> One major difference is that the commitment of service upon graduation is three years rather than two. The three-year requirement has not seemed to deter applicants, as the program has graduated two cohorts of scholars thus far. The program further provides mentoring, workshops, and other resources to support job readiness and good fit placements, which may be beneficial for UDC to offer.<sup>18</sup>

Lastly, though it is not specified in the bill, we hope that UDC will also establish specialized training within the program related to the behavioral health needs which are currently underserved locally. Training related to serving youth and families, working in school environments, and treatment for Substance Use Disorder (SUD) would be particularly valuable. For example, the University of Maryland School of Social Work’s master’s program curriculum includes advanced clinical courses such as Integrated Behavioral Health Practice, Clinical Social Work with Children and Adolescents, Clinical Practice with Families and Children in Child Welfare, Social Work in Education, and Core Concepts in Trauma Treatment for Children and Adolescents.<sup>19</sup>

We thank the Council for including the funding for UDC to begin to build this much-needed program in its Fiscal Year 2024 budget, and urge this bill move quickly into law as the critical next step to securing this program and supporting workforce development. After passage and enactment, more action will still be needed to ensure that the health system these professionals enter is supportive and sustainable.

## **Stakeholders Across the Government Should Take Action to Support a Diverse, Homegrown Behavioral Health Workforce**

Our health system does not simply need a quantity of professionals; our goal should be enough providers in the field with whom District residents can have rapport and trust. Our community engagement for the *Path Forward* report revealed that many minority youth preferred behavioral health providers whom they can “relate to.” Providers who have similar backgrounds to youth receiving care are more likely to form a strong therapeutic bond with clients and achieve better recovery outcomes as a result.<sup>20</sup> This is why the Act’s requirement for a connection to DC to participate in the program is vital; we support all efforts to recruit community members into the professional pipeline, across education levels.

A 2022 report from Kaiser Permanente focused on how to create and strengthen the mental health workforce for the future. It offers the following solutions: showing that mental health can be a career path from as early as high school, finding ways to ease clinical hours, focusing on diversity in the workforce to match the diversity of potential clients, and offering student loan forgiveness and stipends.<sup>21</sup> There are further steps DC could take to support workforce development and diversity include:

- Incentivize recruitment and retention of minority behavioral health professionals by enhancing reimbursement rates for providers who effectively meet the diversity, inclusion, and equity needs of their clients, as is recommended by

Mental Health America.<sup>22</sup>

- Collaboration amongst DC agencies (DHCF, DBH, DC Health) to analyze and monitor behavioral health workforce turnover and develop retention strategies;<sup>23</sup>
- Ease administrative burden on behavioral health professionals who provide services to those with public health insurance;
- Ensure living wages, fair scheduling practices, paid sick time, as well as paid family and medical leave;
- Offer resilience training to help reduce burnout symptoms;<sup>24</sup> and
- Provide adequate supervision and pay incentives based on experience and merit.

DC may also consider ways to recognize and pay behavioral health organizations as “teaching clinics.” Community-based behavioral health provider organizations that hire recent graduates and provide clinical supervision could be compensated similarly to reimbursement provided to hospitals and federally qualified health clinics (FQHCs) for their roles in educating the health care workforce.<sup>25</sup>

Lastly, the District can pass and implement agreements with interjurisdictional licensure compacts to increase access to and portability for providers across the region. The Counseling Compact Approval Act of 2023 (B25-0287) was introduced this year but is not yet scheduled for a hearing.<sup>26</sup> A Social Work Licensure Compact has been recently launched in the United States as well, through a partnership between The Council of State Governments (CSG)



and the Association of Social Work Boards (ASWB).<sup>27</sup> These are all opportunities to attract and broaden the pathways to behavioral health careers in DC.

## Conclusion

Thank you for the opportunity to testify today. I welcome any questions from the Committee.

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<sup>1</sup> B25-0055 - Pathways to Behavioral Health Degrees Act of 2023, Sec. 1, line 31-3, p. 1, legislative text, available at: <https://lms.dccouncil.gov/downloads/LIMS/52128/Introduction/B25-0055-Introduction.pdf?Id=154413>.

<sup>2</sup> *A Path Forward – Transforming the Public Behavioral Health System for Children and their Families in the District* (December 2021), available at: [https://childrenslawcenter.org/wp-content/uploads/2021/12/BHSystemTransformation\\_Final\\_121321.pdf](https://childrenslawcenter.org/wp-content/uploads/2021/12/BHSystemTransformation_Final_121321.pdf). This report is released by Children’s Law Center, Children’s National Hospital, the District of Columbia Behavioral Health Association, Health Alliance Network, Early Childhood Innovation Network, MedStar Georgetown University Hospital Division of Child and Adolescent Psychiatry, Parent Watch, and Total Family Care Coalition.

<sup>3</sup> Press Release, U.S. Department of Health and Human Services, *U.S. Surgeon General Issues Advisory on Youth Mental Health Crisis Further Exposed by COVID-19 Pandemic*, (December 7, 2021), available at: <https://public3.pagefreezer.com/browse/HHS.gov/30-12-2021T15:27/https://www.hhs.gov/about/news/2021/12/07/us-surgeon-general-issues-advisory-on-youth-mental-health-crisis-further-exposed-by-covid-19-pandemic.html>.

<sup>4</sup> Center for Disease Control and Prevention, Injury Center, Suicide Prevention, Facts About Suicide, May 2023, available at: <https://www.cdc.gov/suicide/facts/index.html#:~:text=Suicide%20affects%20people%20of%20all,%2D14%20and%2020%2D34>.

<sup>5</sup> DC Health Matters, *Youth Risk Behavior Surveillance System, Measurement Period: 2019*, (last accessed July 10, 2023), available at: <https://www.dchealthmatters.org/indicators/index/view?indicatorId=1048&localeId=130951> (Data source, Youth Risk Behavior Surveillance System, maintained by Conduent Healthy Communities Institute).

<sup>6</sup> Annie E. Casey Foundation, *Kids Count Data Center, Children Who Have One or More Emotional, Behavioral, or Developmental Conditions in the United States, 2017-2018, 2018-2019, 2019-2020*, (May 2023), (Last accessed, July 10, 2023), available at: <https://datacenter.aecf.org/data/tables/10668-children-who-have-one-or-more-emotional-behavioral-or-developmental-conditions?loc=1&loct=2#detailed/2/2-52/false/1769,1696,1648/any/20457,20456> (Analysis of data from the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Bureau, National Survey of Children’s Health).

<sup>7</sup> American Academy of Child and Adolescent Psychiatry, *Best Principles for Integration of Child Psychiatry into the Pediatric Health Home*, p. 3, (June 2012), available at: [https://www.aacap.org//App\\_Themes/AACAP/docs/clinical\\_practice\\_center/systems\\_of\\_care/best\\_principles\\_for\\_integration\\_of\\_child\\_psychiatry\\_into\\_the\\_pediatic\\_health\\_home\\_2012.pdf](https://www.aacap.org//App_Themes/AACAP/docs/clinical_practice_center/systems_of_care/best_principles_for_integration_of_child_psychiatry_into_the_pediatic_health_home_2012.pdf).

<sup>8</sup> Wachino V, Frank RG, Humphreys K, O’Brien J., *The kids are not all right: The urgent need to expand effective behavioral health services for children and youth*, USC-Brookings Schaeffer on Health Policy, (December 22, 2021), available at: <https://www.brookings.edu/blog/usc-brookings-schaeffer-on-health-policy/2021/12/22/the-kids-are-not-all-right-the-urgent-need-to-expand-effective-behavioral-health-services-for-children-and-youth/>.

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- <sup>9</sup> See The National Council for Mental Wellbeing, *Behavioral Health Workforce is a National Crisis: Immediate Policy Actions for States*, p. 2, (February 1, 2022), available at: <https://www.thenationalcouncil.org/resources/behavioral-health-workforce-is-a-national-crisis-immediate-policy-actions-for-states/>. See also, USA Facts, *Over one-third of Americans live in areas lacking mental health professional*, (July 14, 2021), available at: <https://usafacts.org/articles/over-one-third-of-americans-live-in-areas-lacking-mental-health-professionals/>; Health Resources and Services Administration, *Health Workforce, Behavioral Health Workforce Projections, 2017-2030*, p. 2, (August 2022), available at: <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/bh-workforce-projections-fact-sheet.pdf>.
- <sup>10</sup> Jocelyn Wiener, *Unanswered cries: Why California faces a shortage of mental health workers*, Cal Matters, (September 8, 2022), available at: <https://calmatters.org/health/2022/09/california-shortage-mental-health-workers/>
- <sup>11</sup> Press Release, New York Governor Kath Hochul, *Governor Hochul Announces \$4 Million to Increase Workforce Diversity*, (August 25, 2022), available at: <https://www.governor.ny.gov/news/governor-hochul-announces-4-million-increase-mental-health-workforce-diversity>.
- <sup>12</sup> Schneider, A. and Corcoran, A., *Standards for Provider Network Adequacy in Medicaid and the Marketplaces*, Georgetown University Health Policy Institute Center for Children & Families, (May 16, 2022), available at: <https://ccf.georgetown.edu/2022/05/16/standards-for-provider-network-adequacy-in-medicaid-and-the-marketplaces/> (quoting Patient Protection and Affordable Care Act; HHS Notice of Benefit and Payment Parameters for 2023, 87 Fed. Reg. 27,322 (May 6, 2022)(to be codified at 45 CFR pt. 156), available at: <https://www.govinfo.gov/content/pkg/FR-2022-05-06/pdf/2022-09438.pdf>).
- <sup>13</sup> See, Amber Rieke, Children’s Law Center, *Testimony before the District of Columbia Council Committee on Health*, p. 4, (February 16 and 17, 2023), available at: [https://childrenslawcenter.org/wp-content/uploads/2023/02/Amber-Rieke\\_DHCF-Performance-Oversight\\_FINAL-2.16-and-2.17.pdf](https://childrenslawcenter.org/wp-content/uploads/2023/02/Amber-Rieke_DHCF-Performance-Oversight_FINAL-2.16-and-2.17.pdf).
- <sup>14</sup>B25-0055 - Pathways to Behavioral Health Degrees Act of 2023, Sec. 3(b)(2)(D), line 80-81, p. 3, legislative text, available at: <https://lms.dccouncil.gov/downloads/LIMS/52128/Introduction/B25-0055-Introduction.pdf?Id=154413>.
- <sup>15</sup>*Id* at Sec. 4(a)(5), line 112-16, p. 5.
- <sup>16</sup> Press Release, University of Washington, *\$38M set of gifts from Ballmer Group to address behavioral health crisis aims to bolster workforce, resources across Washington through UW-led programs*, (May 14, 2021), available at: <https://www.washington.edu/news/2021/05/14/38-million-set-of-gifts-from-ballmer-group-to-address-behavioral-health-crisis-aims-to-bolster-workforce-resources-across-washington-through-uw-led-programs/>.
- <sup>17</sup> Ballmer Group Grants, *University of Washington School of Social Work*, (December 31, 2022), available at: <https://ballmergroup.org/grants>.
- <sup>18</sup> Press Release, University of Washington, *\$38M set of gifts from Ballmer Group to address behavioral health crisis aims to bolster workforce, resources across Washington through UW-led programs*, (May 14, 2021), available at: <https://www.washington.edu/news/2021/05/14/38-million-set-of-gifts-from-ballmer-group-to-address-behavioral-health-crisis-aims-to-bolster-workforce-resources-across-washington-through-uw-led-programs/> (“Participating graduate schools will partner closely with agencies to design clinical education tailored to meeting the needs of clients, strengthen student internships, and provide career placement and mentoring to support sustained careers in behavioral health services.”).
- <sup>19</sup> See, University of Maryland School of Social Work, *2022-2023 Curriculum Overview*, (March 15, 2022), available at: <https://www.ssw.umaryland.edu/media/ssw-2022/files/Curriculum-Overview-2022-2023.pdf?&>.
- <sup>20</sup>Chao P, Steffen J, Heiby E., *The effects of working alliance and client-clinician ethnic match on recovery status*, 48 *Community Mental Health Journal*, p. 91-97, (2012), available at: <https://link.springer.com/article/10.1007/s10597-011-9423-8>.

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- <sup>21</sup> Cosette Taillac, *Creating the mental health workforce of the future*, Kaiser Permanente, (January 11, 2022), (last accessed July 10, 2023), available at: <https://about.kaiserpermanente.org/news/creating-the-mental-health-workforce-of-the-future>.
- <sup>22</sup> Mental Health America, *A Unified Vision for Transforming Mental Health and Substance Use Care*, (December 2020), (last accessed July 10, 2023), available at: <https://mhanational.org/unifiedvision>.
- <sup>23</sup> Amber Rieke, Children’s Law Center, *Testimony before the District of Columbia Council Committee on Health*, p. 8, (February 28, 2023), available at: [https://childrenslawcenter.org/wp-content/uploads/2023/02/AmberRieke\\_CLC\\_PerformanceOversightTestimony\\_BoardofSW\\_Feb2023.pdf](https://childrenslawcenter.org/wp-content/uploads/2023/02/AmberRieke_CLC_PerformanceOversightTestimony_BoardofSW_Feb2023.pdf). (referencing Children’s Law Center, *A Path Forward, Transforming the Public Behavioral Health System for Children, Youth, and their Families in the District of Columbia*, (December 2, 2021), available at: [https://childrenslawcenter.org/wp-content/uploads/2021/12/BHSystemTransformation\\_Final\\_121321.pdf](https://childrenslawcenter.org/wp-content/uploads/2021/12/BHSystemTransformation_Final_121321.pdf)).
- <sup>24</sup> Norton J., *The Science of Motivation Applied to Clinician Burnout: Lessons for Healthcare*, 35 *Frontiers of Health Services Management*, p. 3-13, (Winter 2018), available at: [https://journals.lww.com/frontiersonline/Abstract/2018/12000/The\\_Science\\_of\\_Motivation\\_Applied\\_to\\_Clinician.2.aspx](https://journals.lww.com/frontiersonline/Abstract/2018/12000/The_Science_of_Motivation_Applied_to_Clinician.2.aspx).
- <sup>25</sup> Children’s Law Center, *A Path Forward, Transforming the Public Behavioral Health System for Children, Youth, and their Families in the District of Columbia*, p. 115, (December 2, 2021), available at: [https://childrenslawcenter.org/wp-content/uploads/2021/12/BHSystemTransformation\\_Final\\_121321.pdf](https://childrenslawcenter.org/wp-content/uploads/2021/12/BHSystemTransformation_Final_121321.pdf).
- <sup>26</sup> B25-0287 - Counseling Compact Approval Act of 2023, Legislation Detail, (as of July 10, 2023), available at: <https://lims.dccouncil.gov/Legislation/B25-0287>.
- <sup>27</sup> National Center for Interstate Compacts, Council of State Governments, *Social Work Licensure Compact*, (2023), available at: <https://swcompact.org/>.