## **Dear Members of the Senate Finance Committee**,

My name is Philicia Ross, and I am the NAACP Appointee to the Maryland Workgroup on Social Work Licensure Requirements. I am urging you to vote FAVORABLE on SB379. I have firsthand knowledge of the workgroup's findings and recommendations. I started as an LMSW when this workgroup convened and became a Licensed Clinical Social Worker-Certified (LCSW-C) in December 2023. In April 2024, I opened my private practice, Village of Sound Mind, focusing on Women of Color, Queer folx, and individuals living with invisible and chronic illnesses—communities that are vastly underrepresented in mental health care. By November 2024, my practice was full, and I had no one to refer new clients to who met their needs for representation due to colleagues also being full or simply not existing.

This reality isn't just about numbers—it's about impact.

- When a Black woman survivor of domestic violence cannot find a provider who
  understands the cultural nuances of her experience, she stays in crisis longer or does
  not receive services at all.
- When a queer young adult seeking gender-affirming mental health support encounters
  a provider unfamiliar with their needs, they are forced to educate the professional who
  is supposed to help them.
- When someone with a chronic illness like sickle cell disease or fibromyalgia struggles to access a therapist who understands their intersection of physical and mental health needs, they go without.

This is the direct result of barriers in social work licensure that prevent diverse, competent social workers from entering the field. The ASWB exam is the greatest of these barriers.

While the committee has heard about the disparities in test outcomes, I want to bring a **new perspective**:

- The ASWB exam was never designed to measure clinical readiness. Unlike other
  professional licensing exams, it does not assess applied skills or real-world
  decision-making. The ASWB itself has never provided evidence that its exam is
  correlated with effective social work practice.
- Maryland has already determined that we have a behavioral health crisis. The 2024 report from the Maryland Health Care Commission states that we need 32,800 more behavioral health workers by 2028, yet we continue to uphold barriers that actively prevent trained social workers from entering the field.
- Social work licensure already requires rigorous training. Every MSW graduate
  completes at least 900 hours of supervised practice, plus additional clinical
  supervision for those seeking advanced licensure. The idea that removing this exam
  would create an unqualified workforce is simply untrue.

Removing the Exam Is Not Lowering the Bar—It's Removing a Barrier

Opponents of this bill claim that removing the ASWB exam will lower standards for social work. That is **not true**. The workgroup's recommendation is not about lowering the bar—it's about **replacing an ineffective and inequitable tool** with a **more rigorous**, **experience-based assessment**.

The workgroup recommends:

- 1. Issuing LBSW and LMSW licenses based on education and supervised fieldwork, not an exam.
- 2. Creating an alternative pathway for LCSW-Cs that emphasizes clinical hours and mentorship rather than a multiple-choice test.
- 3. Investing in a workforce pipeline that prioritizes lived experience, cultural competency, and real-world readiness over standardized testing.

This does **not** create a two-tiered system—**the two-tiered system already exists** because of the ASWB exam. The test has veto power over whether a trained professional, who has already completed years of education and hands-on experience, can serve their community.

## **Maryland Must Lead**

States like **Illinois**, **Minnesota**, **and Connecticut** have already reduced their reliance on licensing exams, with **no evidence of harm to public safety**. Maryland should be **at the forefront** of this reform, not trailing behind.

Passing **SB379** will do more than improve equity—it will:

- Strengthen Maryland's social work workforce in schools, hospitals, and community clinics.
- Reduce the state's reliance on costly crisis interventions by ensuring that people can access preventative care sooner.
- Increase financial stability for new social workers by eliminating unnecessary exam fees and repeated testing cycles.

The ASWB exam does **not** make social work better. **It makes it less accessible.** It is time for Maryland to lead in fixing this broken system.

I urge you to pass SB379 and help us build a stronger, more representative, and more effective social work profession.

Thank you for your time and consideration.

## Respectfully,

Philicia Ross. LCSW-C

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