

# **MENTAL HEALTH COUNSELING IN OREGON:**

## **STRATEGIES, BARRIERS, & OPPORTUNITIES IN EDUCATION/TRAINING & LICENSING/CREDENTIALING**

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# AGENDA

- Positionality & Defining Mental Health Counselors
- Barriers
- Strategies
- Opportunities
- It's all Connected
- Question & Answer



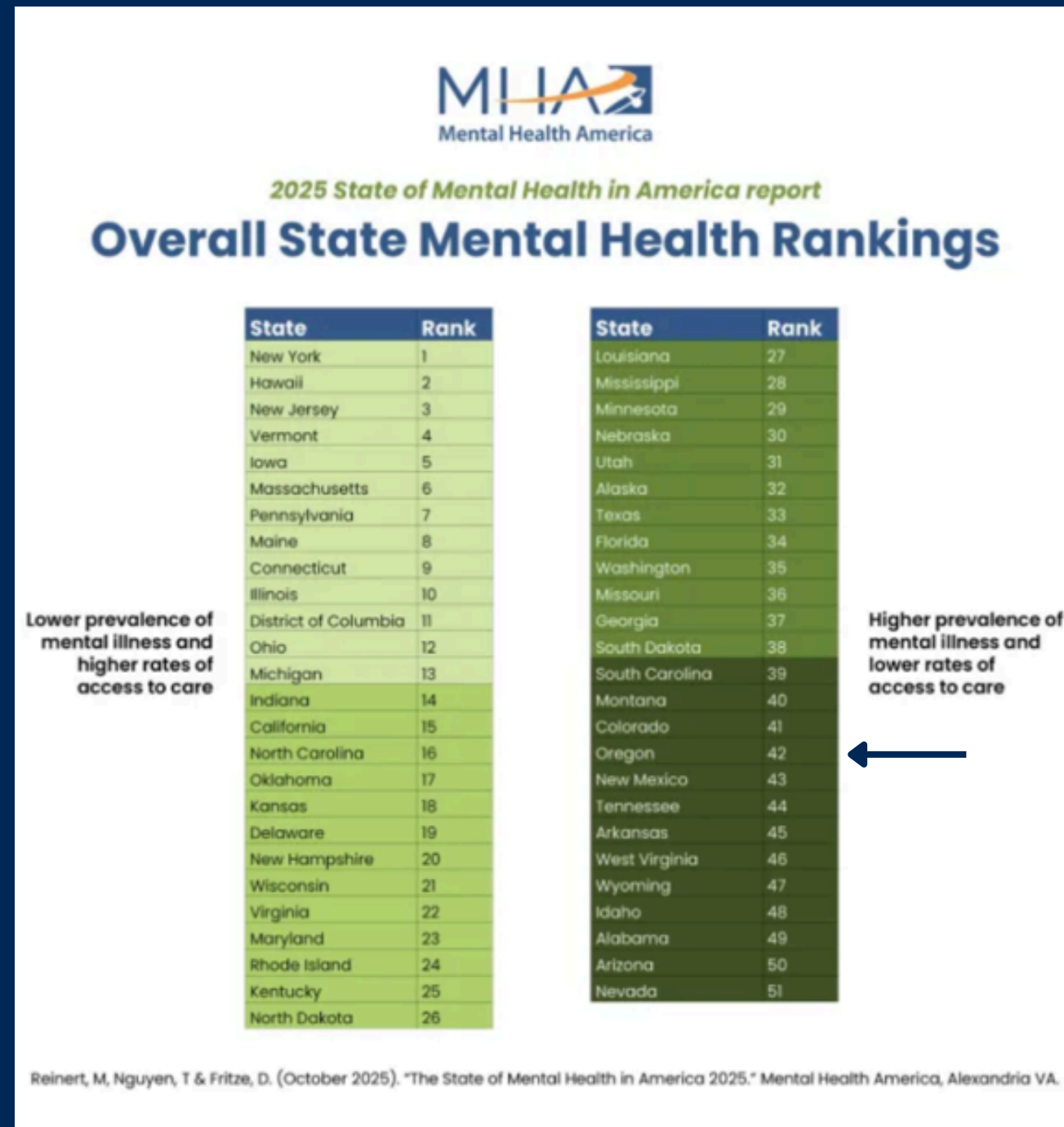
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# POSITIONALITY

- Licensed Mental Health Counselor and Qualified Supervisor in Florida
- Previously licensed in Louisiana and Texas
- Worked in mental health for 20 years, 15 in academia
- Director of the CMHC Program at EOU for three years
- Outsider perspective with on the ground learning experience from students, instructors, consultants, local MH providers, and community agencies
- Opinions and ideas shared were resourced through my own and others experiences

Mental Health Counselors: QMHA, QMHPs, LPCs, LCSWs & cross over with CADCs & other specialities

# BARRIERS



[Mental Health America CNN Article](#)

- Assuming degree requirements are equal in preparation for working with clients across mental health settings (QMHA)
- Cost of training, education, testing, & registration fees
- State requirements increasing barriers such as Oregon Administrative Rules 409-030-0100 (Masters CMHC & Social Work students)
- Lack of qualified supervisors at all levels

# STRATEGIES

- “Grow your own” model, pulling people from the underserved community to fill the gaps
- Building a sustainable pipeline of all levels of MH professionals
  - Opportunity for upward mobility and earning potential
  - Create a stable supervision structure
  - Decrease burnout
- Streamlining curriculums for QMHA for greater portability from one job to another
- Add to existing structures to address high needs specialty areas
- Integrating state level certifications with licensure board processes

# OPPORTUNITIES!

- Learner centered approaches:
  - User friendly pipeline in mental health careers with clear stopping points and pros/cons
  - Easy to navigate systems: websites, education
  - Continuing to support mental health workforce through accessible & affordable education from associate to graduate school
- Resource sharing:
  - Equitable distribution of resources and incentives for providers in under served areas
- Supervision continuum: supporting supervisors at all levels
- Increasing access for clients: greater ease of access for independent practitioners to treat clients on state insurance

# IT'S ALL CONNECTED

## Opportunities

Learner/User friendly pipeline

Support for continued education

Support for supervisors

Equitable resources & incentives for underserved areas

Ease of onboarding independent professionals to address provider shortage

## Strategies

Streamline curriculums

Use existing structures to address deficits

Grow your own MHC sustainable pipeline

Address state barriers

Integrating state credential and professional credentialing process

## Barriers

Degree requirements for QMHAs

Cost of training, education, testing, & registration fees

State requirements as barriers

Lack of qualified supervisors

Client access



# QUESTIONS OR THOUGHTS?

## THANK YOU FOR YOUR TIME!

### CONTACT INFORMATION



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