

Submitter: Rebecca Lee
On Behalf Of:
Committee: House Committee On Behavioral Health
Measure, Appointment or Topic: HB4083

I am writing to express my opposition to HB4083 in its current form specifically the provision that would allow related mental health fields to supervise social workers pursuing clinical licensure in Oregon.

While all mental health professions share a commitment to client well-being, social work is a distinct discipline with its own values, ethical framework, and scope of practice. Social work education and training extend well beyond individual clinical treatment to include mezzo and macro level practice, systems theory, policy, advocacy, community organizing, and an explicit focus on social justice. LMFT's and counselors while highly skilled within their own disciplines are not trained to supervise the full breadth of social work practice and professional identity development.

Rather than broadly expanding who may provide supervision, I believe a more appropriate and balanced approach would be to require that a minimum number of postgraduate supervision hours be provided by a licensed clinical social worker with remaining hours can optionally be completed under equally qualified licensed clinicians from other disciplines. This would preserve the integrity of social work licensure while increasing flexibility, collaboration, and supervision availability. While interdisciplinary collaboration is beneficial and could meaningfully supplement social work supervision, it should not replace it entirely.

I want to be clear that I strongly support efforts to reduce unnecessary barriers to licensure, improve workforce sustainability, and increase access to high quality mental health services across Oregon. However, merging distinct mental health professions under a single regulatory structure is not the same as improving access and it raises serious concerns regarding ethics, professional competency and is misleading about what our licensure training actually represents. If LCSW specific supervision is no longer required then the resulting license would no longer represent "clinical social work," it would rather reflect a more generalized mental health credential.

For these reasons, I urge lawmakers to reconsider HB4083 as currently written and to engage meaningfully with practicing social workers educators and supervisors thoughtful collaboration can lead to solutions that expand access to care without compromising and professional integrity for the safety of the communities we serve.

Thank you for your time and consideration.

