## Behavioral Health Workforce Projections: 2025

<table>
<thead>
<tr>
<th>Occupation</th>
<th>Supply</th>
<th>Demand</th>
<th>Difference</th>
</tr>
</thead>
<tbody>
<tr>
<td>School Counselors</td>
<td>243,450</td>
<td>321,500</td>
<td>-78,050</td>
</tr>
<tr>
<td>Clinical, Counseling, School Psych</td>
<td>188,930</td>
<td>246,420</td>
<td>-57,490</td>
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<tr>
<td>MH/SA Social Workers</td>
<td>109,220</td>
<td>157,760</td>
<td>-48,540</td>
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<tr>
<td>MH Counselors</td>
<td>145,700</td>
<td>172,630</td>
<td>-26,930</td>
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<tr>
<td>SA/BD Counselors</td>
<td>105,970</td>
<td>122,510</td>
<td>-16,540</td>
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<tr>
<td>Psychiatrists</td>
<td>45,210</td>
<td>60,610</td>
<td>-15,400</td>
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<td>MFTs</td>
<td>29,780</td>
<td>40,250</td>
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<tr>
<td>BH NPs</td>
<td>12,960</td>
<td>10,160</td>
<td>2,800</td>
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<tr>
<td>BH PAs</td>
<td>1,800</td>
<td>1,690</td>
<td>110</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>883,020</strong></td>
<td><strong>1,133,530</strong></td>
<td><strong>-250,510</strong></td>
</tr>
</tbody>
</table>
Behavioral Health Occupations

Licensed professionals
- Psychiatrists
- Psychologists
- Marriage and family therapists
- Social workers
- Licensed professional counselors
- Psychiatric mental health nurses
- Addiction counselors

Certified professionals
- Addiction counselors
- Community health workers
- Peer providers
- Psychiatric rehabilitation specialists
- Psychiatric aide/technicians
- Case managers

Primary care providers
Addiction Counselors

- Multiple levels of addiction counselors with varying education/training requirements.
- Shortage of workers, yet forecasted growth (23% increase by 2026, according to BLS)
- Opioid treatment providers are in high demand
- Economic indicators: rising salaries; recruitment incentives; signing bonuses
- Not much indication that supply is growing yet...competition is high
- Certificate programs are hard to track
Peer Providers

- Important component of the workforce, and growing
- Peers improve outcomes! System starting to catch up: Medicaid reimbursable in 35 states
- Not much data on this group- no systemized tracking; multiple job titles; many certification programs
- Sometimes perceived as an entry to the field...career ladder is tough. Stigma, lack of options
- Could be a potential way to strengthen robustness of the workforce

Image source: Mental Health America
Workforce Robustness as a Whole?

- Complex: different stories for each segment...some inter-related
- Scopes of practice impact robustness
- Varied scopes of practice across states mean worker contribution to service delivery looks different
- Reimbursement, reimbursement, reimbursement
- Addressing scope of practice and reimbursement concerns would likely be the most impactful way to improve robustness