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CT Health Horizons Social Worker Landscape Analysis

2025 Report

Prepared by the Child Health and Development Institute for Connecticut State Colleges and Universities in support of the CT Health Horizons Initiative

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This report was funded by and developed for the Connecticut State Colleges and Universities (CSCU) by the Child Health and Development Institute (CHDI). For more information, contact Kathleen Powers, **kpowers@chdi.org**.

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EXECUTIVE SUMMARY

CT Health Horizons was a $35 million initiative to invest in the expansion of the social work and nursing pipelines given the significant workforce shortages that both fields were experiencing in Connecticut. After three years of funding tuition support for master's in social work (MSW) students as well as faculty, as of June 30, 2026, the program has sunset. An annual landscape analysis of the social work field was conducted in support of the initiative to identify the strengths and challenges throughout the pipeline and inform Connecticut policy. The Child Health and Development Institute (CHDI) was contracted by Connecticut State Colleges and Universities (CSCU) to conduct the annual analysis. This report serves as the final landscape analysis in support of CT Health Horizons. It addresses the following questions:

I. **What is the landscape of the current workforce?**
II. **What is the current capacity among the state's master's in social work (MSW) programs and is it meeting pipeline demand?**
III. **What is the employment outlook for graduating MSW students? How does it match their priorities?**
IV. **How can the state better support the supply, retention, workforce preparedness, and diversity of social workers in Connecticut?**

CHDI utilized the following methods to identify landscape findings and recommendations to strengthen the field: survey of licensed social workers in the state, focus group with employers, focus groups with MSW students, and a survey of MSW programs. Findings included the following strengths: personal satisfaction from client engagement among social workers, enthusiasm among students regarding their field of study, increases in the numbers of licensed social workers in recent years, and projected growth of the field. Findings included the following challenges: an ongoing need to diversify the field, remaining wait lists for care in spite of improvements in recruitment and retention, salaries that are not reflective of the education and training requirements, and a need for more hands-on preparation of students.

The following recommendations were identified to strengthen the supply, retention, diversity, and preparation of the social work field.

1. **Increase reimbursement rates to raise social worker pay and grow the field**
2. **Expand tuition reimbursement and loan forgiveness programs**
3. **Increase paid field placements and internships**
4. **Provide support for earlier entry into the field**
5. **Expand "hands-on" learning**
6. **Streamline and standardize data collection**
7. **Promote the social work field and offer mentorships**
8. **Reduce licensing barriers that delay workforce entry**

BACKGROUND

Connecticut, like most other states in the country, is experiencing rising social, economic, and behavioral health needs which are being met with workforce shortages. This unmet demand is creating an escalating cycle of heightened needs, rising caseloads, burnout, staff vacancies, and delays in care. **Social workers make up approximately one half of the behavioral health workforce, and so ensuring the pipeline is robust and prepared to meet current demand is critical.**

To address social worker vacancies, **the State of Connecticut launched the CT Health Horizons initiative with $35 million from the federal American Rescue Plan Act** passed in 2021. CT Health Horizons was a three-year initiative designed to strengthen the pipeline of social workers and nurses, address the critical workforce shortages occurring in healthcare, and diversify the two fields. CT Health Horizons was implemented through a partnership with Connecticut State Colleges and Universities (CSCU), the Office of Workforce Strategy, the Connecticut Conference of Independent Colleges, the University of Connecticut, and the Connecticut Hospital Association.

CT Health Horizons funded individual colleges and universities within Connecticut to provide direct tuition assistance to students in nursing and social work programs, fund new faculty positions, and support innovative partnerships between schools and career partners. **CT Health Horizons sunset June 30, 2026.**

Over the three-year initiative, **604 master's in social work (MSW) students in the state received tuition assistance through the program** (24% of the total CT Health Horizons' scholarship funds). Each student was eligible for a maximum of $10,000 per year. Additionally, CT Health Horizons funded 22 full-time social work faculty positions.[1]

CT Health Horizons' eligibility requirements were designed to ensure those most in need were being served. Students receiving Federal Pell Grants represented 34% of the total tuition assistance issued. Students from Alliance Districts (those school districts within Connecticut having lowest performing schools) represented 55% of the tuition assistance.

In addition to the tuition assistance and the funding of new faculty positions, Health Horizons' *Innovative Programs* supported development of specialized programs as well as employer/school partnerships. Examples include:

- University of Connecticut (UCONN) School of Social Work's Connecticut ¡Adelante! Program which addresses Connecticut's increasing demand for Spanish-speaking social workers. UCONN also implemented a child and adolescent program focus, preparing students to meet the rising needs among youth.
- Central Connecticut State University (CCSU) launched a new MSW Program in the fall of 2024 and works with Department of Children and Families, Wheeler, and Hartford Healthcare's Institute of Living to grow a diverse workforce. Students are provided with financial support as well as quality supervision, professional development and

[1] Reflects the equivalent number of positions fully funded by CT Health Horizons. While a total of 22 full-time faculty positions received funding from CT Health Horizons, some were only partially funded by the initiative.

mentoring to increase the number of culturally competent social workers. The priority is to serve underrepresented Black, Latino, and Indigenous MSW practitioners in the state.
- Quinnipiac University's MSW program received funding to increase the number of Licensed Clinical Social Workers (LCSW) by providing an LCSW Prep Course, hosting annual employment and hiring fairs, creating employment readiness training, and providing licensure and exam fees to social workers, with priority to underrepresented Black, Latino, Asian and Indigenous MSW practitioners in Connecticut.

CSCU contracted with the Connecticut-based nonprofit, Child Health and Development Institute (CHDI), to serve as the content expert for the social work component of CT Health Horizons. This work included conducting an annual landscape analysis of the social work field in the state and developing recommendations for how to strengthen and expand the social worker pipeline to meet the needs of Connecticut residents and employers.

This report serves as the final of the annual analyses and addresses the following questions:

I. **What is the landscape of the current workforce (e.g., size, roles, demographics)?**
II. **What is the current capacity among the state's master's in social work (MSW) programs and is it meeting pipeline demand?**
III. **What is the employment outlook for graduating MSW students? How does it match their priorities?**
IV. **How can the state better support the supply, retention, workforce preparedness, and diversity of social workers in Connecticut?**

Social Worker Role definition
Note that the title "social worker" has a broad definition, and not all of those with the title "social worker" are licensed. For example, most social workers providing child welfare services for the Department of Children and Families (DCF) are required to have only a bachelor's degree and not a license). School social workers, on the other hand, must have a MSW and a certificate, but not a license. See box "Social Worker Roles" below for more details. In Connecticut, there are two social worker license types (licensed social workers being most likely to provide clinical services). A Licensed Master's in Social Work (LMSW) must hold a master's degree from an accredited social work program, and pass the LMSW exam while a Licensed Clinical Social Worker (LCSW) must have completed 3,000 hours of post-graduation supervised clinical social work experience, including at least 100 hours of supervision, in addition to holding a master's degree from an accredited social work program and passing the LCSW exam.

Social Worker Roles

The title *social worker* may be applied to a variety of roles with differing education, license and credential requirements. The National Association of Social Workers identifies the following as common roles: helping people obtain tangible services; counseling and psychotherapy with individuals, families, and groups; helping communities or groups provide or improve social and health services; and participating in legislative processes.* Different states also have different license types and requirements. The following are common social worker roles within Connecticut:

Social Worker (BSW): provides a variety of services such as support and case management to a variety of populations; *cannot* provide clinical services (e.g., majority of social workers hired by DCF to provide child protective services have a bachelor's degree and are not required to have a license). There is no bachelor's level license for a social worker in Connecticut.

Certified School Social Worker: certification requires master's degree in accredited social work program and 36 hours of study in special education; provides a variety of behavioral health services in school settings; no license required.

Licensed Master Social Worker (LMSW): master's degree in accredited social work program degree in accredited social work program; pass the Licensed Clinical Social Work (LMSW) exam; provide clinical services under supervision of LCSW or similar license.

Licensed Clinical Social Worker (LCSW): master's degree in accredited social work program degree in accredited social work program; 3,000 hours of post-master's social work experience including at least 100 hours of work experience under professional supervision by a licensed clinical or certified independent social worker; pass the Clinical Level Examination of the Association of Social Work Boards; provides clinical services without supervision.

*National Association of Social Workers. 2025. Practice. https://www.socialworkers.org/Practice.

METHODS

Licensed Social Worker Survey

A survey of social workers licensed in the state of Connecticut was conducted between September and December 2025. The Connecticut State Department of Public Health (DPH) supplied the contact list for the survey for the purposes of supporting this project. The list included 16,221 actively licensed social workers as of June 30, 2025.[2] Among these, 14,371 (89%) had working email addresses, and were sent the survey. The survey included questions related to their demographics, roles in the field, employment setting, educational and training background, compensation, and job satisfaction. It also asked about the strengths and challenges they were experiencing in the field, and their recommendations for improving support for social workers. The survey solicited 1,537 responses (an 11% response rate). For purposes of this report, except where otherwise noted, data analysis focused on licensed social workers currently working within Connecticut (1,206 of the responses).

The survey was conducted using Alchemer. Response data were analyzed using SPSS v.29 for the quantitative analysis and ChatGPT-4 for the coding of qualitative data from open-ended

[2] The email list included other licensed behavioral health professionals for the purposes of comparative analyses for this report as well as to support other workforce-related efforts for Connecticut.

survey questions. A ChatGPT-4 *Team* account, which does not share data with the broader ChatGPT platform or use it for "training", was used for the analysis. To ensure prompts were accurately identifying themes in qualitative data, manual coding by CHDI staff of a sample of responses was compared to GPT-4 findings.

Student Focus Groups
Focus groups were conducted with students in social work programs in the state of Connecticut between February and April 2024. The four focus groups included 34 students (15 BSW, 18 MSW, 1 did not identify) across three schools. The focus groups addressed the following topics: student satisfaction with their program, priorities in job seeking, workforce preparedness, and their recommendations for improving support for social work students. The focus group notes were analyzed using ChatGPT-4.

Social Work School Survey
A survey of MSW programs in Connecticut was issued in April, 2025. The survey was sent to lead staff (i.e., deans or department chairs) at all nine schools in Connecticut with a social work program. Survey questions were related to program characteristics, acceptance, enrollment, and graduation rates, faculty needs, faculty and student demographics, and general strengths and challenges being experienced by the programs. Responses were received from all schools. The survey was conducted using Alchemer and analyzed using Excel and ChatGPT-4.

Employer Focus Group
One employer focus group was conducted in June 2026 with employers of social workers contracted with Department of Mental Health and Addiction Services (DMHAS) and/or DCF. The focus group was inclusive of four participants. Employer roles included clinical supervisors and directors, and reflected a range of agency sizes; with some employing fewer than ten social workers, and some more than 75, and employers of both LMSW and LCSW licenses. The focus group included fewer participants than anticipated in spite of extensive outreach. The focus group, however, was successful in generating helpful responses that align with data from other sources as well as employer focus groups conducted in 2024 for the last landscape analysis (3 focus groups with 20 employers total). Focus group question topics included strengths and challenges in hiring and recruiting social workers, expanding diversity of their workforces, and preparedness of new graduates.

CT Health Horizons Program report
As the lead administrator of CT Health Horizons, CSCU collects reports of program implementation from contracted social work schools. The Health Horizons Program Year Three – Update included information on students receiving direct tuition assistance and faculty hired through CT Health Horizons funding.

FINDINGS

I. What is the landscape of the current workforce?
- **a. Trends in Supply**
- **b. Roles and Settings**
- **c. Demographics**
- **d. Strengths and Challenges**

Trends in Supply

As of June 30, 2025 the Connecticut State Department of Public Health (DPH) listed **16,221 actively licensed social workers.** This number reflects 5,687 LMSWs and 10,534 LCSWs. **Licensed social workers make up over half of the behavioral health workforce** in the state (see Figure 1) and it is currently growing, with DPH granting over 10,000 social worker licenses in the last five years (see Figure 2).

Figure 1: Behavioral Health Workforce by License Type

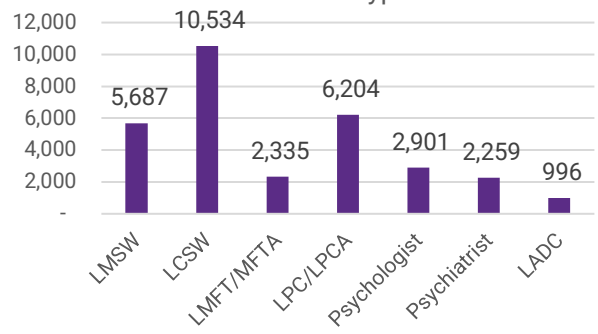
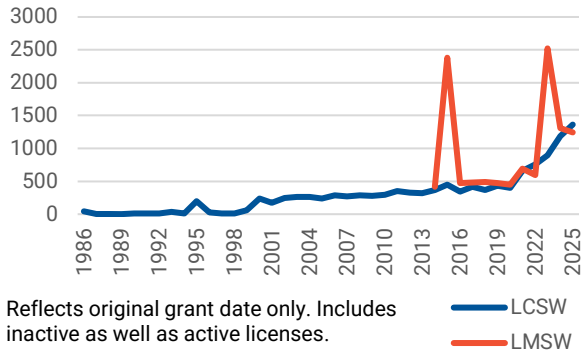


Figure 2: License Type by Year Granted



In October 2023 the national exam for the LMSW was suspended within Connecticut (and many other states) due to well-documented racial bias of the test.[i] The exam was suspended for all applicants in Connecticut for two years, however, **as of January 2026, MSW graduates must resume taking and passing the LMSW test in order to work as licensed social workers.** Students in focus groups reported concern regarding having to take the exam and are looking to MSW programs to help them prepare. Among currently working social workers, when asked their thoughts regarding the licensing process in Connecticut, 18% raised concerns regarding the exam or sufficient opportunities to support preparation. The exam will add administrative burden for employers as well. Hiring may be delayed while awaiting licensure. Employers in the focus group all stated that their employees or potential employees had experienced administrative challenges related to their license, including receiving a test date far in the future or receiving the license itself following significant delay after successfully passing the exam. They reported that when employees apply for a license within a few months of their birthday, they are offered the choice of either paying twice (at the time of application as well as on their birthday) or waiting for licensure until their birthday. Neither choice supports the workforce nor employers. These delays (sometimes more than one month) have resulted in delayed hiring or in employees having to pause their clinical roles.

In addition to the temporary suspension of the exam, Connecticut has enacted other changes to reduce barriers to licensure and practice among social workers, including reducing licensing fees, joining the Interstate Compact for Social Workers, and allowing social workers with a LMSW to work in private practice under the supervision of a LCSW. Recent policy and programmatic changes appear to be aligned with growth in social worker licensing over the last several years. Although a causal relationship cannot be drawn, there is indication that changes in licensing policy and/or investments such as CT Health Horizons have had a measurable impact on the overall supply of the workforce.

Note that *not all* of those who have an active license are currently employed as social workers, nor do they necessarily work within Connecticut. Many may choose to maintain licensure within

Connecticut even while not actively utilizing it. These may include individuals who are unemployed, retired, practicing out of state, taking temporary or permanent leave from the field, or working for an out-of-state or national company (with no - or a small number of - clients living in Connecticut).

Among respondents to the survey of social workers with a Connecticut license who are currently working, **6% reported working outside of Connecticut exclusively**. Respondents reported they chose to work outside of Connecticut because they had moved out of state for an unstated reason or explicitly were working out of state because of either a lower cost of living or higher salary. Among those working in Connecticut, 80% work full-time, 16% part-time, and only a small number (2% or less) responded that they are retired, unemployed, or not working by choice.

The Connecticut Department of Labor (CT DOL) offers an alternative approach to measuring workforce supply. The CT DOL identifies the following categories of social workers and associated employment statistics:

Table 1: CT DOL Social Work Occupations and Estimated Employment as of Q1 2023

Child, Family, and School Social Workers	5,790
Healthcare Social Workers	1,930
Mental Health and Substance Abuse Social Workers	1,400
Social Workers, All Other	340
Total	**9,460**

Social Worker Roles and Settings

As noted earlier in this report, **social workers serve a broad range of roles in their support of Connecticut residents**. Roles within behavioral health, however, are among the most common. Figure 3 offers a breakdown of roles among survey respondents working in Connecticut. Most of those working in behavioral health reported working for an outpatient level of care (68%). Figure 4 depicts distribution of respondents across the settings they work in, and Figure 5 the proportion of social workers serving different age groups.

Figure 3: Primary Role

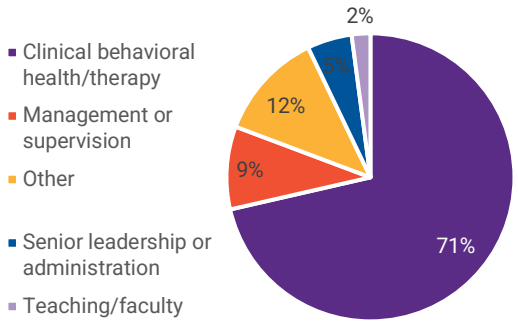


Figure 4: Most Common Work Settings

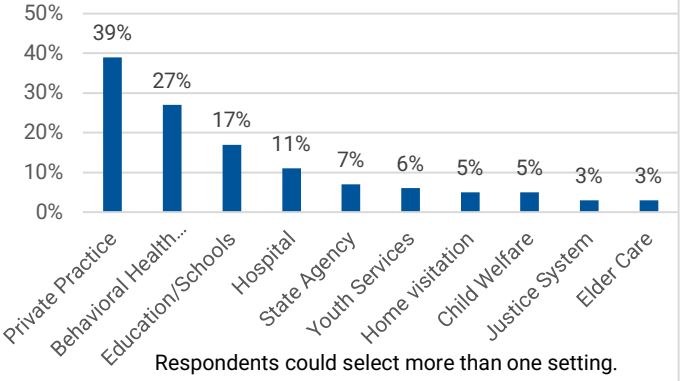
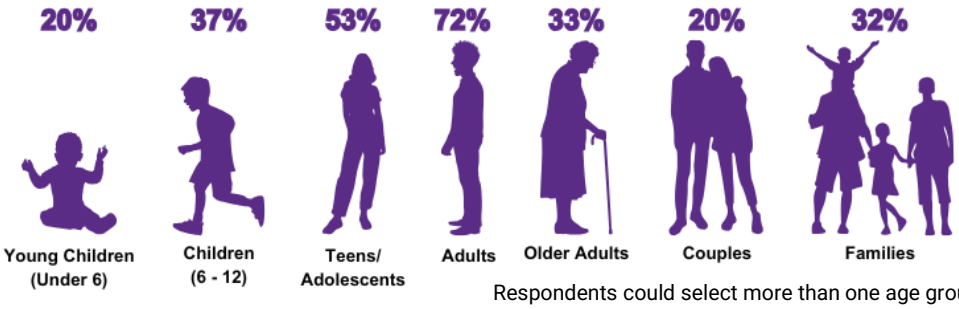


Figure 5: Proportion of Social Workers by Age Groups Served



Respondents could select more than one age group.

Demographics of the Current Workforce

Race and Ethnicity. Research has demonstrated that a diverse workforce can increase engagement in behavioral health services and improve organizational culture.[ii] Among respondents to the Licensed Social Worker Survey, the majority were White Non-Hispanic (see Figures 6 and 7). **Compared to the general Connecticut population, there is underrepresentation of Black, Multiracial, Asian, and Latino individuals in the social work field and significant underrepresentation of males**. DPH did not share race and ethnicity data within their dataset, however based upon previously published reports of race and ethnicity of licensed social workers in Connecticut by DPH[iii] the demographics of survey respondents is generally reflective of the overall licensed population.

Figure 6: Race

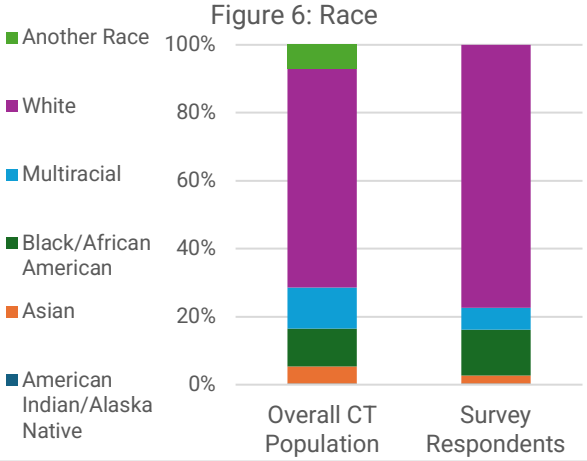
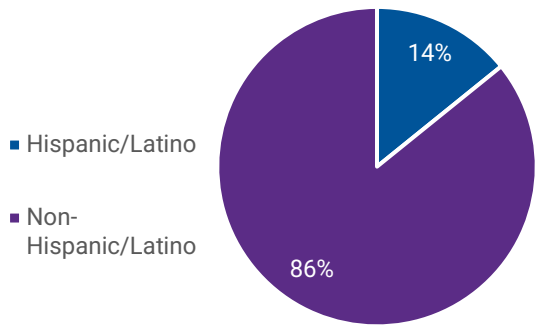


Figure 7: Ethnicity



Most MSW programs report they perceive MSW students are less racially and ethnically diverse than the state's population overall (63% of programs) and faculty demographics are less diverse than the state's population overall (56% of programs). **The tuition assistance provided by CT Health Horizons supported the diversity of the field, with 63% of social work recipients being students of color.**

Gender. While national data on race and ethnicity of social workers has demonstrated recent increases in diversity, across gender, there is a shrinking proportion of male social workers.[iv] The field has traditionally been predominantly female, and the proportion of women continues to increase.

There are documented disparities in boys and men's utilization of behavioral health services and engagement with social services more broadly, and indication that boys and men may be more likely to engage in services when paired with a male social worker.[v] Research indicates that to attract more men to traditionally female professions, salaries must increase (see discussion of social worker salaries below).[vi]

Figure 10: Gender

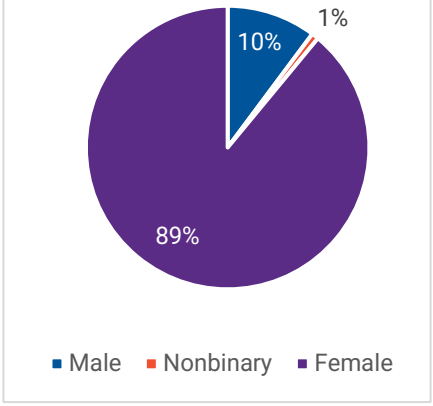
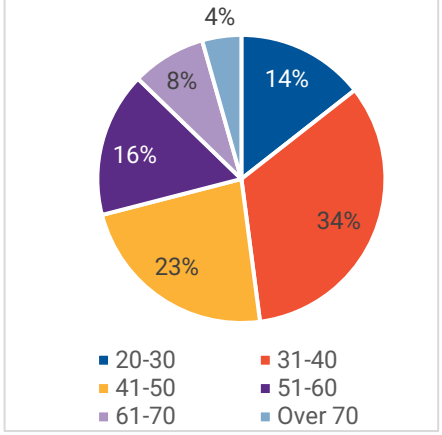


Figure 11: Age



Age. The workforce in Connecticut is relatively young, with 31-40 year olds making up the largest age group (see Figure 11). Retirement is likely to occur in the next several years for approximately 12% of the current workforce (those over age 60).

Language. Nearly a quarter (21%) of survey respondents reported speaking a language other than English fluently, but only 11% reported providing services in that language. The majority (61%) identified Spanish as their second language. The next most common languages were Portuguese and Haitian Creole. **Only 30% of those providing bilingual services reported receiving additional compensation for providing bilingual services.**

Employers in the focus group reported that they have seen more diversity in the hiring pool of social workers and social workers more closely match the demographics of the clients they serve in recent years. Employers also report actively recruiting more diverse social workers including bilingual social workers trained in the ¡Adelante! program for Spanish speaking students at UCONN.

Strengths and Challenges

More than half of social workers responding to the survey described **the benefits of the social work field to be meaningful and rewarding work with clients, families, and communities**. They appreciate connection, trust-building, and being present for others as central positive aspects of the work. Additional responses included the opportunity for professional development and growth (10%), teamwork and collaboration (8%), and flexibility and autonomy (8%).

More than 40% of the workforce identified barriers to clients in accessing services being their biggest challenge. They expressed concerns regarding a lack of adequate services, resources, and supports for clients. Respondents frequently referenced waitlists, limited providers, housing needs, transportation barriers, and difficulty connecting people to appropriate care. Additional challenges noted included administrative burden of paperwork and billing requirements. These demands were viewed as taking time away from critical client care. Low salaries (and underlying low insurance reimbursement rates) were identified by13% as being a primary challenge in their work. Students in focus groups also had concerns regarding low salaries for social workers, and their ability to pay back their student loans.

When asked what the State of Connecticut can do to support social workers, the most common response was to invest in behavioral health and social services (48%). Another 25% specifically identified increasing insurance reimbursement rates and requiring more accountability among insurers. Other responses included improved care for underserved populations (8%), and workforce development or training investments (6%).

II. What is the current capacity among the state's master's in social work (MSW) programs and is it meeting demand?

a. MSW Enrollment
b. Employer Demand
c. Pipeline Strengths and Challenges

MSW Enrollment

Among the nine colleges and universities in Connecticut with social work programs, seven offer MSW programs, eight offer a bachelor's in social work (BSW) program, seven Accelerated or Advanced Standing MSW programs, and three have PhD or doctorate in social work (DSW) programs. Most MSW programs offer concentrations in clinical practice, mental health, or a similar focus. In total, social work schools reported their anticipated to graduate 161 BSW students and 363 MSW students (inclusive of accelerated MSW students). These numbers are slightly lower than the total graduated in 2024 (380 MSW students) and similar or slightly lower than graduation numbers reported for 2019 – 2023. In total, schools anticipated that 40% of their BSW graduates would continue onto their MSW program.

To meet demand of the majority of students who are working or have other responsibilities, many schools have expanded online and "off hour" programs. **In Connecticut, 90% of programs report including opportunities for students to complete all or a portion of coursework in the evening, on weekends or online.** This is an increase from the 2024 landscape report when only three schools reported offering weekend or evening courses and three offered online courses.

Most schools reported accepting all or nearly all of their qualified applicants. Three schools, however, noted that they have more or *many* more applicants than they have space for. Two of these were Connecticut State universities and one was a private school. Most schools, including the three who are unable to meet applicant demand, identify the cost of hiring additional faculty as the biggest barrier to expanding their programs. In considering potential demand for social work programs, it's notable that 52% of the Licensed Social Worker survey respondents reported receiving their MSW in another state. It is unclear if these social workers are attending out-of-state schools because they are not admitted to in-state programs, or for another reason, such as their first move to Connecticut occurring after their education.

In addition to providing tuition support to 604 MSW students, CT Health Horizons helped to expand programs in the Eastern part of the state (through a partnership between USJ and Mitchell College) which did not previously have a MSW program, as well as a new MSW program at Central Connecticut State University.

Employer Demand

Connecticut does not systematically collect behavioral health provider vacancy rates, however trends from available data indicate that vacancy rates and workforce shortages may be improving. In the focus group with employers, they each reported only a small number of vacancies, with one reporting being fully staffed. This indicated improvement from the prior

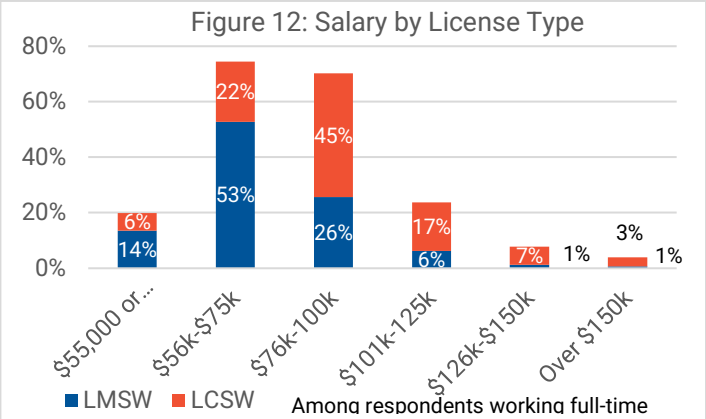
focus groups findings as well as reports such as The Alliance report of nonprofit providers which found an average vacancy rate of 18% in their 2022 report.[vii] and a 2024 report on intermediate levels of care which found approximately one third of positions to be vacant in programs such as intensive outpatient, partial hospitalization, and extended day treatment programs.[viii]

Wait times for services were 14 days or fewer among 78% of licensed social workers responding to the survey. A wait time of 15-30 days was reported by 12%, 1-3 months by 7%, and more than 3 months by 4%. Wait times for services indicate that there is still some unmet demand and that shortages vary by service type or setting.

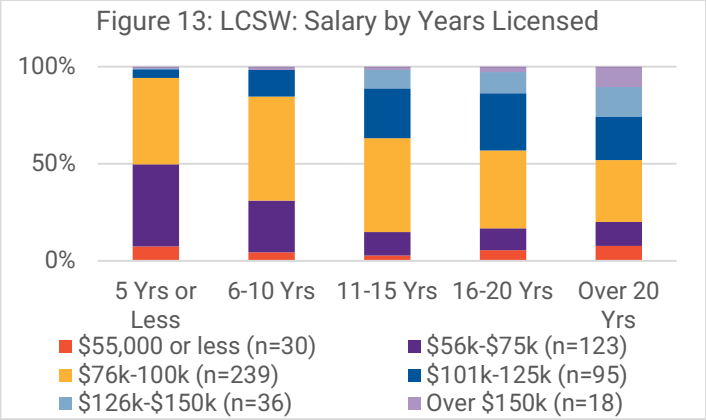
Strengths and Challenges
The expansion of the pipeline opportunities through MSW program growth as well as indicators of decreasing shortages among employers is promising for Connecticut. The gap between demand for and supply of the workforce may be starting to close. However, there are many residents still experiencing significant wait times for services, and more challenging work settings and those with lower salaries (e.g., nonprofit clinics) still have challenges filling vacancies.

BSW students in focus groups had positive responses to their coursework, and the experiential learning that was included. **MSW students expressed appreciation for the flexibility that most programs offer now.** They were particularly appreciative of classes that focused on clinical work, as well as those that explored cultural humility. Students from two of the three schools sought m**ore classes on diagnosing and providing specific interventions such as evidence-based treatments**. They also expressed they would prefer to have more opportunities for practicing client interactions, and to demonstrate skills via different modes of communication (e.g., provide oral exams in place of written). **Students also are seeking mentorship opportunities, from faculty or others. Those who had mentorship experience greatly valued it.**

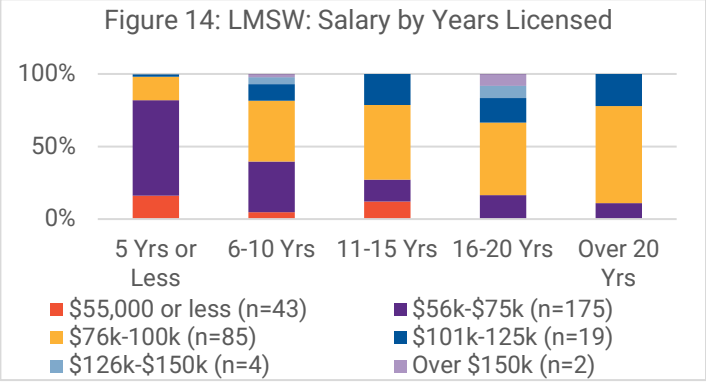
As demonstrated in the comments collected from the licensed workforce, social workers place tremendous value on their roles supporting individuals and communities. Overwhelmingly, they report this as their motivation in entering and staying in the field. The financial return on investment, however, is challenging to demonstrate. Tuition costs of attaining a bachelor's and then master's degree, completing required hours of supervision, passing the exam, and paying for licensing fees is a significant investment of both time and money. Among social workers responding to the survey, 81% took out student loans to pay for their education. Multiple students in focus groups reported that they expect to have to prioritize jobs that offer a higher salary in order to pay back student loans over jobs that appeal to them personally. After 5-6 years of higher education, plus 3,000 hours of supervised work to attain a LCSW, an average salary of $80,000 (per the CT DOL) is not comparable to many fields which require less financial and educational investment. **To continue to sustain the pipeline, and certainly to grow it, increasing salaries is critical.** See Figures 12 – 14 for more information on salaries based upon survey responses.



Responses to the program survey (completed by MSW program leadership) and student focus groups emphasized the need for **scholarships, tuition assistance, stipends, and financial aid to reduce barriers for students and support enrollment and retention.** Many respondents also highlighted the need for **funding for faculty, field staff, paid internships, and field placement stipends**. Students in focus groups shared that if their internships were not offered through their employer it would be impossible to complete the requirements. **Finding internships that are paid and offer clinical experience is challenging**, and students wanted more support from schools in attaining them.



The pipeline may benefit from investments in entry level roles and "earn-while-you-learn" approaches to support career development toward becoming a social worker. Experience in social work can be gained at earlier points in the career pipeline, such as a case worker, care coordinator, peer support specialist, community health worker, or certified drug and alcohol counselor.



III. What is the employment outlook for graduating MSW students? How does it match their priorities?

a. Projected Job Growth

b. Student and Employer Expectations

c. Graduates' Readiness

Projected Job Growth

Social work continues to be a growing field with significant employment opportunities and a broad range of occupations (although this report focuses on behavioral health roles). The CT DOL's published projections estimating that the social work field will grow by nearly nine percent between 2022 and 2032 on top of current demand.[ix] **The following three occupations were identified among the DOL's *Fastest Growing Occupations in Connecticut*** (see Table 2). Of note, only one percent of survey respondents were unemployed, further indication that that the field is not yet saturated.

Table 2: Projected Growth of Social Work Occupations

Occupation	10 Year Projected Change (2022-2032)	
	Net	**Percent**
Child, Family, and School Social Workers	449	8.3%
Healthcare Social Workers	189	10.0%
Mental Health and Substance Abuse Social Workers	130	9.3%
Total	**768**	**8.9%**

*The occupation *Social Workers, All Other* is not captured in the 2022-2032 projections. However, in the 2020-2030 projections, they are estimated to grow by 14.7%.

Students regularly reported they anticipated job prospects would be strong. They shared that one of the benefits of social work is that it is a broad field, and were not concerned regarding finding work, especially in comparison to the experience of their peers in other fields. While there was confidence in job prospects, there was an interest in schools' providing more information on career options, and hearing from those working in the field. Some mentioned they had heard about interesting social work occupations by chance through other sources and wanted that information through schools. Similarly, based on their earlier secondary experience, they felt that community college and even bachelor's level students often do not know about social work as a profession. There was also concern that the federal funding context may impact job growth at some point.

Student and Employer Expectations

Students in focus groups regularly referred to seeking job opportunities that were rewarding and where they felt they were helping others (in alignment with findings from the survey of currently employed social workers). They also wanted a healthy organizational culture, with a good work-life balance, that supports staff to prevent burnout. Students expressed they were seeking opportunities to work in multidisciplinary teams. Some wanted to be sure the organization was diverse and inclusive and felt welcoming. Students also wanted to ensure that they could receive supervision toward a LCSW license.

Graduates' Readiness
Several themes consistently emerged across the student focus groups: (1) students had good experiences within their programs overall; (2) students highly value practicum and experiential learning; (3) many students experience significant stress balancing internships, school, work, and finances; and (4) students desire stronger clinical preparation and more real-world skill practice. **Students valued the opportunities they had to hear from and interact with working professionals.** One school offers a simulated home environment in which students practice client interaction and another digital simulations; these were viewed as very helpful by students.

Employers of social workers in the focus group, consistent with findings in the last landscape report, shared they found that recent social work graduates need more clinical preparation. Internships, and opportunities for practice, such as role play and simulated interactions with clients, can support this. Nearly 60% of current social workers identified the need for more practice in clinical skills, field work and internships, to improve preparation for social workers. Many also suggested mentorship or other support within the workplace.

IV. How can the state better support the supply, retention, workforce preparedness, and diversity of social workers in Connecticut?

National Context
States across the country are actively examining and, in many cases, rethinking how they recruit, train, license, and retain social workers in response to ongoing workforce shortages and increasing demand for behavioral health services. These efforts reflect a growing recognition that long-standing structures, particularly those related to licensure, field education, and early-career compensation may be contributing to barriers to entry and limiting workforce diversity. There is a shared interest in maintaining professional standards while ensuring that pathways into the field are accessible, equitable, and responsive to community needs.

A review of approaches from other states highlights a range of strategies being used to strengthen the social work workforce pipeline. These include reassessing the role of the licensing exam, expanding supervised and provisional licensure pathways, investing in paid internships and field placements, improving access to test preparation, participating in the Social Work Licensure Compact, and implementing financial incentives to support recruitment and retention. While these approaches vary in design and scope, they offer important insights into how states can address workforce gaps, reduce inequities, and build a more sustainable behavioral health system. For Connecticut, these findings, together with those of the landscape analysis findings, provide a foundation for considering targeted policy and programmatic changes.

Social Work Exam. Not just in Connecticut, but across the country, there has been concern among states, educators, and professional organizations about the role of the licensing exam in shaping the social work workforce. Data from the test's own Association of Social Work Boards has shown disparities in pass rates by race and ethnicity, with particularly concerning outcomes for Black test-takers.[x] There is still not clarify in the field regarding whether exam performance is an accurate measure of a practitioner's readiness for real-world practice.[xi] While the exam has historically provided a standardized benchmark and supported licensure portability across states, there is increasing recognition that it may also be limiting entry into the profession. In response, several states have taken steps to suspend or reevaluate exam requirements,

signaling a broader shift toward more equitable and practice-relevant approaches to licensure.[xii] Some states have offered additional supervised work hours as an alternative to exams.

Efforts to improve access to licensing exam preparation have also gained traction, particularly as a strategy to address disparities in pass rates. Schools of social work and state partners are increasingly offering structured test preparation resources, including coursework, workshops, and financial assistance for prep materials.[13,xiii] Some programs are embedding exam preparation into the curriculum to better align academic training with licensure requirements. While these efforts can help level the playing field for students who may not otherwise have access to costly preparation tools, they are generally viewed as one part of a broader set of needed reforms. Test preparation alone does not resolve the underlying concerns about the exam itself, but it can provide more immediate support to students navigating the current system.

Paid Internships and field placements. Field education remains a cornerstone of social work training, yet the expectation that students complete extensive unpaid practicum hours continues to create significant financial strain. This requirement can limit who is able to enter and persist in social work programs, particularly for students from lower-income backgrounds.[xiv] In response, a number of states have invested in paid internship and stipend programs to offset these costs. Initiatives in states such as Michigan, California, Utah, and Massachusetts demonstrate a range of approaches, from direct stipends for students to broader investments in placement infrastructure. In addition to financial support, states are working to expand the number and variety of placement opportunities by offering incentives to agencies, supporting field supervisors, and developing centralized systems to streamline placements. There is also increasing attention to placements in nontraditional and high-need settings, including crisis services, schools, community health centers, and housing programs. These efforts not only support students but also strengthen service capacity in critical areas.

Workforce wages and incentives. Labor market trends point to sustained and growing demand for social workers, driven by increasing behavioral health needs, demographic changes, and the expansion of integrated care.[xv,xvi] Despite this demand, recruitment and retention remain ongoing challenges. Entry-level wages are often low relative to the cost of education, and many graduates carry significant student debt, making it difficult to sustain a long-term career in the field.[xvii,xviii] States are responding with a range of financial incentives designed to attract and retain workers, including loan repayment programs, tuition assistance, scholarships, and paid training opportunities. Some initiatives also prioritize workforce diversity by supporting professionals from historically underrepresented communities. Programs like these create a culture of inclusion, supporting a well-balanced workforce that accurately represents the communities which social work aims to support.

RECOMMENDATIONS

The following recommendations are provided based upon the findings from the landscape analysis, the best practices and innovations observed in other states, and also the context of substantial upcoming changes to the landscape (i.e., the loss of tuition support from CT Health Horizons, the reinstatement of the LMSW exam, and the changes in federal loan repayment policies reducing maximum federal loan amounts).

Recommendations 1 – 7 were included in the 2024 report and continue to remain critical to growing, diversifying and supporting the field. The language of the recommendation and associated descriptions have been updated based upon findings from this landscape analysis. Recommendation 8 is new and based on information specific to this report.

1. **Increase reimbursement rates to raise social worker pay and grow the field**

Connecticut reimbursement rates for behavioral health services have been documented as considerably lower than nearby states.[xix] The last two legislative sessions have included reimbursement rate increases for behavioral health services, and the 2026 session included legislation that requires the establishment of a transparent and systematic rate setting process. These are positive advancements for the state in addressing the low rates, however Medicaid rates (as well as private insurance ones) still do not cover the true cost of care for most services, nor do the proposed rate increases meet the gap identified by the report referenced above. The settings that serve those in greatest need or at highest risk, such as home-based services, residential care, and non-profit outpatient clinics, are those most reliant on insurance reimbursement to pay salaries, and thus have greater challenges filling positions. Raising reimbursement rates provides the opportunity to increase recruitment and retention, and to grow the field, all toward improving access to services for Connecticut residents.

2. **Expand tuition reimbursement and loan forgiveness programs**

With the sunsetting of CT Health Horizons, direct student tuition assistance programs are limited, but are critical to increase the number of students entering the field and to diversify the workforce. The State must monitor the trends in the pipeline to assess the need to re-establish similar tuition support for students. Given the very high proportion of licensed social workers who graduate with student loans, loan forgiveness programs can serve an important role in the system, and strengthen recruitment and retention in settings serving high need populations. These programs can further be utilized to increase diversity, prioritizing students and new graduates who are representative of underserved populations. The State can grant funds to behavioral health employers including those serving high need populations, and those with high vacancy rates, to offer employees loan forgiveness options in their benefit packages.

3. **Increase paid field placements and internships**

Paid field placements are necessary for many students to complete their requirements and graduate on time. When field placements are paid, students do not have to choose between their field placement and their paid job. They are also more likely to participate in opportunities that most interest them (as opposed to the ones that fit their constrained schedule or that do offer pay). These placements often serve as a pathway from school to career, with many sites hiring their field placement students or interns. For employers, finding time for staff to reduce billable hours in their schedule in order to supervise students and interns is the biggest barrier to taking on students. Therefore, incentive pay for agency staff to provide supervision and compensation for lost billable time is also critical to expand these opportunities for students.

4. **Provide support for earlier entry into the field**

This recommendation has been revised from last year to include not only BSW-level investments, but also training and certification programs to support entry-level positions in

social work. The expansion of these types of positions in the field supports the workforce overall by allowing master's-level clinical staff to work toward the top of their license. It can also help in diversifying the field**.** Certification programs such as peer support specialist, community health worker, and alcohol and drug counselor, promote entry into the field for those who may be hesitant to enter a career requiring a bachelor's or master's degree, and also provides an excellent foundation for those who will eventually become social workers. The State can offer direct financial support to students to pay for these low-cost training programs, or support "earn-as-you-learn" programs in which employers pay for the training while also employing the student.

Additionally, the State has an opportunity to develop new Workforce Pell Grant programs which allow individuals to use their Pell Grant funding for short-term high-quality training programs that lead to in-demand jobs. These short-term behavioral health training and certification programs are strong candidates for Workforce Pell Grants.

5. **Expand "hands-on" learning**

Students, members of the current workforce, and employers all agree that more direct experience in the field would be beneficial prior to employment. Innovative solutions, such as simulation labs which are offered at a small number of schools, technology-enabled simulated practice, as well as expanded in-person experiences, have the potential to grow the preparedness of new social workers.

6. **Streamline and standardize data collection**

Landscape analyses such as these could be more frequent and efficient by centralizing and standardizing data collection on the workforce. Supporting staffing at DPH to utilize the licensing and renewal process to collect additional information on licensed social workers, such as their workplace, role, salary, and geographies served, would support efficient, systematic and standardized collection of data that could be analyzed regularly to project workforce supply, and identify areas of need.

7. **Promote the social work field and offer mentorships**

Additional promotion of the social work field is needed to increase and diversify the pipeline. A social work degree offers considerable flexibility in regard to the type of careers graduates can enter. Students expressed interest in hearing directly from those in the social work field about their roles and experiences, and having more opportunities to explore career paths prior to selecting internships. Support to expand social work programs' career development offices to strengthen partnerships with employers and field placement sites could support this recommendation. Students are seeking mentorship opportunities. Partnerships between programs and employers supported through state funding could support mentorship programs tailored to student career interests. Additionally, "upstream" promotion of the field through partnerships with community colleges and high schools could support recruitment of diverse students into the field.

8. **Reduce licensing barriers that delay workforce entry**

With the reinstatement of the LMSW exam, the current delays in licensing may be worsened. The State should ensure that DPH has sufficient resources to support timely exams and turnaround of licenses. Connecticut has one of the most expensive licensing fee structures in the country. Policy should be changed to allow for new graduates to attain licensure for at least one year prior to requiring renewal. Currently graduates pay fees for their initial license and then again on their birthday (this is the subsequent renewal date). Instead, initial payment should cover 12 months plus any remaining days until their *next* birthday (e.g., an individual with a June 1st birthday could make their initial payment on May 1, 2026 and wait until June 1, 2027 for their renewal).

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