

Health Workforce Projections: Mental Health and Substance Abuse Social Workers

This fact sheet presents the national supply of and demand for mental health and substance abuse social workers for 2013 through 2025 using HRSA's Health Workforce Simulation Model (HWSM).^{1,2} 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.³ 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^{4,5} 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 and substance abuse social workers generally assess and treat individuals with mental, emotional, or substance abuse problems, including abuse of alcohol, tobacco, and/or drugs. These providers may conduct individual and/or group therapy. Their duties may include crisis intervention, case

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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 [Health Workforce Supply and Demand Simulation Model](#).

² 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."

³ 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.

⁴ 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.

⁵ 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.

management, client advocacy, prevention, education, and outreach.^{6, 7} Most positions require a master’s degree in social work. All states have some type of licensure or certification requirement for mental health and substance abuse social workers.

FINDINGS

At the national level, the supply of social workers is projected to decrease by 2 percent between 2013 and 2025 (Exhibit 1) with attrition outpacing newly trained social workers entering this profession. Under Scenario One, the demand for mental health and substance abuse social workers is expected to increase by 14 percent to 126,160 FTEs by 2025. Under Scenario Two, which adjusts for the 20 percent of the population reporting lack of care, demand is projected to increase by approximately 14 percent to 157,760 FTEs. 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. Regardless of scenario, demand will exceed supply in 2025, suggesting that the United States will have a deficit of mental health and substance abuse social workers.

Exhibit 1. Estimated Supply of and Demand for Mental Health and Substance Abuse Social Workers in the United States, 2013-2025

	Scenario One (Assumes equilibrium)	Scenario Two (Adjusted for SAMHSA survey)
Supply		
Estimated supply, 2013	110,880	110,880
Estimated supply growth, 2013-2025:	-1,660 (2%)	-1,660 (2%)
<i>New entrants</i>	31,990	31,990
<i>Attrition^a</i>	-33,350	-33,350
<i>Change in average hours worked^b</i>	-300	-300
Projected supply, 2025	109,220	109,220
Demand		
Estimated demand, 2013 ^c	110,880	138,630
Estimated demand growth, 2013-2025:	15,280 (14%)	19,130 (14%)
<i>Changing demographics impact</i>	14,000	17,500
<i>Insurance coverage impact^d</i>	1,300	1,630
Projected demand, 2025	126,160	157,760
Projected Supply (minus) demand	-16,940	-48,540

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

^aIncludes retirements and mortality.

^bThis represents the change in mental health and substance abuse social worker 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.

^cThe baseline scenario assumes that national supply and demand are in approximate equilibrium in 2013.

^dThis 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.

⁶ U.S. Department of Labor, Bureau of Labor Statistics. 2010. Standard Occupation Classification: 21-2013 – Substance Abuse and Mental Health Social Workers. Accessed 5/6/2016: <http://www.bls.gov/soc/2010/soc211023.htm>.

⁷ U.S. Department of Labor, Bureau of Labor Statistics. *Occupational Outlook Handbook, 2014-15 Edition*, Social Workers, Accessed 5/6/2016: <http://www.bls.gov/ooh/community-and-social-service/social-workers.htm>.