

TITLE: Exploring Individual, Organizational, and System-Level Factors Influencing the Behavioral Health Workforce Shortage in Oregon: A Qualitative Study

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STUDENT SUBMISSION: No

TOPIC/TARGET AUDIENCE: Behavioral health policy makers, behavioral health system administrators, community behavioral health programs

ABSTRACT: Background: Oregon is experiencing a behavioral health (BH) workforce crisis, as demand for services increases. Understanding factors influencing the workforce shortage is critical for informing public policies that improve access to care. Purpose: To understand individual, organizational, and system-level factors that contribute to BH workforce turnover and retention in the Oregon public BH system. Methods: We conducted semi-structured qualitative interviews with 24 BH care providers, administrators, and academics with knowledge of Oregon's public BH system. Interviews were professionally transcribed and iteratively coded to reach consensus on emerging themes. Results: Interviewees described system-level challenges around chronic underfunding in the context of enduring bias and stigma, and high administrative/regulatory burden. Organizations are constrained by limited financial capacity and infrastructure, leading to low wages, fragmented policies, and insufficient employee support. Individuals reported struggling with high debt burden from education relative to wages. In addition, large caseloads, high patient acuity, and documentation requirements contributed to a challenging work environment where workers felt undervalued and unfulfilled. Implications: This study provides a nuanced understanding of how BH professionals are personally affected by systemic underinvestment. Policies to improve workforce shortages should address the effects that inadequate financial and workplace support have on BH professionals' daily work environment.

OBJECTIVE(S): Identify individual, organizational, and system-level factors contributing to the behavioral health workforce shortage in Oregon. Describe how individual experiences in the work environment affect behavioral health workforce turnover and retention.
