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## Development of Strategies to Work with Youth and Others to Support Careers in Mental Health



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## Introduction

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COVID dramatically changed perceptions about mental health. Individuals who did not pay attention to mental health issues or did not talk about it were suddenly facing issues of isolation, anxiety, grief, trauma and depression. At the height of COVID, over 50% of individuals in the United States said they suffered with a mental health issue. If you add family members and close friends, there is no doubt that it impacted virtually the entire population.

People that have been hardest hit have been our young people. During COVID, 44% of young people felt sad or hopeless. In response to that need, Governor Hochul became the first Governor in New York's history to lead an entire summit on Youth Mental Health. She brought together some of the top minds in New York and across the national to address the need.

Simultaneously, we also face a crisis with the behavioral health workforce that is under tremendous strain with record turnover and vacancy rates. The results are an inability to recruit and retain quality staff to work with many individuals with mental health concerns especially those with complex needs. If we want to eliminate the workforce crisis in mental health in future years, we need to be pro-active and provide support for individuals who want careers in mental health services and also attract those who may be interested in the mental health field in the future.

Between the growing recognition of mental health issues, the workforce concerns and the youth mental health crisis, we have a perfect storm of need in our community. In this series of recommendations, we discuss strategies that would ensure the next generation of young people can develop and have fulfilling careers in the mental health field.

Recognizing that no one strategy alone will address the various issues that led us to this mental health crisis, but rather, a multi-point plan is critical to its success. Below are recommendations aimed at attracting and supporting people in all walks of life as they become committed to rewarding careers in mental health.

## Recommendations

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### **1) Highlight and Amplify the Significance of the New York State Office of Mental Health (NYSOMH) Qualified Mental Health Associate (QMHA) Title**

The QMHA title was proposed in order to provide a career ladder for individuals who enter the field of mental health as paraprofessionals. There are several examples across the health care landscape of the success of creating career ladders for paraprofessionals. Nursing has Certified Nursing Assistants (CMA's), Addiction Disorders has Credentialed Alcoholism and Substance Abuse Counselors (CASACs) and Developmental Disabilities has Direct Support Professionals (DSPs). Many individuals that started careers in these fields as paraprofessionals have moved up the career ladder to higher level roles.

Mental Health providers need to have their own job title for paraprofessionals in order to enhance the pool of workers.

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The 2023-24 New York State Executive Budget did not include the QMHA title. There was concerns voiced by the professional agencies about scope of practice issues for QMHAs. We are working with the NYSOMH to insure that services provided by QMHAs would not infringe with issues of licensure for clinicians.

MHANYS is being pro-active on this issue by engaging in conversation with NYSOMH to help develop a training curriculum and credentialing process for QMHAs. Ideas are being explored such as micro-credentialing and core-competencies for the QMHA job title.

## **2) Identify Mental Health Core Competencies for Direct Care Workers**

SUNY has developed a partnership with OPWDD to develop core competencies for the Direct Support Professional Title in IDD. These core competencies serve as micro-credentials for DSPs. After a DSP passes each core competency, he or she receive a badge which provides them with a one-time bonus. The Core Competencies are universal and not just applicable to OPWDD.

We urge the NYSOMH to pursue the core competencies for mental health. It would serve as an incentive to the over 35,000 direct care workers in OMH in helping them to achieve bonus payments for learning core competencies which also provides them with skills that will help provide them with steps to move up the career ladder.

## **3) Create Workforce Training Curriculum in Mental Health**

One of the major structural issues in regard to mental health is that there is a limited training curriculum in place for direct care mental health workers. The workforce crisis has made it difficult to provide any kind of mental health training for individuals entering the field. Many people are ill-equipped and unaware of the basic needs of individuals with complex and sometimes traumatic histories.

There are pockets of individuals who could enter our field whether from a newly trained immigrant population, QMHA's or young people that are mission driven to serve in community mental health. We need to develop a training curriculum that will provide the incoming mental health workforce with the skill sets necessary to start careers in mental health.

## **4) Develop a Mental Health Workforce Center within MHANYS**

This Center will have a website dedicated to individuals with interests in careers in mental health. Whether you are in high school, community college, trade school or a four-year college, this site will provide instruction on where you can get information about pursuing careers in mental health. We will identify all existing opportunities around internships and mentorships.

We would create a part of the site that addresses and provides resources for youth pursuing careers in communities of color, LBGTWQ Community and other diverse communities. In addition, we would create an interactive component where peers and others can share their personal experiences in developing a career in mental health.

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MHANYS Teen Mental Health First Aid program would link interested teens who have completed the training to serve as mentors for other young people.

In addition, we would develop 'Work Perks'. The work perks would identify existing statewide programs that could be used by agencies to incentivize agencies to hire individuals with interest in careers in mental health (e.g.---Tax credits, tuition reimbursements, links to scholarship opportunities, internships, etc.).

### **5) Propose MHANYS College Legislation and Funding**

The recent legal settlement agreement at Yale University paves the way for schools to develop policies and procedures and mental health trainings to respond to students who were discriminated against due to mental health concerns. MHANYS has introduced legislation that will provide training, mental health education and literacy and enhance policies and procedures to ensure that colleges and universities are in compliance with mental health standards to avoid discriminatory practices.

In addition, MHANYS has a funding proposal to work with colleges and universities to help them achieve compliance with policy changes in regard to student leaves of absences due to mental health issues while also providing training and education of the college workforce around mental health support, literacy and understanding

### **6) Develop a PSA Campaign to Recruit a Diverse Workforce**

High Schools are ideal places to develop a PSA campaign for individuals thinking about careers in mental health. Resources should be identified (through the NYS OMH Anti Stigma Funds and other programs) that would help fund a PSA campaign. In addition, there should be a social media campaign designed to influence young people to pursue careers in mental health.

### **7) Enhance Role of Community Colleges in Mental Health**

While a few colleges have developed a career track in mental health, it has not been consistent and frankly given the lack of options currently available to non-clinical individuals in the field, the existing programs can prepare you for a four-year degree but there are few Associate Degrees that will lead you to a career in mental health.

Developing at two-year track (or micro credential) that will lead to a career ladder in the mental health field will serve as a huge incentive both in community and state operated programs.

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## Conclusion

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From whatever walk of life you come from, the mental health workforce is there to engage and work to help fulfill and support the recovery and independence of people with mental health concerns. Despite their incredible efforts, they are often undercompensated for their work. Given funding concerns, many agencies don't have career ladders so workers have no room for growth. The combination of the complexity of the work, the undercompensating and lack of room for growth leads to burnout and turnover.

That said, there is hope on the horizon. Governor Hochul and the New York State Office of Mental Health have spent resources to address mental health concerns in our state. The greater emphasis around public support for mental health is helping to reduce the stigma in talking about mental health and in providing supports in schools and helps to bring the discussion of the future of mental health workforce possible. This lessening of stigma can help young people foster careers in mental health.

The time is ripe to being to implement the recommendations provided by MHANYS in providing opportunities for the next generation of mental health workers.

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