



New Workforce Entrants for Selected Behavioral Health Occupations, 2016-2021

This factsheet presents national-level estimates of expected new workforce entrants for selected behavioral health occupations in a 5-year period, from 2016 to 2021. Along with other HRSA reports and factsheets that provide Behavioral Health Workforce projections, this factsheet aims to provide information on trends within the mental health and substance use disorder provider workforce. The number of entrants into an occupation is just one variable affecting overall workforce supply, albeit an important area in which key stakeholders have expressed interest.¹ Other workforce supply factors (e.g. attrition) are factored into the supply estimates of behavioral health providers presented in other National Center for Health Workforce Analysis reports and factsheets.

The estimates of new entrants presented here and in the concurrently released Behavioral Health Workforce projections assume that current behavioral health workforce entrance patterns remain unchanged throughout the 5-year projection period. However, individuals' career choices – and factors affecting health workforce supply and demand in general – may fluctuate due to dynamic factors such as changes in healthcare utilization patterns, advances in medicine and technology, and shifts in health care delivery models. HRSA will consider incorporating such variables into its future estimates of new entrants and its projections of workforce supply and demand as the evidence-base around these factors evolves.

BACKGROUND

Behavioral health care is an umbrella term for care that addresses any behavioral health issue, including mental health and substance use disorder conditions, stress-linked physical symptoms, patient activation and health behaviors. The occupations estimated in this brief include psychiatrists (including child and adolescent psychiatrists), psychiatric nurse practitioners (NPs), psychiatric physician assistants (PAs), psychologists,² addiction counselors, mental health counselors, school counselors, social workers,³ and marriage and family therapists.⁴ Note that psychiatric technicians and psychiatric aides are not included as they rely more on on-the-job training, which does not produce graduation data required to estimate new

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>

¹ 21st Century Cures Act, <https://www.congress.gov/bill/114th-congress/house-bill/34/text>

² The previous modeling work, [National Projections of Supply and Demand for Selected Behavioral Health Practitioners: 2013-2025](#), included psychologists trained at both the master's level and the doctoral level, whereas this updated study includes only psychologists trained at the doctoral level. This change in modeling assumptions is based on feedback from the American Psychological Association (APA) that most states require a doctoral degree to practice as a psychologist (with psychologists trained at the master's level generally practicing as counselors).

³ Due to data limitations, this study models supply and demand for all social workers trained at the master's level or higher—a broader scope than just mental health and substance abuse social workers alone. All states require mental health and substance abuse social workers to be licensed—which requires a master's degree in social work, two years or 3,000 hours of supervised clinical experience, and passage of a licensing exam. Also, almost all social workers at this educational level are providing services to support individuals and families with social and psychological issues.

⁴ Due to data limitations, estimates were not provided for psychiatric aides and technicians.

entrants to an occupation. Further information on the estimation method may be found in the technical report.⁵

FINDINGS

At the national level, the number of individuals expected to enter the behavioral health workforce over the 5-year period from 2016-2021 is 276,400 for the select behavioral health occupations presented here. Social workers account for approximately half of the new entrants (136,000). Other large entrant groups include school counselors (56,600) and mental health counselors (26,300). Among the estimated 5,400 new psychiatrists, 37% are child and adolescent psychiatrists (2,000). The number of new entrants for psychiatric NPs and psychiatric PAs are 3,500 and 500, respectively.

Exhibit 1. Estimated New Entrants to Behavioral Health Workforce in the United States, 2016-2021

Occupation	New Entrants 2016-2021
All Psychiatrists	5,400
<i>(Adult) Psychiatrists</i>	3,400
<i>Child and Adolescent Psychiatrists</i>	2,000
Psychiatric Nurse Practitioners	3,500
Psychiatric Physician Assistants	500
Psychologists	18,500
Addiction Counselors	13,900
Mental Health Counselors	26,300
School Counselors	56,600
Marriage and Family Therapists	15,700
Social Workers	136,000
Total	276,400

Sources: Annual graduates from the 2016 Integrated Postsecondary Education Data System (IPEDS), with the exception of psychiatrist graduate data from the American Medical Association (AMA).

⁵ 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://bhw.hrsa.gov/sites/default/files/bhw/nchwa/projections/hwsm-technical-report-to-dea.pdf>.