



**CONNECT  
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May 2, 2023

Massimiliano Disposti  
Board of Behavioral Sciences  
1625 N Market Blvd., Suite S-200  
Sacramento, CA 95834

**RE: SB 766; CAMFT's Position of Oppose Unless Amended**

Dear Chair Disposti and Board:

On behalf of the over 35,000 members of the California Association of Marriage and Family Therapists (CAMFT) we are asking the Board of Behavioral Sciences (BBS) to vote for an Oppose Unless Amended position on SB 766 if marriage and family therapists or professional clinical counselors are not amended out. In the alternative, we are asking the BBS to take a neutral position.

CAMFT is extremely concerned that SB 766 will result in job losses to psychotherapists throughout California as well as decreased access to behavioral health care at a time where our state's mental health infrastructure is struggling to recruit and retain a qualified behavioral health workforce.

Below, we briefly outline some of CAMFT concerns:

- The term "social worker" is a common term used throughout California
- There is no consumer harm or public crisis being solved
- Unclear enforcement and disciplinary action implementation

Protecting/Trademarking Common Nomenclature, Ownership of a Descriptor

Currently the titles of Licensed Clinical *Social Worker* (LCSW), Licensed Professional Clinical *Counselor* (LPCC), and Licensed Marriage and Family *Therapist* (LMFT), are protected by statute. It is the licensure that designates and protects the titles.

What this bill does, instead, is essentially trademark a common term and word used throughout California in thousands, if not tens of thousands, of behavioral health jobs. Over the last five plus decades, the term "social worker" has become immersed in California's mental health and social services infrastructure and has come to be a casual and common term attached to

various positions of varying levels and skills. This is also true of the term “therapist” and “counselor.”

CAMFT has had hundreds and hundreds of members reaching out expressing concern for their position of “social worker” within their work setting. These are a few examples, we pulled from our members who have reached out to CAMFT:

- Riverside County there is a “*Psychiatric Social Worker*” hospital position filled by an MFT
- Los Angeles County there is a “*School Social Worker*” high school position filled by an MFT
- San Diego County there is a “*Lead Social Worker*” group home for foster youth position filled by an MFT
- Mariposa County there is a “*Social Worker Supervisor II*” small rural mental health agency position filled by an MFT

As stated above, the reverse is true for the common terms of “therapist” and “counselor”:

- El Dorado County, there is a “*Family Therapist*” position within a rehabilitation center open to LCSWs and LPCCs
- San Diego County, there is a “*Psychosocial Counselor*” position open to LCSWs and LMFTs
- Napa County, there is a “*Mental Health Counselor*” position open to LCSWs, LMFTs and Psychologists.

Employers regularly utilize these general descriptors to place qualified clinicians in jobs. Just as LMFTs do not own the term “therapist,” nor do LPCC’s own the term “counselor,” we contend that LCSWs do not own the term “social worker.”

Does the protection of the term “social worker” commit to the protection of the term “therapist” for LMFTs and “counselor” for LPCCs?

#### What Consumer Protection Problem Is this Bill Fixing?

CAMFT does not understand the consumer protection or greater societal good this bill is solving. This cultural occurrence in California where the term “social worker” has become a common term does not appear to have caused a direct (or known indirect) public harm or public crisis simply by virtue of the title being used generically. As mentioned above, this is a common happenstance within the mental health field, as shown through the “counselor” and “therapist” terms being used in various generic positions.

The dilemma is that this bill does not fix any consumer protection problem; in fact, it creates one through LMFT and LPCC job loss and decreased patient access to mental health care.

### Enforcement and Actions Against Providers

Based on our research to date, CAMFT believes it is highly unlikely that thousands of entities will adequately transition away from decades of cultural norms in the timeframe provided and/or with the ease relied upon. Therefore, it is believed that violation of SB 766 is almost a certainty.

It is unclear what role the BBS plays in the investigation, and enforcement of violations under SB 766. How would the BBS know of such violations? Is the investigation and enforcement directed at the supervising employer, supervisor and/or employee with the given title? Would the BBS also be tasked with violations by non-regulated providers (i.e., “social workers” with only a BA degree)? What disciplinary actions would be utilized (under SB 766, 4996.12 allows for fines and jail-time) or would regulation be created to include unprofessional conduct or advertising violations?

The enforcement and disciplinary action mandates are very unclear and vague causing even greater alarm to CAMFT.

For the reasons stated above, CAMFT is asking the BBS to vote for an “Oppose Unless Amended” position if LMFTs and LPCCs are not exempted from SB 766.

Sincerely,

A handwritten signature in black ink, appearing to read 'JA', with a long horizontal flourish extending to the right.

Joy Alafia, MBA, CAE  
Executive Director  
California Association of Marriage and Family Therapists

Cc: California Association for Licensed Professional Clinical Counselors