



Behavioral Health Workforce Projections, 2016-2030: Clinical, Counseling and School Psychologists

This factsheet presents national-level supply and demand projections for clinical, counseling, and school psychologists from 2016 through 2030, using HRSA's Health Workforce Simulation Model (HWSM).¹ While the nuances of modeling workforce supply and demand differ for individual health occupations, the basic framework remains the same across provider types. For supply modeling, the major components include: common labor-market factors like unemployment; demographic and geographic characteristics of the existing workforce in a given occupation; new entrants to the workforce (e.g., newly trained psychologists); and workforce participation decisions (e.g., patterns in retirement and hours worked). For patient demand modeling, the HWSM assumes that demand equals supply in 2016,² and that the major components of patient demand include population demographics; health care use patterns; and demand for health care services (translated into requirements for full-time equivalents or FTEs).

About the National Center for Health Workforce Analysis

The National Center for Health Workforce Analysis informs public and private sector decision-makers on health workforce issues by expanding and improving health workforce data, disseminating workforce data to the public, and improving and updating projections of the supply and demand for health workers. Visit the website: <https://bhw.hrsa.gov/national-center-health-workforce-analysis>

In terms of limitations, this HWSM assumes that over the period studied, current national patterns of labor supply and service demand remain unchanged within each demographic group. Thus, changes in health care utilization patterns may affect projected demand in future years. Similarly, advances in medicine and technology and shifts in health care delivery models (e.g., team-based care, telemedicine) may also affect the efficiency of service delivery, and consequently, how provider supply is best assessed. These projections do not account for the geographic distribution of providers, which can impact access to care. HRSA will consider incorporating such factors into its future workforce projections as the evidence base evolves.

Consistent with the feedback of the American Psychological Association (APA),³ supply reported in this study reflects doctorate-level psychologists only, whereas the previous HRSA study⁴ included both masters-level and doctorate-level psychologists. The supply projections start with counts of licensed psychologists in each state reflecting efforts by the APA to obtain and de-duplicate licensure data. Furthermore, estimates of licensed psychologists were scaled down to estimates of actively practicing psychologists using labor

¹ This model uses a micro-simulation approach where supply is projected based on the simulation of career choices of individual health workers.

Demand for health care services is simulated for a representative sample of the current and future U.S. population based on each person's demographic and socioeconomic characteristics, health behavior, and health risk factors that affect health care utilization patterns. For more information on data and methods, please see: <https://bhw.hrsa.gov/sites/default/files/bhw/nchwa/projections/hwsm-technical-report-to-dea.pdf>

² The assumption that supply equals demand at baseline is a standard approach in workforce projection modelling. Please refer to: Ono T, LaFortune G, Schoenstein M. "Health workforce planning in OECD countries: a review of 26 projection models from 18 countries." *OECD Health Working Papers*, No. 62. France: OECD Publishing; 2013: 8-11.

³ The APA indicates that most states require a doctoral degree to practice as a psychologist (with psychologists trained at the master's level generally practicing as counselors). American Psychological Association. 2005-13: Demographics of the U.S. Psychology Workforce. Access 7/27/2018: <http://www.apa.org/workforce/publications/13-demographics/index.aspx>

⁴ U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. National Projections of Supply and Demand for Selected Behavioral Health Practitioners: 2013-2025. Rockville, MD: U.S. Department of Health and Human Services, 2016. Available from: <https://bhw.hrsa.gov/sites/default/files/bhw/health-workforce-analysis/research/projections/behavioral-health2013-2025.pdf>

force participation rates obtained from analysis of the APA's 2015 Survey of Psychology Health Service Providers.⁵

The following two scenarios are simulated: **Scenario One** assumed supply and demand were in equilibrium in 2016, and **Scenario Two** adjusted current and projected demand based on estimates of unmet need from recent studies. HRSA recognizes the challenges with estimating demand and unmet need for behavioral health services. More information and a detailed explanation of how unmet need was estimated in our workforce model can be found in our technical documentation.⁶

BACKGROUND

Practicing psychologists assess, diagnose, and treat mental disorders and learning disabilities, as well as cognitive, behavioral, and emotional problems. They may also be scientists researching these disorders. These providers help people deal with a range of problems, from short-term personal issues to severe, chronic conditions.^{7,8} A doctoral degree is required for clinical and counseling psychologists. However, some school psychologists may have a masters or doctorate degree in school psychology. All states require psychologists who practice independently be licensed by the state or jurisdiction in which they practice.⁹

FINDINGS

At the national level, approximately 92,990 psychologists were active in the U.S. workforce in 2016 (*Exhibit 1*). By 2030, the supply of psychologists is expected to increase by approximately 13 percent given the number of psychologists entering, leaving, and changing work hours. Under Scenario One, the demand for psychologists is expected to increase by 7 percent to 99,090 FTEs by 2030. Population growth and aging accounted for the increase in demand; however, supply is projected to grow faster resulting in a small surplus of 5,530 FTE psychologists. Under Scenario Two, which adjusts for the 20 percent of reported unmet need due to barriers in receiving care, demand is projected to increase by approximately 7 percent to 118,920 FTEs. Therefore this scenario produces an estimated shortage of 14,300 FTE psychologists. Demand for psychologists in health care is also expected to increase as behavioral health is increasingly integrated with primary care, but the estimates do not account for this movement in the health care delivery system.

⁵ American Psychological Association. 2015. Survey of Psychology Health Service Providers. Accessed 7/2/2018 <http://www.apa.org/workforce/publications/15-health-service-providers/index.aspx>

⁶ U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. Technical Documentation for HRSA's Health Workforce Simulation Model. Rockville, MD: U.S. Department of Health and Human Services, 2018. Available from: <https://bhwh.hrsa.gov/sites/default/files/bhw/nchwa/projections/hwsm-technical-report-to-dea.pdf>.

⁷ U.S. Department of Labor, Bureau of Labor Statistics. *Occupational Outlook Handbook, 2014-15 Edition*, Psychologists. Accessed 5/6/2016: <http://www.bls.gov/ooh/life-physical-and-social-science/psychologists.htm>.

⁸ American Psychological Association. 2015. What do Practicing Psychologists Do? Accessed 5/6/2016: <http://www.apa.org/helpcenter/about-psychologists.aspx>.

⁹ University of Michigan, Scopes of Practice for Behavioral Health Professionals. Accessed 7/27/2018: <http://www.behavioralhealthworkforce.org/practice-data-visualizations>.

Exhibit 1. Estimated Supply of and Demand for Psychologists in the United States, 2016-2030

	Scenario One (Assumes equilibrium)	Scenario Two (Assumes unmet need)
Supply		
Estimated supply, 2016	92,990	92,990
Estimated supply growth, 2016-2030:	11,630 (13%)	11,630 (13%)
<i>New entrants</i>	51,730	51,730
<i>Attrition^a</i>	-40,370	-40,370
<i>Changing work patterns^b</i>	270	270
Projected supply, 2030	104,620	104,620
Demand		
Estimated demand, 2016	92,990	111,580
Estimated demand growth, 2016-2030 ^c	6,100 (7%)	7,340 (7%)
Projected demand, 2030	99,090	118,920
Projected Supply (minus) demand^d	5,530	-14,300

Notes: All numbers reflect full time equivalents. Numbers may not sum to totals due to rounding.

^a Includes retirements and mortality.

^b For example, changes from full-time to part-time, or vice versa.

^c Demand growth reflects changing demographics.

^d The demand for psychologists may lag behind supply due to projection models' use of current utilization patterns as the basis for future projections. This pattern of utilization may be due to lack of access to behavioral health care.