



# 2024 Social Workers of New Mexico: A Report and Recommendations to New Mexico Legislative Health and Human Services Interim Committee

August 1, 2024

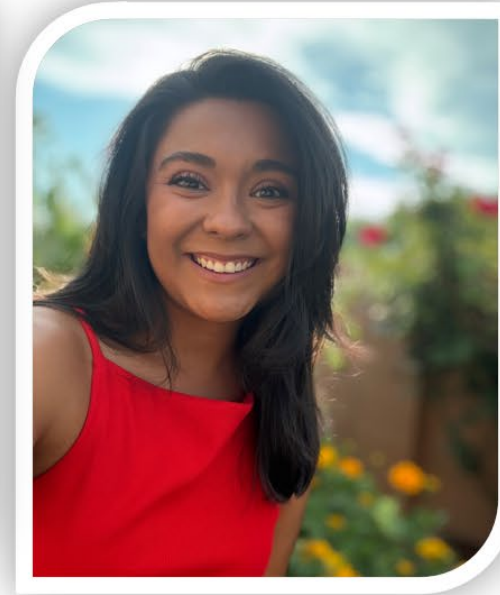
# Meet Our Research Team



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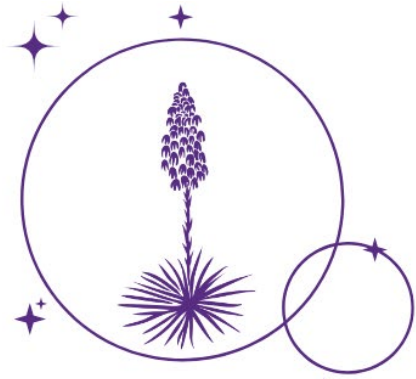
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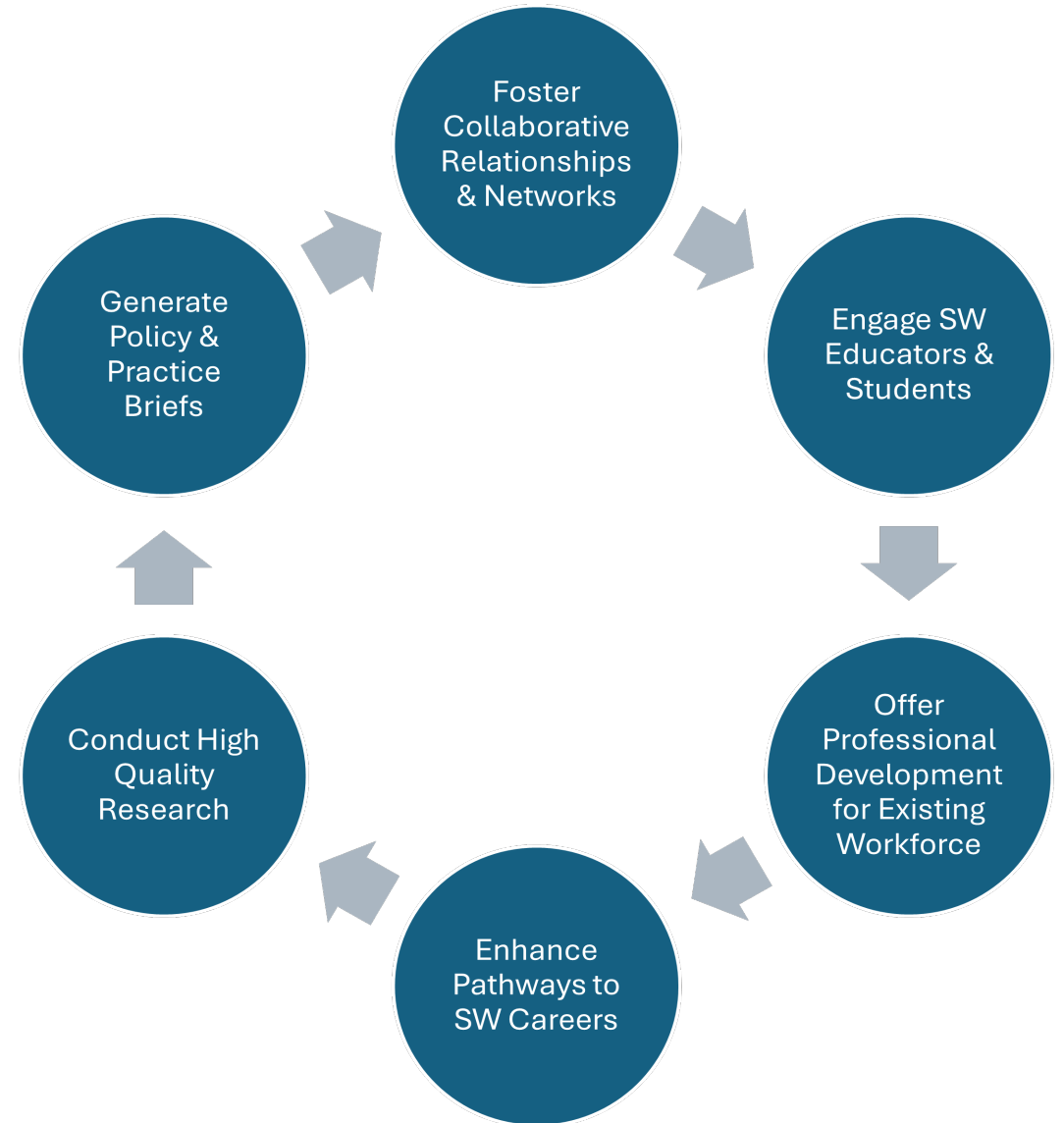
## THE CENTER FOR EXCELLENCE IN SOCIAL WORK

Situated within New Mexico Highlands University's Facundo Valdez School of Social Work (FVSSW), the Center for Excellence in Social Work (Center) was established in 2022 by Governor Michelle Lujan Grisham with the aim of enhancing our state's capacity to train and prepare social workers for competent practice with multicultural populations and communities.

### CORE PRIORITIES

- Child and Adolescent Wellbeing
- Public Health Social Work
- Climate Change & Environmental Justice
- Social Work & Community Safety

## Pillars of Work





**MILESTONE**

Director Hired  
Coordinators and Senior Admin Assistant Hired  
Expanded Continuing Education Program

**MILESTONE**

Hosted Student Legislative Advocacy Day  
NM House of Representatives Certificate of Recognition for Environmental Justice as a Core Competency for Social Workers Practicing in NM

**MILESTONE**

Hosted First NM Social Work Educators Summit

**MILESTONE**

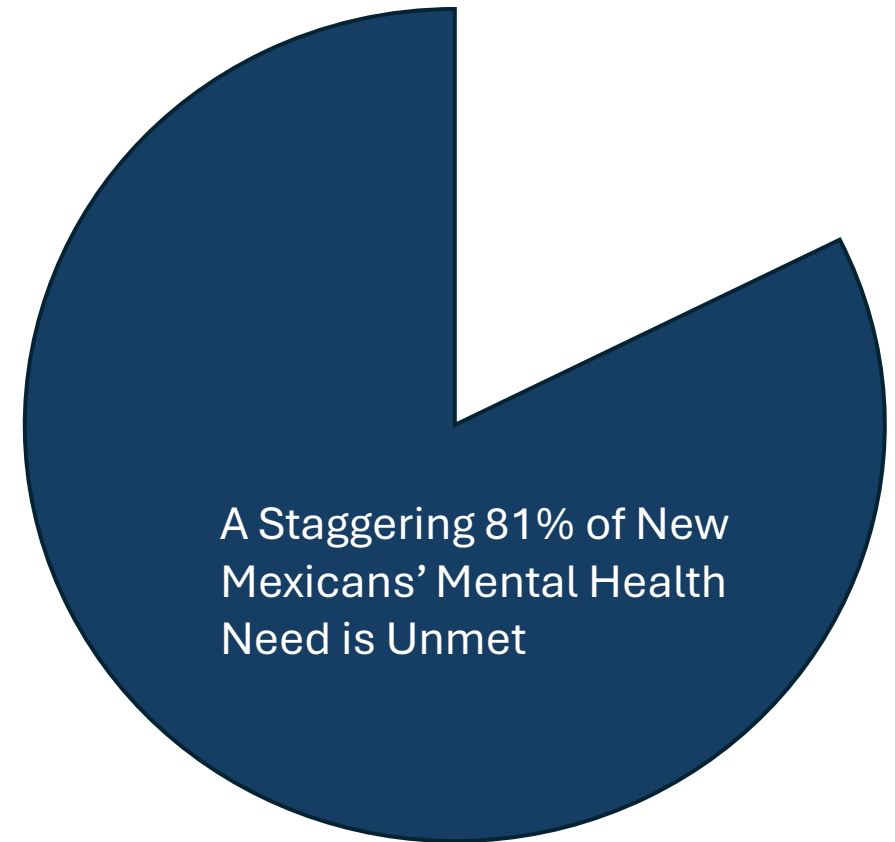
Awarded \$750K Department of Labor Limited Action Project Grant  
Conducted 2024 Social Workers of NM Survey  
Provided Continuing Education for 1,167 Practitioners



## Survey Findings

# Context

- As of June 2024, only 18.99% of the mental health care need in the state was met, well below the national average of 26.74% (HRSA, 2024)
- Persistent unmet need is a driver for increasingly acute behavioral health conditions, misuse of substances to cope, a suicide rate four times greater than the national average, and treatment strain on stressed systems (New Mexico HHS & Rural Healthcare Representative Organizations, 2023)
- Workforce shortages are likely to not only persist, but worsen through 2034 unless significant changes in the healthcare landscape occur (HRSA, 2024)
- The 2024 Social Workers of New Mexico Survey is the first of its kind to explore professional wellbeing factors and practice barriers currently impacting our workforce

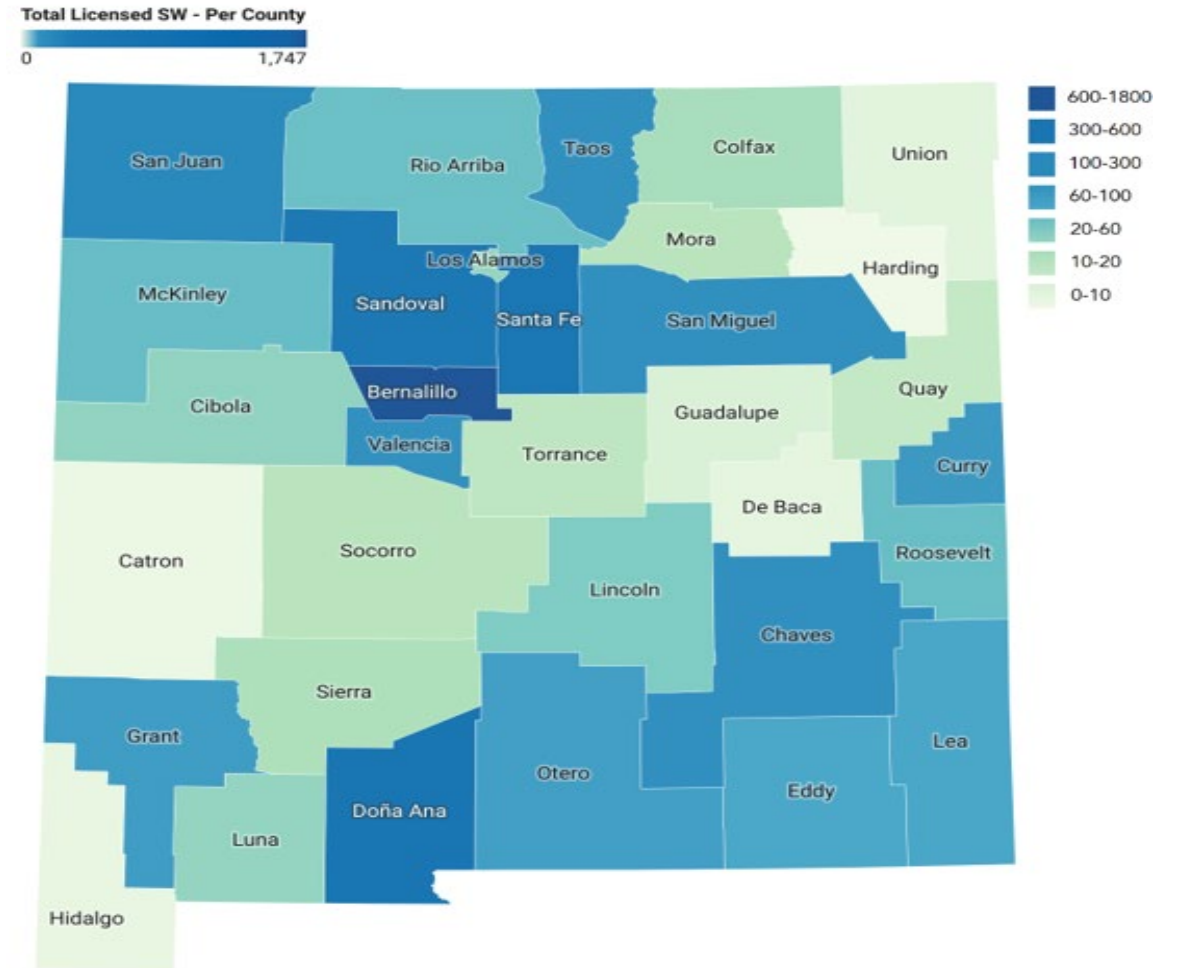


# Mapping Our Social Work Workforce

- Interactive map displays social workers by county of residence and licensure type
- Indicates gaps in workforce distribution
- May assist in understanding types of services social workers can provide based on their level of licensure
- The map can be found at:

<https://datawrapper.dwcdn.net/nfHZd/7/>

## Licensed Social Workers in New Mexico by County



Map: NMHU-FVSSW: The Center for Excellence in Social Work - Created with Datawrapper

# Methods

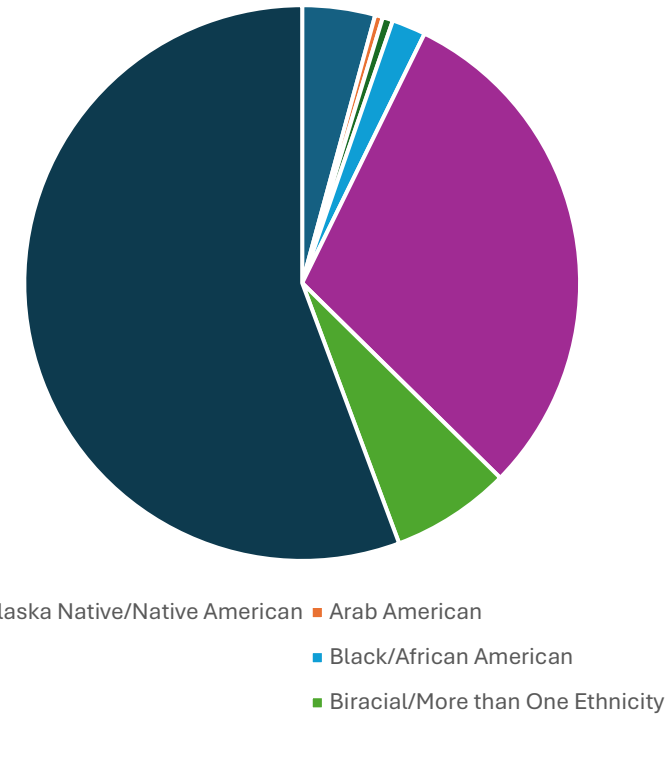
- The aim of this research was to gain a comprehensive understanding of factors that influence wellbeing, significant practice barriers, and professional development needs experienced by social workers in New Mexico
- The study was a mixed methodology design, where both quantitative and qualitative data were collected at the same time
- We used convenience and snowball sampling to identify participants, with emails and social media posts as recruitment methods
- A total of 755 social workers responded to the survey. With a confidence level of 95%, a margin of error of 5%, and a population size of 6729 social workers, a valid sample size could have been anything above 364. The total percent of responses was 12%, well exceeding the minimum threshold. The completion rate of the survey was 79%
- Findings were developed through nested analysis, a process of integrating and analyzing qualitative and quantitative data, yielding a richer interpretation of data



# Participant Demographics

- 77% were female, 14% were male, and 1% identified as non-binary
- Most survey participants were 35 or older, with participants' ages ranging from 25 to above 65 years of age
- 40% made \$50,000-\$74,999 and 30% made \$75,000-\$99,999
- 53% identified as White, 30% were Latinx/Hispanic, 7% identified as biracial or more than one ethnicity, 4% were Native American, 2% identified as Black, and 1% were Asian
- 15% of participants were Lesbian, Gay, Bisexual, Transgender, Queer, Questioning, Intersex, Asexual, or Two Spirit (LGBTQQI2S+)
- 31% of survey participants communicated in 2 languages, with 29% communicating in Spanish, 2% in American Sign Language, 2% in French, and 1% in Diné/Navajo

Participants by Ethnicity



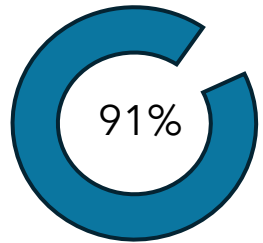
	Total Licensed SW Residing	Participants Who Practice Social Work in These Counties	Percent
Bernalillo County	1,747	291	45%
Catron County	1	6	1%
Chaves County	102	21	3%
Cibola County	22	12	2%
Colfax County	17	10	2%
Curry County	84	13	2%
De Baca County	3	5	1%
Doña Ana County	541	87	13%
Eddy County	61	16	2%
Grant County	79	20	3%
Guadalupe County	6	5	1%
Harding County	0	6	1%
Hidalgo County	2	8	1%
Lea County	63	14	2%
Lincoln County	28	12	2%
Los Alamos County	20	11	2%
Luna County	21	12	2%
McKinley County	40	12	2%
Mora County	14	9	1%
Otero County	75	21	3%
Quay County	12	7	1%
Rio Arriba County	37	17	3%
Roosevelt County	39	12	2%
San Juan County	169	26	4%
San Miguel County	107	27	4%
Sandoval County	337	74	11%
Santa Fe County	466	95	15%
Sierra County	16	9	1%
Socorro County	14	13	2%
Taos County	109	24	4%
Torrance County	13	10	2%
Union County	4	6	1%
Valencia County	98	39	6%
Statewide	-	38	5%
Other-Telehealth	-	15	2%
Other-Out of State	1,057	17	3%
Other-Multiple States	-	2	<1%
<b>Total</b>	<b>4,347</b>	<b>1022</b>	

# Survey Participant Workplace Counties and Degrees

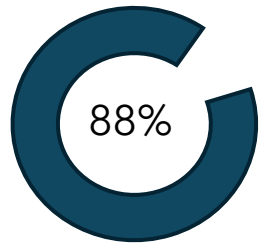
- Table 3 reflects the county or counties survey in which the survey participants work
- All counties were represented in the sample
- Table 7 shows participants' level of social work education, where a strong majority (98%, 628) had MSW degrees

	Number	%
<b>Bachelor of Social Work Degree (BSW)</b>	268	62%
<b>Master of Social Work Degree (MSW)</b>	628	98%
<b>Doctor of Social Work (DSW)</b>	8	3%
<b>Doctor of Philosophy in Social Work (PhD)</b>	7	3%

# Social Workers Who Took the Survey are Highly Committed Yet Overwhelmed



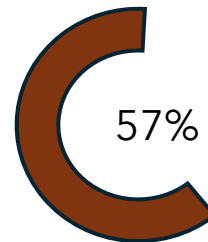
Characterized by a sense of purpose and commitment to service, 9 survey participants in 10 gained personal satisfaction and believed they make a difference through their work



Almost 9 in 10 felt a sense of pride in being social workers



While participants practice self-care and strive for work-life balance, over a third felt overwhelmed by their workloads



More than half the participants worked outside their regularly scheduled worktime to get their work done

# 38% of Participants Have Considered Leaving the Profession

## Behavioral Health Impact

Over 1 participant in 3 (37%) reported depression, anxiety or trauma symptoms

## Health Impact

Nearly a quarter (24%) had health problems because of their work

## Impact of Resource Drought

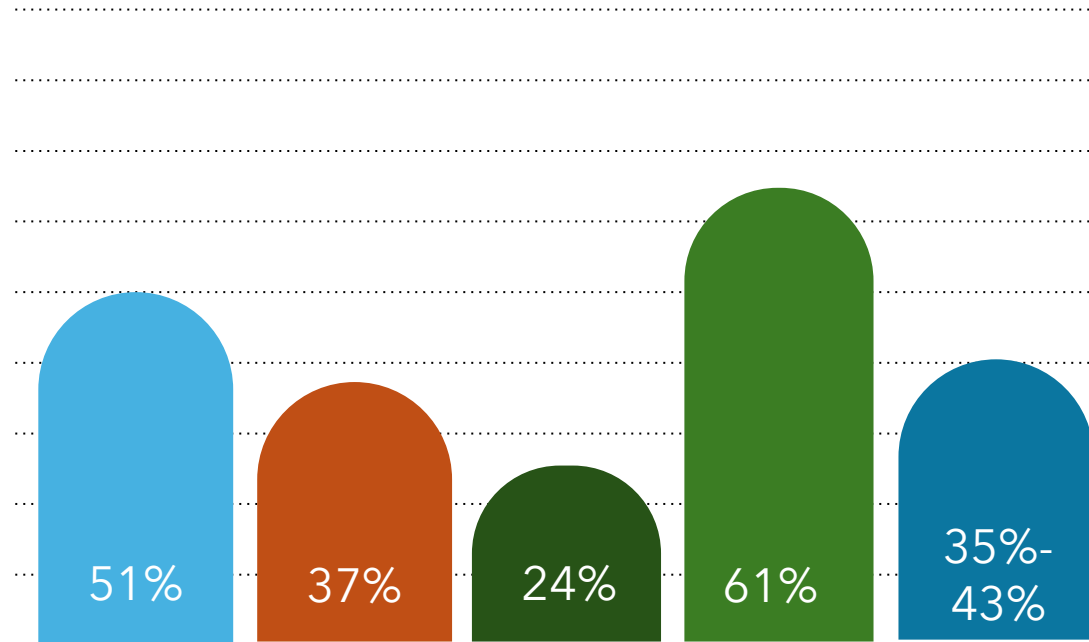
61% disagreed that their communities have the necessary resources to meet their clients' needs, with almost half (47%) naming lack of community resources as a significant barrier in their work

## Experiences of Burnout & Vicarious Trauma

More than 1 participant in 2 (51%) experienced burnout or vicarious trauma from their work

## Financial Impact

Over a third (35%-43%) are not paid enough to meet their financial needs, endure financial strain caused by student loans, and work more than one job to meet their financial needs



# Pay Inequity Impacts Participants' Professional Wellbeing

"A social work degree and clinical license are not considered equal to a clinical license as a nurse. We do the same exact job, but the nurses are paid in a different scale due to clinical license and skills."

"There is serious inequity across state agencies regarding educational and licensure requirements and pay. We are just as valuable as nurses and teachers."

- Many (42%) participants felt they were not equitably compensated for their skills and expertise as professionals
- More than a third (36%) reported their pay is not sufficient for their financial needs
- 37% worked more than one job to make ends meet
- Over 1 in 10 (11%) mentioned pay inequity as a significant barrier they face in their social work practice

# Racial/Ethnic Disparities

- Indigenous, First Peoples, First Nations, Alaska Native, American Indian, Native American, or specific Nation/Tribe/Pueblo respondents (39%) agreement with the statement "I experience discrimination at my organization," was higher than for White respondents (10%)
- The average agreement for biracial respondents (73%) was higher for the statement, "Student loans negatively impact my financial wellbeing," than for White respondents (40%)
- The average agreement for White respondents (46%) to the statement, "My pay is sufficient for my financial needs," was higher than for Latinx/Hispanic respondents (29%)

**Table 6.**  
**ANOVA for Dependent Variables**

<b>Item/Dependent Variables</b>	<b>df</b>	<b>MS</b>	<b>F</b>	<b>p*</b>
<b>I experience discrimination at my organization</b>	7	2.9	2.3	0.02
<b>Student loans negatively impact my financial wellbeing</b>	7	8.8	3.3	0.00
<b>My pay is fair and equitable</b>	7	3.6	2.4	0.02
<b>My pay is sufficient for my financial needs</b>	7	4	2.7	0.01
<b>I am equitably compensated for my skills and expertise</b>	7	3.8	2.5	0.02



## Recommendations

# Recommendations

- Grounded in findings from the Social Workers of New Mexico Survey, recent studies and reports addressing New Mexico's behavioral health workforce, and national research
- Not comprehensive but are intended to incite dialogue on policy and funding strategies that may lead to improvements for social workers statewide
- Some recommendations are in alignment with:
  - National Behavioral Health Workforce Survey (National Council for Mental Wellbeing, 2023)
  - Culturally Appropriate Social Services for New Mexico Students Study (Pacific Institute for Research and Evaluation, 2022)
  - New Mexico Health Care Workforce Committee 2023 Annual Report
  - LGBTQ Roundtable 2024 Draft Recommendations for Behavioral Health Improvement in New Mexico
- Recommendations also target HRSA's drivers for change in the healthcare landscape, including:
  - Workforce retention and expansion
  - Racial equity
  - Improved access to services
  - Geographic parity for rural communities



# Recommendation 1: Eliminate Racial/Ethnic Pay Disparities and Achieve Pay Equity for Social Workers

- Social workers are among the lowest paid professionals in the nation (Wilfong, 2024)
- Emerging research has documented pay disparities overall for social workers when compared to other health professionals with similar education (Lewis, 2018)
- Pay disparities for Black, Indigenous and Social Workers of Color are evidenced (Lewis, 2018) and are an emerging finding from the 2024 Social Workers of New Mexico Survey worthy of deeper analysis

## **Action Steps**

1. Promote policies that promote equitable insurance reimbursement rates and mandate equity analyses for publicly funded agencies and organizations employing social workers
2. Analyze racial disparities in student loan debt and fiscal impact of racial and gender bias in Association of Social Work Boards (ASWB) licensure examination pass rates for social workers practicing in New Mexico
3. Expand student loan forgiveness funds, not solely for clinical social workers, but also for community practice social workers, social work educators, and social workers serving in government agencies
4. Fully resource payments for practicum placements

# Recommendation 2: Invest in the Retention of New Mexico's Social Workers

- Lin and co-authors (2015) name turnover in social work positions as a significant driver of the social work workforce shortage
- The authors identified level of burnout, opportunities for professional development, support from supervisors and colleagues, and ability to achieve a work-life balance as factors that either mitigate or contribute to high turnover

## **Action Steps**

1. Resource organizations so they may provide “retention bonuses, hazard pay, and overtime” as strategies for preventing turnover (National Council for Mental Wellbeing, 2023)
2. Provide funding to organizations for tuition remission or professional development scholarships for all social workers to further their education or gain certification in a different type of social work practice, allowing them to remain in the profession
3. Mentor social workers and provide funding for training to serve in political positions at the local, county, state and federal levels

# Recommendation 3: Educate the Behavioral Health Workforce on the Roles of and Increase Funding for Peer Support and Community Health Workers

- Five percent (32) of social workers who replied to the survey were also certified peer support workers and an additional 6% (40) identified as community health workers
- Peer support and community health workers are vital contributors to the behavioral health workforce and key facilitators in increasing access and trustworthiness of behavioral healthcare for people who may not otherwise seek help (Manderscheid & Ward, 2024)

## **Action Steps**

1. Provide training for social workers on the skills, roles, professional codes of ethics, and specific supervision needs of peer support and community health workers
2. Encourage organizations to ensure that peers and community health workers have balanced, sustainable workloads, where peers are frequently employed in high acuity “frontline” work and compensated at lower rates than other behavioral health professionals
3. Increase funding to support their equitable compensation, including hazard pay

# Recommendation 4: Identify and Fund Innovations in Reducing Burnout and Vicarious Trauma

- Social workers are both skilled in and ethically compelled to practice professional self-care, but long waitlists, unsustainable workloads, increasing acuity of client needs, administrative demands, and organizational and community under-resourcing impede self-care and create conditions for vulnerability to burnout and vicarious trauma
- Strategies for preventing and addressing burnout and vicarious trauma are vitally necessary to retain our existing workforce

## **Action Steps**

1. Provide funding for social workers to take practice sabbaticals to focus on their health and wellbeing
2. Standards for caseload sizes could also be codified to support more sustainable workloads
3. Provide funding to organizations and state agencies to allow for time away from work for worker wellbeing activities, such as a limited set of hours per week for exercise, massage therapy or acupuncture
4. Increase funding for LCSW and LISWs to provide high-quality supervision to early career social workers that attends to the risk for vicarious trauma and other factors influencing social workers' wellbeing

# Recommendation 5: Fully Fund General Operations for Community-Based Organizations

- The National Council for Mental Wellbeing (2023) states a third of the workforce invests most of their time in completing administrative tasks
- Social Workers of New Mexico Survey participants affirmed that administrative tasks, particularly documentation and billing for insurances, represents a significant barrier they face in their work

## **Action Steps:**

1. Fully funding positions to assist with intake coordination, case management, daily operations and billing tasks would not only increase time for social workers to serve their clients but reduce their overall stress
2. Adequately resource clinicians so they can provide and seek supervision, complete their documentation and other administrative tasks without sacrificing time for client care

# Recommendation 6: Fund Policy and Feasibility Research Addressing the Social Work Interstate Licensing Compact and Alternative Pathways for Social Work Licensure

- Arguably two of the most pressing topics impacting the social work workforce today are the Social Work Interstate Licensing Compact, a movement nationally for states to form compacts that would allow social workers to serve clients in all member states without seeking licensure from each state, and the state-level development of alternative pathways to obtaining social work licensure in light of the findings of ASWB testing bias
- Each of these movements is nuanced, has workforce implications, and requires deeper analysis to determine the feasibility of their implementation in New Mexico

## **Action Steps:**

- Fund a robust policy and feasibility study over a period of a year to provide policy makers with information on the fiscal impact and practice implications if each of these were adopted in New Mexico
- Specifically, the Social Work Interstate Licensing Compact should be assessed for its impact on culturally and linguistically competent social work service provision and service accessibility for people who are Medicaid recipients in our state

# Thank You and Contact Information

- Thank you! We are here to answer your questions.
- We can be reached at:
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