

Submitter: Pam Askew
On Behalf Of:
Committee: House Committee On Behavioral Health
Measure, Appointment or Topic: HB4083

Chair and Members of the Committee,

Thank you for the opportunity to provide public comment on House Bill 4083.

My name is Pam, and I am a Clinical Social Work Associate in Oregon working toward licensure as a Licensed Clinical Social Worker. I am deeply invested in both the clinical and systems-based dimensions of mental health care.

I want to express thoughtful concern regarding the proposed merger of the Board of Licensed Social Workers into the Mental Health Regulatory Agency, as well as the expansion of supervision authority to include Licensed Professional Counselors and Marriage and Family Therapists.

I want to acknowledge that I see clear benefits in allowing supervision by other mental health professionals, such as Licensed Professional Counselors and Licensed Marriage and Family Therapists. Their work is invaluable, and their expertise can meaningfully support social workers in developing strong clinical skills, therapeutic techniques, and trauma-informed care.

At the same time, I believe there is more to the social work lens that is unique to our profession.

Social work is a distinct profession with a unique ethical framework, educational foundation, and scope of practice. Our training emphasizes not only clinical intervention, but also person-in-environment, systems theory, advocacy, social policy, and equity. These elements are not supplemental to our work — they are central to how we assess risk, protect clients, and ensure ethical, culturally responsive care.

Supervision is not simply oversight of clinical technique. It is professional formation. It is where social workers learn to integrate ethics, legal mandates, power analysis, community context, and client rights into clinical decision-making. While I deeply respect the work of counselors and marriage and family therapists, their professional standards, regulatory frameworks, and theoretical foundations are different from those of social work.

Allowing non-social workers to supervise social workers raises important questions about how social work competencies, ethical standards, and licensure requirements will be evaluated and protected.

I also want to acknowledge the real challenges of workforce shortages, especially in rural and underserved areas. Access to supervision is critical. However, I believe solutions should strengthen the social work profession rather than dilute its regulatory independence or professional identity.

I respectfully urge the committee to carefully consider safeguards that preserve social work's distinct governance, ethical oversight, and professional standards while addressing access and workforce needs.

Thank you for your time and your commitment to the quality and integrity of mental health care in Oregon.

Respectfully,
Pam
Clinical Social Work Associate (CSWA)
Oregon