



# Health Workforce Projections: Mental Health Counselors

This fact sheet presents the national supply of and demand for mental health counselors for 2013 through 2025 using HRSA's Health Workforce Simulation Model (HWSM).<sup>1,2</sup> While the nuances of modeling supply and demand differ for individual health professions, the basic framework remains the same. For supply modeling, the major components (beyond common labor-market factors like 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 increased insurance coverage), and demand for health care providers (translated into requirements for full-time equivalents). Over the period studied, the model assumes that current national patterns of labor supply and service demand remain unchanged within each demographic group.<sup>3</sup> These projections do not account for the geographical distribution of providers which may impact access to care in certain areas.

The following two scenarios are simulated: **Scenario One** assumed supply and demand were in equilibrium at baseline, and **Scenario Two** adjusted current and projected demand based on findings from the Substance Abuse and Mental Health Services Administration's (SAMHSA) 2013 National Survey on Drug Use and Health<sup>4,5</sup> which found that approximately 20 percent of the 2013 U.S. population that reported having a behavioral health disorder did not receive treatment.

## BACKGROUND

Mental health counselors help individuals with mental and emotional health issues as well as with relationship problems. They may provide treatment to individuals, couples, families, and groups. Some mental health counselors work with a specific population such as children, college students, or the elderly.<sup>6</sup>

### 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.

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<sup>1</sup> 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 [Health Workforce Supply and Demand Simulation Model](#).

<sup>2</sup> This fact sheet describes the workforce projections for one of nine behavioral health professions that are detailed in HRSA's "National Projections of Supply and Demand for Selected Behavioral Health Practitioners: 2013-2025."

<sup>3</sup> 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.

<sup>4</sup> U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. 2014. *Results from the 2013 National Survey on Drug Use and Health: Mental Health Findings*, NSDUH Series H-49, HHS Publication No. (SMA) 14-4887. Rockville, MD.

<sup>5</sup> U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration. 2014. *Results from the 2013 National Survey on Drug Use and Health: Summary of National Findings*, NSDUH Series H-48, HHS Publication No. (SMA) 14-4863. Rockville, MD.

<sup>6</sup> U.S., Department of Labor, Bureau of Labor Statistics. *Occupational Outlook Handbook, 2014-15 Edition*, Mental Health Counselors and Marriage and Family Therapists. Accessed 5/5/2016: <http://www.bls.gov/ooh/community-and-social-service/mental-health-counselors-and-marriage-and-family-therapists.htm>.

These counselors typically have a master’s degree in psychology, social work, or counseling. All states require mental health counselors to be licensed, typically necessitating a combination of graduate education, supervised counseling experience, and passing a state-recognized examination.

## FINDINGS

At the national level, approximately 120,010 mental health counselors were active in the U.S. workforce in 2013 (Exhibit 1). The supply of mental health counselors is projected to increase by 21 percent between 2013 and 2025, reflecting growth over the past decade in the annual number of new mental health counselors trained. Under Scenario One, the demand for counselors is expected to increase by 15 percent to 138,170 FTEs by 2025. The increase in demand for mental health counselors, driven primarily by population growth and aging, does not offset the supply growth resulting in an excess of approximately 7,530 FTE counselors. Under Scenario Two, which adjusts for the 20 percent of the population reporting lack of care, demand is projected to increase by approximately 15 percent to 172,630 FTE. This scenario produces an estimated shortage of 26,930 FTE counselors. However, Scenario Two assumes that all of the individuals reporting lack of care in SAMHSA’s survey actually needed or would have sought care. Therefore, Scenario Two should be viewed as an upper bound on demand.

*Exhibit 1. Estimated Supply of and Demand for Mental Health Counselors in the United States, 2013-2025*

	<b>Scenario One (Assumes equilibrium)</b>	<b>Scenario Two (Adjusted for SAMHSA survey)</b>
<b>Supply</b>		
Estimated supply, 2013	120,010	120,010
Estimated supply growth, 2013-2025:	25,690 (21%)	25,690 (21%)
<i>New entrants</i>	65,470	65,470
<i>Attrition<sup>a</sup></i>	-36,310	-36,310
<i>Change in average work hours<sup>b</sup></i>	-3,470	-3,470
Projected supply, 2025	145,700	145,700
<b>Demand</b>		
Estimated demand, 2013 <sup>c</sup>	120,010	150,000
Estimated demand growth, 2013-2025:	18,160 (15%)	22,630 (15%)
<i>Changing demographics impact</i>	17,660	22,000
<i>Insurance coverage impact<sup>d</sup></i>	500	630
Projected demand, 2025	138,170	172,630
<b>Projected Supply (minus) demand<sup>e</sup></b>	<b>7,530</b>	<b>-26,930</b>

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

<sup>a</sup>Includes retirements and mortality.

<sup>b</sup>This represents the change in mental health counselor full time equivalents resulting from a change in the demographic composition of the future workforce and the associated effect on average number of hours worked.

<sup>c</sup>The baseline scenario assumes that national supply and demand are in approximate equilibrium in 2013.

<sup>d</sup>This model reflects expanded insurance coverage of mental health and substance use disorder services associated with Medicaid expansion and Affordable Care Act marketplaces, as well as federal parity protections.

<sup>e</sup>The demand for mental health counselors 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.