

Health Workforce Projections: Psychologists

KEY FINDINGS

Between 2012 and 2025:

- The psychologist supply is projected to decline by 900 psychologists.
- The demand for psychologists is projected to grow by 10 percent.

This fact sheet presents the national supply of and demand for psychologists for 2012 through 2025 using HRSA’s Health Workforce Simulation Model (HWSM).¹ While the nuances of modeling supply and demand differ for individual health professions, the basic framework remains the same. The HWSM assumes that demand equals supply in the base year. For supply modeling, the major components (beyond common labor-market factors such as unemployment) include characteristics of the existing workforce in a given occupation, new entrants to the workforce (e.g., newly trained workers), and workforce decisions (e.g., retirement and hours worked patterns). For demand modeling, the major components include population demographics, health care use patterns (including the influence of the Affordable Care Act health care coverage), and demand for health care providers (translated into Full-Time Equivalents). Over the period studied, the model assumes that current national patterns of labor supplied and services demanded remain unchanged within each demographic group.² These projections do not account for the geographical distribution of providers which may impact access to care in certain communities.

BACKGROUND

Psychologists traditionally treat patients with mental and emotional problems, but they also serve as scientists researching the phenomenon of human behavior. In particular, they concentrate on behaviors that affect the mental and emotional health, and mental functioning of people. A doctoral degree is typically required for most clinical, counseling, and research psychologists. Although licensing laws for psychologists vary by state and type of position, most states require some form of licensure or certification. All states require psychologists who practice independently to be licensed. Psychologists’ typical employment settings include clinics, hospitals, rehabilitation facilities, and community and mental health centers.

FINDINGS

Analysis of the American Community Survey data suggests approximately 188,300 psychologists were in active practice in 2012, with nearly one-third self-employed. About a third (31 percent) worked in educational services, and about 30 percent worked in health care and social assistance.

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-related behavior, and health risk factors that affect their health care utilization patterns. For more information on data and methods, please see [BHW HRSA Health Workforce Supply and Demand Simulation Model](#).

² 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.

Between 2012 and 2025, the supply of psychologists appears to be declining slightly by about 900 individuals (Exhibit 1).

Exhibit 1. Estimated Supply and Demand for Psychologists in the U.S., 2012 – 2025

	Psychologists
Supply	
Estimated supply, 2012	188,300
Total supply growth, 2012-2025:	(900) (0%)
New entrants	74,670
Changing work patterns (e.g., part time to full time hours)	(1,810)
Attrition (e.g., retirements, mortality)	(73,760)
Projected supply, 2025	187,400
Demand	
Estimated demand, 2012	188,300
Total demand growth, 2012-2025:	19,700
Changing demographics impact	17,300
ACA insurance coverage impact	2,400
Projected demand, 2025	208,000
Adequacy of supply, 2025	
Projected supply (minus) projected demand	(20,600)

Between 2012 and 2025, the demand for psychologists is projected to grow by 10 percent. Demand for psychologists in health care is expected to increase as behavioral and mental health is increasingly integrated with primary care. Historically, many health insurance plans have provided less coverage for mental health services compared to physical health services. The Affordable Care Act includes mental health and substance abuse treatment among its 10 “essential” benefits, which means that health plans offered in the individual and small group markets, both inside and outside of the Health Insurance Marketplace, must offer a comprehensive package of items and services which may further increase demand for services. This is accounted for in estimates shown above. The estimates do not account for the movement in the health care system towards more integrated care, where primary care providers work in team settings with psychiatrists, social workers and other mental health care professionals to provide comprehensive, interdisciplinary care, including treating mental and behavioral health issues.³ Findings from the HWSM suggest that between 2012 and 2025 the nation’s projected supply of psychologists will fall short of demand.

[About the National Center for Health Workforce Analysis](#)

The National Center for Health Workforce Analysis informs public and private-sector decision-making related to the health workforce 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. For more information about the National Center for Health Workforce Analysis please visit our website at bhw.hrsa.gov/healthworkforce/.

³ SAMHSA Primary care in behavioral health: primary and behavioral health care integration grantees. Available at <http://www.integration.samhsa.gov/integrated-care-models/primary-care-in-behavioral-health#pbhci> grantees. Accessed February 2, 2015