

COUNCIL ON SOCIAL WORK EDUCATION

STRENGTHENING THE PROFESSION OF SOCIAL WORK

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Office of the Assistant Secretary for Planning and Evaluation Office of Planning and Policy Support U.S. Department of Health and Human Services Attn: Strategic Plan Comments 200 Independence Avenue, SW., Room 408B Washington, DC 20201

To Whom It May Concern:

On behalf of the Council on Social Work Education (CSWE), it is my pleasure to provide the enclosed comments on the U.S. Department of Health and Human Services (HHS) Draft Strategic Plan for Fiscal Years 2010-2015. Thank you for the opportunity to express these views. CSWE's comments are focused primarily on the role of social work in meeting the Nation's health care needs.

CSWE is a nonprofit national association representing more than 3,000 individual members as well as 650 graduate and undergraduate programs of professional social work education. Founded in 1952, this partnership of educational and professional institutions, social welfare agencies, and private citizens is recognized by the Council for Higher Education Accreditation as the sole accrediting agency for social work education in the United States. Social work education focuses students on leadership and direct practice roles helping individuals, families, groups, and communities by creating new opportunities that empower people to be productive, contributing members of their communities.

Rooted in a tradition of social justice, social work is focused on eliminating inequities, including health inequities, by helping vulnerable populations navigate societal and personal challenges. Social workers are embedded in a variety of settings, such as schools, hospitals, VA facilities, rehabilitation centers, social service agencies, child welfare organizations, assisted living centers, nursing homes, and faith-based organizations, which allows us to reach diverse segments of the population and play a significant role in the lives of Americans from all walks of life.

Below are CSWE's three recommendations regarding the Draft HHS Strategic Plan:

<u>Recommendation 1:</u> Include social work explicitly throughout the Strategic Plan, recognizing the profession as a critical component of the health care team.

While it may not be generally understood, social workers play a major role in providing services in primary care settings, such as hospitals, clinics, VA facilities, community health centers, rehabilitation centers, nursing facilities and in-home care. In fact, social workers are involved in community and public health promotion, prevention and wellness, and help vulnerable populations not only understand the social determinants of health but help them take the necessary steps to improve their health and wellbeing.



Additionally, social workers represent the largest providers of mental health therapeutic and counseling services among health professions. Categorizing social workers as just mental health providers, however, does not accurately depict the breadth and reach of the profession. Social workers often serve as "response agents," helping vulnerable populations or individuals deal with a given challenge and develop a plan for responding and persevering. Social workers also strive to keep clients healthy and productive over the longer-term by helping them make good decisions for themselves and their families. In essence, social workers are helping vulnerable populations navigate and overcome the challenges in their everyday lives, helping not just the poor or the sick, but anyone who has experienced some kind of trauma, hardship or injustice.

CSWE urges HHS to highlight social work explicitly in the Strategic Plan, similar to the way nurses, dentists, public health professionals, and human service workers are discussed. Many of the goals and strategies in the draft plan describe the work already being done by social workers. They are a critical component of the health care team, but unfortunately are often overlooked and underappreciated. As HHS implements its Strategic Plan over the next five years and beyond, CSWE urges the Department to utilize social workers whenever possible to meet its goals.

<u>Recommendation 2:</u> Include in the HHS Strategic Plan strategies for improving recruitment and retention of high-need health care professionals, such as social workers, through enhanced investment in loan forgiveness, scholarship, and diversity-focused programs.

CSWE commends HHS for making recruitment and retention of health care professionals a major priority over the next several years. Nowhere is the problem of workforce shortages more prevalent than in social work, and it is true across all sectors (public and private), at all levels (from bachelors to the doctoral level), and in all fields of practice (child welfare, public health, mental health, geriatrics, military social work, etc.). The U.S. Bureau of Labor Statistics estimates that employment for social workers is expected to grow faster than the average for all occupations through 2018, particularly for social workers specializing in the aging population and working in rural areas. In addition, mental health and substance abuse social workers are expected to grow by almost 20 percent over the 2008-2018 decade.¹

Unfortunately, recruitment into the social work profession faces many obstacles, the most prevalent being low wages coupled with high educational debt. For example, the median annual wage for child, family, and school social workers in May 2008 was \$39,530, while the wage for mental health and substance abuse social workers was \$37,210. While a bachelor's degree (BSW) is necessary for most entry-level positions, a master's degree (MSW) is the terminal degree for social work practice, which significantly contributes to the debt load of social work graduates entering careers with low starting wages. According to the 2007-2008 National Postsecondary Student Aid Study conducted by the National Center for Education Statistics at the U.S. Department of Education, 72 percent of students graduating from MSW programs incurred debt to earn their graduate degree. The average debt was approximately \$35,500. The percentage of MSW students borrowing money is 17 percent higher than the average for all master's degrees and the amount borrowed is approximately \$5,000 higher than the average for all master's degrees. These difficult realities have made recruitment and retention of social workers an ongoing challenge, which has significant implications for the future of the health care system and our ability to provide adequate care, particularly in the nation's underserved communities.

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¹ U.S. Bureau of Labor Statistics, Occupational Outlook Handbook, 2010-11 Edition: Social Workers, http://data.bls.gov/cgi-bin/print.pl/oco/ocos060.htm (March 2010).



While the draft plan recognizes the need to enhance recruitment across the health care enterprise, the plan does not outline a specific plan for addressing it. A concerted commitment is needed by the Department to significantly enhance its investment in loan forgiveness programs for professions that play major roles in addressing the health of Americans. Individuals committed to serving vulnerable populations should be recognized for their efforts and not deterred from the profession because they are not able to make ends meet or pay back their student loans.

Enhanced investment in programs like the Title VII Health Professions programs at the Health Resources and Services Administration (HRSA), as well as new programs that were authorized in the Patient Protection and Affordable Care Act, can have a major impact on recruiting and retaining health professionals. For example, the Mental and Behavioral Health Education and Training Grants program authorized in the Affordable Care Act would provide grants to institutions of higher education to support the recruitment of students in baccalaureate, master's, and doctoral degree programs of social work, as well as the development of faculty in social work. Adequate funding for programs like these would have major positive impacts on the sustainability of the health professions.

Additionally, maintaining diversity in the workforce and ensuring all health professionals are culturally competent is critically important to successfully addressing the needs of the population. Whether we are talking about ethnic minorities, people with physical or intellectual disabilities, or other unique populations such as veterans and military families or American Indians/Native Alaskans, the health care workforce must be equipped with the skills to respond to their needs.

CSWE is encouraged that the Draft Strategic Plan discusses the need for cultural competency, but more can be done. Programs like the Minority Fellowship Program at the Substance Abuse and Mental Health Services Administration (SAMHSA) have been working for decades to both increase cultural competency in the fields of mental health and substance abuse as well as encourage more underrepresented minorities to enter careers in the health professions. But federal diversity programs have been chronically underfunded and as a result have been limited in their ability to make a real difference. The HHS Strategic Plan should include a more explicit strategy for enhancing cultural competency and promoting workforce diversity.

<u>Recommendation 3:</u> Utilize social work research to achieve HHS's goals for evidence-based practice.

Social work education, research, and practice are inextricably linked and center on a common goal – ensuring vulnerable populations receive appropriate services. Social work research is used to study the circumstances facing vulnerable populations (whether it's illness or disability, injustice, or simply getting back on one's feet) and the needs of those populations to succeed in their circumstances; evaluate the accessibility to and effectiveness of existing social services; and determine best practices for social work educators and practitioners for serving the community. Investment in social work research enables evidence-based approaches to social work practice, in turn providing the very best service to vulnerable populations.

Social work research is an important component of the "human sciences." If the social, behavioral and economic sciences are generally considered basic research, then social work research largely represents the translation of basic discovery into useable information and practices that enable evidence-based service. Social workers represent the end of the research to delivery pipeline, carrying science from



bench to trench. They serve as "implementers" of scientific knowledge, helping vulnerable populations find their voice and achieve access to science and technology.

However, social work research supported by the National Institutes of Health (NIH) has reduced markedly in recent years. The Draft Strategic Plan states the Department's goals to, "Foster evidence-based health care through research (page 27, line 779)," and "Promote translation of research into practice (page 27, line 780)." Given these priorities, HHS and NIH should be increasing its investment in social work research, which is focused almost exclusively on identifying the best evidence-based approaches to serve vulnerable populations and improve health and well-being.

The Strategic Plan should discuss more explicitly the Department's strategies for increasing behavioral and social science research, including research used to evaluate programs and develop the evidence base needed to translate scientific findings into health care services.

Thank you for the opportunity to express these views. I hope the Department will give the points discussed in this letter due consideration. CSWE believes that social work can play a central role in meeting the Department's goals over the next several years and looks forward to working together in doing so. Please do not hesitate to contact me with any questions or if you would like additional information about CSWE, social work education, or the issues discussed in this letter.

Sincerely,

Julia M. Watkins Executive Director

Council on Social Work Education

Julia M. Wathins