## THE ROANOKE TIMES

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Virginia Health Care Foundation

COMMENTARY

## Increasing mental health professionals



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ometimes, the overwhelming nature of a large complex problem impedes its resolution. That could certainly be true with the mental health crisis Virginia is currently experiencing.

The COVID-19 pandemic and societal stressors have triggered depression, anxiety, panic disorder and other mental health conditions throughout the state in an extraordinarily high number of Virginians of all ages.

The skyrocketing demand for mental health services cannot be met by the shrinking number of behavioral health professionals in both the public and private sectors.

Thankfully, Virginia's General Assembly has stepped up to help address this worrisome shortage via an array of mental health workforce initiatives included in the state budget it just passed. This will help bring relief to many Virginians via a variety of approaches, including several innovative ones.

Problem #1: 61% of Virginia's psychiatrists are age 55 or older and 54 localities have no psychiatrist. Not surprisingly, these mostly rural localities have much poorer outcomes on key behavioral health indicators than the state as a whole. Unfortunately, the pipeline to replace those who retire is not even producing enough psychiatrists to maintain the inadequate number currently practicing. To help address this situation, the General Assembly has funded 10 new psychiatric residency slots.

Problem #2: The number

of Licensed Clinical Social Workers (LCSWs) and Licensed Professional Counselors (LPCs) is insufficient to meet the demand for counseling and the other therapies they are trained to offer.

The new state budget includes two innovative initiatives that will immediately increase the availability of counseling services and ultimately add more than 200 licensed therapists to the trove of mental health professionals practicing in Virginia.

One addresses a significant financial impediment to licensure for Masters of Social Work (MSW) and Masters of Counseling (MC) graduates by paying for the supervision of clinical hours needed for licensure. Many masters graduates cannot afford the fees for 100 to 200 hours of required supervision, respectively, and Virginia is losing the benefit of having a robust corps of talented therapists as a result. The new initiative, Boost 200, will pilot the effect and value of the state paying for the supervision of 100 MSWs and 100 MCs. Priority will be given to applicants who practice in one of Virginia's 93 localities that are mental health professional shortage areas (like much of the Roanoke Valley and points west), or to people of color, or who are bi-

The other inventive approach provides an opportunity to address the large volume of student mental health concerns at Virginia's colleges and universities. The General Assembly has allotted funding for university student health centers to hire MSWs or MCs via grants from the State Council on Higher Education for Virginia. Needed counseling will be available

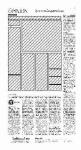
under supervision in the short term and Virginia will gain more LCSWs and LPCs in the longer term.

**Problem #3:** Many children are suffering from depression, anxiety and other mental health stressors. Pediatricians typically don't have the training to treat them and are not equipped to manage mental health in their medical practices.

The General Assembly has provided additional funding for the creative and effective Virginia Mental Health Access Program, which gives pediatricians the training and tools they need to serve children with mental health needs. This includes year-round education opportunities and access and provides access to on-call child and adolescent psychiatrists 40 hours a week. It also provides care navigation and referrals to needed resources.

A robust workforce of licensed behavioral health professionals is essential to making needed mental health services available in both the public and private sectors. No single initiative can address the current and growing shortage. The multidimensionality of solutions and strategies requires a multi-pronged approach with cross sector engagement, focus, and investments of time, money, and attention targeted to initiatives which will produce measurable results. To determine the most effective ways to expand the behavioral health workforce, the General Assembly has directed the governor's office to designate a member of the executive branch to be an advisor on health workforce development in Virginia and provided some funding to support the effort.

Virginia is a "can do" state.



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It has succeeded each time its leaders have focused on elevating the commonwealth's performance or rankings. The new behavioral health workforce initiatives included in the budget just passed by the General Assembly are a wonderful start to

resolving the shortage of these valuable and needed profes-sionals. We are on our way.

Oswalt is the founding director of the Virginia Health Care Foundation in Richmond, a public/private partnership.

The foundation's mission is to increase access to primary health care for uninsured and medically underserved Virginians via innovative programming and service delivery models.

