



Estimating Our Behavioral Health Workforce Needs

February 20, 2023
Assembly Health Committee
Informational Hearing: Diversity in California's Health Care Workforce



WHO WE ARE

OUR MISSION Transforming California's mental health and substance use care systems through education, advocacy, accountability, and inspired leadership.

OUR VISION California sets the standards for the nation in prevention, treatment and recovery; where all people receive quality care and support when, where, and for as long as they need it.



THE WORKFORCE MODEL

- Estimates current demand and workforce, and a 10-year estimate of future hiring need across the county continuum.
- Allows us to look at occupation specific needs, as well as hiring needs because of growth in demand as well as attrition rates specific to occupations.
- Data is based on:
 - Federal Bureau of Labor statistics at county or regional level on job types and levels of attrition (retirement, leaving the workforce) regardless of public, private or non-profit entity.
 - Unmet needs are based on regional data available from SAMHSA
 - County data is mapped to MSA and regions to create a county profile weighted to each county
 - County data on population growth, labor participation rate, and educational levels



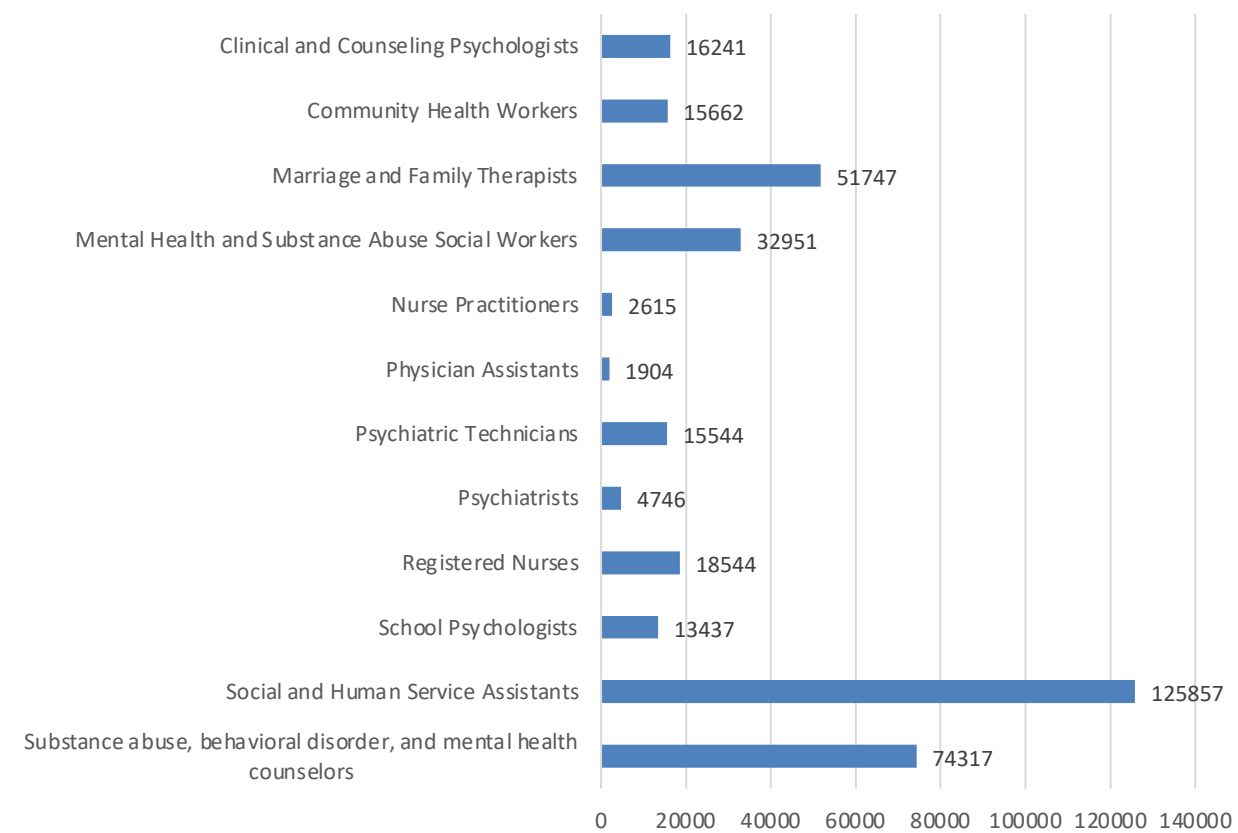
USING THE MODEL

State needs to add 373,565 people to meet current unmet need, attrition, and demand growth over 10 years, or around 32,000 people per year across the system of care and professions.

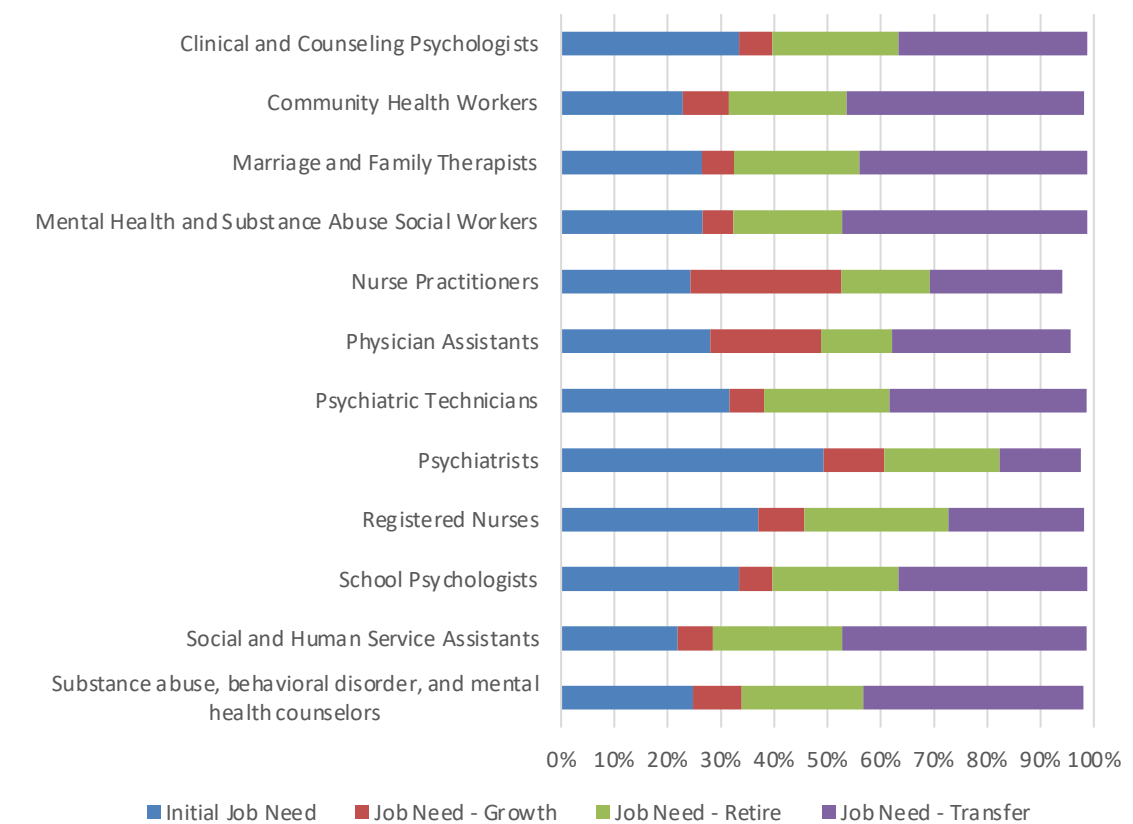


JOB-SPECIFIC DYNAMICS ARE DRIVING LONG-TERM NEED

California Cumulative BH Job Need, 2030



California Cumulative BH Job Need by Type, 2030



OPPORTUNITIES TO DIVERSIFY OUR BH WORKFORCE

SHORT-TERM

Invest in professions that are already more diverse. (Ex. Community Health Workers, Peers, SUD Counselors)

LONG-TERM

Address systemic barriers to create a diverse pipeline to fill gaps as professionals retire. (Ex. Psychiatrists, Psychologists, MFTs)

