

**HEALTH CARE FOR THE HOMELESS TESTIMONY
IN SUPPORT OF**

SB 871 – Social Workers - Licensure Examinations - Moratorium and Workgroup

**Senate Finance Committee
March 10, 2023**



Health Care for the Homeless strongly supports SB 871, which would put a moratorium on social worker licensure examinations as well as develop a workgroup to identify alternatives and recommendations to said social worker license examination requirements and develop recommendations. We must have an immediate response to the impact to BIPOC professionals and communities of discriminatory licensing exams, which have kept many out of the social work profession and/or independent practice. This bill would go a long way in correcting an undeniable injustice and eliminating the racial disparities that exist in passage of this problematic examination.

The Data Shows Stark Disparities, Particularly for Race and Age¹

In August of 2022, the Association of Social Work Boards (ASWB) released a report confirming what we already knew: the examination pass/fail rates showed stark disparities across race, age, and language.

According to the national data, the pass rates for the clinical examination (with 2+ attempts) across race was: Black: 57%; Hispanic/Latino 77%; White: 91%. This national data broken down by age was: age ranges 18-29: 91% and age ranges 50+: 65%. Also according to national data, the pass rates for the masters exam (with 2+ attempts) broken down by race was: Black: 52%; Hispanic/Latino: 71%; White: 91%.

The national data on rates for first-time passed at the Clinical Level (LCSW-C) broken down by race include: Black: 43.5%; Hispanic/Latinx: 63%; White: 83.5. At the Masters Level (LMSW), the exam first-time pass rate by race was: Black: 44.65%; Hispanic/Latinx: 64%; and White: 86%.

According to *Maryland* data broken down by race and ethnicity, the first-time passed rate for the Clinical (LCSW-C) Exam was: Black: 53.4%; Hispanic/Latinx: 65.9%; and White: 88.4%. For the Masters (LMSW) Exam, the first-time pass rate by race was: Black: 51.4%; Hispanic/Latinx: 75%; and White: 90%.

This data cannot be ignored.

We Need Equitable Licensure for Social Workers

We seek inclusivity and equitability in the licensure process and the elimination of harmful barriers for BIPOC social work professionals. Licensure does not need to be based on exam scores, especially exams that are discriminatory and lack evidence that they are related to actual practice. The disaggregated data show glaring and unacceptable discrepancies in pass rates based on race, age, educational institution, and geographic location. This results in tangible harms, including spending \$100s or \$1,000s to re-prepare and re-take the exams as well as untold psychological harm to qualified professionals unable to pass the exam by no fault of their own.

¹ Testimony data and references provided, in part, by Social Workers for Equity and Anti-Racism (SWEAR) and National Association of Social Workers – Maryland (NASW-MD).

This problem is exacerbated by the fact that we have a significant workforce shortage when it comes to social workers. **We must aggressively address the implicit biases and root causes of these data.**

Below is an account from Health Care for the Homeless Therapist Case Manager Tammy Montague, LMSW

To reduce the harms of the 'BIPOC' population associated with the Association of Social Work Board (ASWB) licensing Exams

My name is Tammy Montague, LCSW-C; and I am employed with Health Care for the Homeless as a Therapist Case Manager in Baltimore City, Maryland.

As an older black woman practicing social work, I was not surprised by the racial disparities in pass rates for people of color that was published last August by the ASWB. I was told many times by other black people that struggled in getting licensed as a social worker to "choose the answer that a middle-aged white woman would choose". I understood at that point that I would be facing adversity. It would not be the first time I have experienced 'white privileged' affects for "black folk". Nevertheless, the thought of reducing my self-image as a black professional that spent years in academia and graduating from a nationally accredited HBCU ached at the core of my being.

I remember the old saying, "I got mines; you got yours to get". And I don't subscribe to this but it feels like the social work profession through the required ASWB exam, that has now shown itself to be a racially biased exam, has moved to a point of excluding and leaving people behind. If this is the case, then black people have been chosen to walk in that exclusion. After 3 times of failing the LCSW-C, I passed on the 4th time. I must say that it was a hard journey to overcome. While others think that after passing the LCSW-C exam it is a time of rejoicing, I know in my heart that it is not. As our new governor, Wes Moore, said,

"Let's Get To Work! As we embark together on our state's next chapter, we commit to our shared mission to leave no one behind. No matter where you start in life, you deserve an equal opportunity to succeed – a job you can raise a family on and the chance to create wealth for you and your family."

I fear that others will take on the mindset that an exam, any exam, even a racially biased exam, is a way of determining competence, ethical standards, and the ability to serve humanity. We must address this issue today. Please!!!! We have to stop hurting one another for the sake of professional security. I remember hearing our former governor stating that we must "shatter the status quo" in order to make appropriate changes for the betterment of our society.

Failing the exam was devastating for me and it took almost a year for me to muster up the courage to re-take it. And, I thank God that my employer provided professional development funds to help with the thousands of dollars associated with trying to prepare for the exam. Nonetheless, there are many individuals that do not have the financial support to get additional help in preparing for this test. For me, none of the preparatory workshops and tutorials worked on their own. I failed again and again. It was not until I embodied a 'double consciousness' in studying and taking the exam to pass it. I do not feel triumphant because I know many other black professionals that are just as capable of providing mental health services to people in our community that are 'left behind'. The bottom line is that the pass rates of the ASWB exam show inequities and therefore personify an injustice for many black professionals that have been excluded from joining the ranks of licensed clinicians as a result of failing a racially biased exam.

I sincerely hope that the committee will consider passage of these important bills.

Thank you for your time.

Request to Ensure Diversity in the Workgroup

We request a workgroup that is more diverse and we will gladly engage with the relevant stakeholders to determine who is best to serve on the workgroup. Additionally, we would like to eliminate the State Board of Social Work Examiners from the legislation's workgroup, as they are the entity administering and reviewing the examinations that have caused such a stark racial disparity.

SB 871 Will Help in Eliminating these Inequities

As SB 871 contemplates, we support the elimination of the entry-level exams² and replacement of the clinical level exam.³ Ultimately we need a more culturally competent process. However, it is clear we can no longer administer this racially biased examination as it stands. We strongly urge a favorable report on SB 871.

Health Care for the Homeless is Maryland's leading provider of integrated health services and supportive housing for individuals and families experiencing homelessness. We deliver medical care, mental health services, state-certified addiction treatment, dental care, social services, housing support services, and housing for over 10,000 Marylanders annually at sites in Baltimore City and Baltimore County.

Our Vision: Everyone is healthy and has a safe home in a just and respectful community.

Our Mission: We work to end homelessness through racially equitable health care, housing and advocacy in partnership with those of us who have experienced it. For more information, visit www.hchmd.org.

² CSWE* and University leaders: graduates from accredited Bachelors and Masters programs are qualified to be licensed at their respective levels for supervised practice.

³ An effective human-centered, practice-based assessment process should be developed to screen for competence and safety for independent practice.