

Submitter: Suenia Villa, LCSW, Supervisor and Doctorate of SW Student; Administration Track;
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Committee: House Committee on Behavioral Health

Measure, Appointment or Topic: HB4083

I hold LCSW licenses in CA, OR, WA and FL. Owner Private Practice and Part time community services supervisor. Over 20 years social work professional experience

I **strongly oppose** this legislation for several reasons:

1) The licensure process for social workers is already complex and burdensome, and proposed changes risk creating additional barriers within a workforce that is urgently needed. Obtaining licensure is particularly challenging due to the limited availability of qualified supervisors in nonprofit and community-based settings, where most associate clinical social workers gain essential, front-line practice experience. Licensed social workers often earn significantly higher income in private practice, which reduces the pool of LCSWs available to provide supervision in these settings.

When supervision is available in private practice, the cost is frequently prohibitive for early-career social workers, effectively placing licensure out of financial reach for many. At the same time, there is a shortage of psychologists and LPCs employed in community-based agencies, further limiting supervision options for associate social workers working in these environments. Many organizations struggle to offer consistent supervision even when LCSWs are present, as supervisors are rarely compensated for this role and supervision is often treated as unpaid or voluntary labor.

Collectively, these conditions create structural barriers that delay licensure, restrict workforce entry, and exacerbate shortages in communities that rely most heavily on social work services. Strengthening the profession requires reducing, rather than increasing, obstacles to licensure and expanding equitable access to qualified, discipline-specific supervision.

2) The time required for state licensing boards to review and approve licensure applications already spans several months, creating a significant financial burden for associate clinical social

workers who are awaiting the ability to earn at the licensed level. Adding additional administrative requirements would further increase the workload for licensing boards, likely extending approval timelines to six months or longer. Such delays translate into substantial lost income for applicants, often amounting to thousands of dollars, and place an unnecessary financial strain on early-career social workers during a critical transition period.

3) Licensed Professional Counselors and psychologists are not appropriately qualified to supervise social workers because social work is grounded in a distinct educational foundation, theoretical orientation, and scope of practice. Social workers are uniformly trained in the biopsychosocial model as applied through a person-in-environment framework, which explicitly centers social systems, structural conditions, community contexts, and policy-level influences on mental health. This orientation fundamentally differs from traditional psychological and counseling models, which tend to prioritize individual pathology, intrapsychic processes, and symptom reduction.

Maintaining this distinction is essential when training and supervising emerging social work professionals. Effective supervision requires not only clinical competence, but also deep familiarity with social work values, ethics, intervention levels, and systemic analysis. Professionals trained outside of social work often lack the theoretical and practice-based grounding necessary to adequately supervise social workers, particularly in areas such as systems navigation, social justice advocacy, interdisciplinary collaboration, and ethical decision-making rooted in social work principles.

Professional experience has consistently demonstrated that many psychologists and LPCs require guidance in understanding social work supervision expectations, including how to integrate systemic analysis and environmental context into clinical oversight. In practice, social workers are frequently placed in the position of educating non-social work clinicians on supervisory responsibilities that fall squarely within the social work domain. Given this reality, it is more appropriate for supervision of social workers to be provided by experienced LCSWs who possess discipline-specific training and a comprehensive understanding of the scope and complexity of social work practice.

Supervision should preserve the integrity of the profession. Allowing practitioners without social work training to supervise social workers risks diluting core professional competencies and undermining the theoretical foundations that distinguish social work from other mental health disciplines.

A handwritten signature in blue ink on a light gray rectangular background. The signature is cursive and reads "Suenia Villa, LCSW".

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