



REGISTERED SOCIAL WORKERS AND SOCIAL SERVICE WORKERS IN CANADA

ANALYSES OF THE 2024 SOCIAL WORK WORKFORCE SURVEY

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EXECUTIVE SUMMARY

Using the microdata from the 2024 Social Work Workforce Survey, this study provides, for the first time in history, a detailed and comprehensive look into the characteristics of the Canadian social work workforce by practice category. Social work is one of Canada's largest regulated behavioral health care and social services workforces. Social workers provide counseling, therapy, and other supportive social services in a variety of settings, such as community health centers, child welfare agencies, hospitals, mental health clinics, government departments, and private practice, to improve the social functioning and well-being of their clients. Despite the long history of social work and its vital role in the behavioral and mental health system, its contributions have not been widely recognized, partly due to the lack of coverage for social work services by public health insurance and the absence of national workforce studies that highlight its services to the public. Although knowledge about a workforce generally increases public awareness of the workforce and enhances workers' professional identity, little workforce research has been done to understand the social work workforce in Canada.

Drawing on a sample of 3,437 registered social workers and social service workers from the 2024 Social Work Workforce Survey, this study provides a statistical profile of registered social service workers (14%), bachelor's-level social workers (44.13%), master's-level social workers (34.38%), and clinical social workers (7.48%), focusing on differences in their demographic, employment, practice, and financial characteristics. The survey was part of the 2024 Social Work Census conducted by the Association of Social Work Boards with the leading social work organizations that formed the Social Work Workforce Coalition. The findings of this study intend to enhance knowledge among professional stakeholders and the public about the functions and roles of social workers and social service workers and inform aspiring social work candidates about various practice settings and employment options within the social work field in Canada. Below is a summary of the main findings from this study.

1. What were the key demographic characteristics of registered social workers and social service workers?

- Social service workers (40 years) and bachelor's-level social workers (36 years) were younger than master's-level (43 years) and clinical social workers (50 years).
- The majority of the social workers were native-born, White individuals. Bachelor's-level social

workers had the highest percentage of White social workers at 80.86%, while social service workers had the lowest percentage of White individuals at 59.88%. Only about 8% of bachelor's-level social workers and 16% of master's-level social workers were immigrants.

- Around 92% of clinical social workers held a master's degree, while nearly 8% possessed a PhD or doctoral degree. Approximately 2% of master's-level social workers held a PhD or doctoral degree, whereas no bachelor's-level social workers possessed advanced degrees. About 20% of social service workers had less than a bachelor's degree education; nearly 67% had a bachelor's degree, and 13.51% had a master's degree.
- Around 12% of social workers across practice categories and 8% of social service workers reported having a health condition that limited their work activities.

2. What were the supervision experiences like?

- While about 25% of clinical social workers reported that the supervision question was not applicable, roughly 29% indicated they had paid for supervision.
- Among clinical social workers who received supervision, approximately 84% reported being very or moderately satisfied, whereas 8% expressed dissatisfaction with their supervision experience.

3. How did the employment characteristics of registered social workers and social service workers vary by practice category?

- The overwhelming majority of social workers — more than 80% of bachelor's- and master's-level social workers — and social service workers reported that their positions required a social work degree and registration.
- Provincial governments were the largest employers of social workers and social service workers. Approximately 64–65% of social service workers and bachelor's-level social workers, as well as nearly 44% of master's-level social workers and 39% of clinical social workers, worked for provincial governments.
- Self-employment was highly prevalent among clinical and master's-level social workers. As high as 44% of clinical social workers and more than 28% of master's-level social workers were self-employed, mostly in private solo or group practice.
- A high percentage of social workers across all practice categories reported holding more than one job simultaneously. For example, 39% of clinical, 33% of master's-level social workers, 17% of bachelor's-level social workers, and 16% of social service workers reported holding multiple jobs. On the other hand, Statistics Canada (2022) reported that only about 5% of Canadian

workers were multiple jobholders in 2021.

- Part-time work (≤ 34 hours per week) was prevalent among social workers. Nearly 38% of clinical social workers, more than 31% of master's-level social workers, and 16–19% of bachelor's-level social workers and social service workers reported working fewer than 35 hours per week.
- Compared to other categories of social workers, clinical social workers had far more years of social work experience (an average of 23 years), and bachelor's-level social workers had the fewest years of social work experience (an average of 9 years).

4. How did the practice characteristics of the registered workforce vary by practice category? What percentage of the workforce provided mental health services to their clients?

- As the practice category advanced, the percentage of social workers in health care settings — outpatient care centers, hospitals, and other health services agencies — increased gradually. Conversely, the share of those working in individual and family services agencies declined.
- The largest share of social workers across all practice categories reported that their primary function was to provide mental and behavioral health services. Nearly 80% of clinical social workers, 62.4% of master's-level social workers, 44.71% of bachelor's-level social workers, and 47.19% of social service workers reported that they provided mental and behavioral health services to their clients.
- Almost 79% of clinical social workers, 66% of master's-level social workers, and 44% of bachelor's-level social workers worked as direct service providers, serving clients with a range of needs, including mental health disorders, substance use disorders, child safety and well-being needs, and needs for assistance with daily living activities.
- Approximately 26% of clinical social workers and 30% of master's- and bachelor's-level social workers and social service workers indicated that they used electronic practice more than 50% of their practice time. About 24% of clinical social workers and 18% of master's-level social workers reported working primarily online.

5. What was the amount of student loan debt incurred by registered social workers and social service workers? How much did they earn from their primary job? What employer-provided benefits were available to them?

- A greater proportion of social workers had student loan debt compared to national averages. Only 29.27% of bachelor's-level social workers graduated without student loans, contrasted with

a national rate of 49%. Furthermore, just 38.18% of master's-level social workers completed MSW programs free of student debt, significantly lower than the 56% national estimate reported by Statistics Canada (2024).

- Social workers' median annual gross earnings showed a gradual increase as their practice category advanced, rising from \$74,438 for social service workers, to \$76,478 for bachelor's-level social workers, then to \$85,655 for master's-level social workers, and finally to \$94,832 for clinical social workers. The 75th percentile earnings ranged from \$85,655 for social service workers, \$88,714 for bachelor's-level social workers, \$101,970 for master's-level social workers, and \$115,226 for clinical social workers (all amounts were expressed in 2024 Canadian dollars).
- Compared to national estimates, social workers and social service workers generally had better or comparable rates of access to various employer-provided benefits, including supplemental medical plans, employer contributions to retirement savings plans, and life insurance. These findings were expected given the high prevalence of employment with government agencies.

6. What career and education plans did registered social workers and social service workers have for the next two years, and did these plans vary by practice category?

- About 70% of bachelor's- and master's-level social workers planned to remain in their current positions while pursuing new opportunities and promotion or further training in social work.
- The percentages of social service workers and social workers who reported intentions to leave the social work field were relatively small — 4.16% of social service workers, 3.22% of bachelor's-level social workers, 2.57% of master's-level social workers, and 0.78% of clinical social workers.
- Interestingly, more than 17% of clinical social workers reported a plan to reduce their work hours, while 11% indicated that they planned to retire within two years.

7. How were registered social workers and social service workers distributed across the country?

- Regulatory colleges' compilation of registered social workers and social service workers suggested that about three-quarters of the workforce was concentrated in Ontario (38%), Québec (25%), and Alberta (12%), mirroring the country's population distribution.
- Nationally, there were approximately 1.57 registered social workers and social service workers for every 1,000 Canadians. However, this geographic density varied from a low of 0.96 in British Columbia to a high of 3.22 in Newfoundland and Labrador.

INTRODUCTION

Social work is one of Canada's largest behavioral health care and social services workforces. Social work is regulated by provincial and territorial governments across the country, except for the Yukon and Nunavut territories (The Canadian Council of Social Work Regulators, 2023; Canadian Institute for Health Information, 2025). The profession has more than a century of history in Canada. Education and training programs for social workers were first established at the University of Toronto and McGill University in the 1910s, followed by the establishment of the Canadian Association of Social Workers (CASW) in the 1920s to oversee standards of practice and promote the profession (Edwards et al., 2006). Along with the expansion of the welfare state in the country during the post–World War II era and the 1960s came a rapid growth in the size of the workforce (Edwards et al., 2006). The Canadian Association for Social Work Education (CASWE) was founded in 1967 to establish the standards of undergraduate and graduate education and accredit schools of social work throughout the country (CASWE, 2025).

Regulation of the profession has been a relatively recent development, with Ontario adopting its Social Work and Social Service Work Act in 1998, making it the last jurisdiction to adopt regulatory legislation. This occurred more than 30 years after Manitoba enacted the first social work law in the country in 1966 (Kourgiantakis et al., 2022). In 2009, the Canadian Council of Social Work Regulators (CCSWR) was established to assist provincial and territorial regulatory bodies. Its purpose was to enhance public safety and well-being by creating registration qualifications, professional development standards, and disciplinary policies for social workers (CCSWR, 2025; Manitoba College of Social Workers, 2025). While the 1941 Canadian census reported 1,767 social workers in the country, more than 50,000 registered social workers were reported in 2021 (Canadian Institute for Health Information, 2025; Edwards et al., 2006).

Social workers work with individuals, families, groups, and communities to improve their social functioning and collective well-being by providing counseling, therapy, and other supportive social services. They work in a variety of settings, such as community health centers, child welfare agencies, hospitals, mental health clinics, government departments, and private practices (Statistics Canada, 2023). Across the country, a Bachelor of Social Work (BSW) is typically required for registration with regulatory bodies and entry-level positions in the job market. At the same time, a Master of Social Work (MSW) is necessary for clinical or advanced practice roles within the profession (CASW, 2025b; Government of Canada, 2025b; Mirshahi & Baczkowska, 2023).

According to CASWE (2024), 47 schools offered accredited BSW and/or MSW programs in 2024 nationwide.

Because the Registered Social Worker (RSW) title — and its French equivalent Travailleur(se) Social(e) — is protected in all 10 provinces and the Northwest Territories, social work candidates are required to register with a regulatory authority within their province or territory in order to call themselves Registered Social Workers (or Licensed Social Workers [LSWs] in the Northwest Territories) (CASW, 2025a). Since the authority to regulate the profession lies with provincial and territorial governments, social work regulations differ across the country. This variation particularly pertains to minimum degree requirements, supervised practice experience mandates, certification exam criteria, clinical designations, and regulations governing clinical practices (Mirshahi & Baczowska, 2023). Table 1 summarizes the key interjurisdictional differences in social work regulations across the country.

Table 1

Interjurisdictional Differences in Social Work Regulation in Canada

Percentage of Total Number		Education Requirement	Supervision Requirement	Exam Requirement	Clinical Designation	Private Practice Regulation	Controlled Act
AB	11.98	Associate/ Diploma, BSW, MSW	1,600 hrs for clinical; 1,500 hrs for other	For clinical, some cases ¹	Yes		Psychosocial intervention for mental health
BC	8.50	BSW, MSW	3,000 hrs for clinical	Bachelors, Masters, Clinical	Yes		Only RCSW can diagnose under DSM-5
MB	3.70	BSW, MSW	For private practice	For some cases ²	--		--
NB	3.23	BSW, MSW	--	-	--		APE Criteria pending
NL	2.75	BSW, MSW, DSW/PhD	--	For reentry	--	Yes	--
NS	2.18	BSW, MSW, DSW	36 hrs; 48 hrs	--	--	Yes	--
ON	37.54	BSW, MSW, DSW	--	--	--		Registrants may perform psychotherapy
PE	0.66	BSW, MSW, PhD	--	--	--	Yes	--
QC	25.12	BSW, MSW (*French language requirement)	--	--	--	Yes	Members may perform psychotherapy w/permit

SK	4.36	BSW, MSW, DSW, Certificate in SW	3,000 hours for APE	Clinical exam for APE	(APE)		APE
NT	N/A	Diploma, BSW, MSW, DSW	--		--		--
NU	N/A	No registration required					
YT	N/A	No registration required					

¹ Exams are for those who are greater than three years from graduation in a recognized jurisdiction and have not been regulated in a recognized jurisdiction in the past three years, as well as those internationally educated.

² Exams are for substantial equivalency applicants and graduates from approved, nonaccredited social work programs. Source: CCSWR (2023).

Most Canadian regulatory bodies have a single-tier voluntary registration system to use the protected title of RSWs (or LSWs in the Northwest Territories) (Kourgiantakis et al., 2022). As the first and second columns of Table 1 show, more than 83% of social workers are concentrated in Ontario (37.54%), Québec (25.12%), Alberta (11.98%), and British Columbia (8.50%). Some of the key social work regulations vary across these provinces. For example, while a BSW is generally a minimum requirement to become a registered social worker in Canada, in Alberta and Saskatchewan, people with a diploma in social work (in Alberta) and a certificate in social work (in Saskatchewan) are also allowed to register as social workers. In Ontario, individuals with a two-year diploma from the College of Applied Arts and Technology are allowed to be registered as **social service workers**. Registered social service workers assess, treat, and evaluate individual, interpersonal, and social problems using social service work knowledge, skills, interventions, and strategies to assist individuals, families, groups, organizations, and communities. They often work in social services and government agencies, community-based health centers, group homes and shelters, and income maintenance and youth programs. They have less autonomy than registered social workers and do not commonly work in private practice (Government of Ontario, 2025).

Another significant variation in social work regulations among jurisdictions is the regulation of clinical practice. While all jurisdictions include clinical services in their scope of practice, only a few provinces have a specific clinical designation, resulting in minimal and inconsistent standards of clinical practice. As outlined in Table 1, some regions, including Alberta, British Columbia, and Saskatchewan, recognize clinical social workers through either the Registered Clinical Social Worker designation (RCSW in Alberta and British Columbia) or the Authorized Practice Endorsement (APE in Saskatchewan). These provinces mandate that candidates for clinical social worker roles possess an MSW, fulfill a set number of clinical practice and clinical supervision hours, and pass a clinical certification exam. Furthermore, they permit clinical social workers to independently utilize the

Diagnostic and Statistical Manual of Mental Disorders (DSM) for diagnosing and treating mental health issues (CCSWR, 2023). Conversely, in Ontario and Québec, which have the highest number of registered social workers in the country, a controlled act of psychotherapy exists. Yet no clinical social work designation is provided (Kourgiantakis et al., 2022). In Ontario, registered social workers can conduct clinical practice if they have “appropriate education and training,” while in Québec, they must obtain a psychotherapist permit from the Order of Psychologists of Québec (Government of Ontario, 2025; Order of Psychologists of Québec, 2025).

With this background knowledge about the social work profession in Canada, the purpose of this study is to identify knowledge gaps in the literature and address the gaps by providing a statistical profile of the registered social work and social service workforce using data collected by the 2024 Social Work Workforce Survey. Most important, this study intends to provide the demographic, employment, and practice characteristics of registered social workers and social service workers, for the first time in the literature, by their practice category. By providing detailed information about who they are, what they do, where they work, and whom they serve, this study intends to provide professional stakeholders as well as the public with updated knowledge about registered social workers and social service workers and how their employment and practice are different by practice category. This knowledge base is designed to support stakeholders in their workforce development and professional advocacy efforts. Furthermore, the study aims to inform aspiring social work candidates about job outlooks, career paths, salaries, and compensation related to various employment settings and practice areas within the social work field in Canada.

PREVIOUS STUDIES AND KNOWLEDGE GAPS

Despite the history and importance of the social work profession within Canada's behavioral health care system, the literature provides surprisingly little empirical knowledge about the workforce. Although scholars such as Maton (1988) and Collins et al. (2002) highlighted the lack of research on the social work profession and its workforce over 20 years ago, only a handful of studies have been conducted to contribute to the knowledge base about the profession. A review of the literature identified four empirical studies relevant to the social work workforce that merit discussion here. The first two studies by O'Brien and Calderwood (2010) and Towns and Schwartz (2012) raised questions about the unknown role and contribution of social workers in Canada's mental health system. The other two studies by the CCSWR (2012) and Mirshahi and Baczkowska (2023) provided some basic information about the characteristics of registered social workers across the country. Each study is discussed in more detail below to identify important research questions about the workforce that remained unanswered in the literature.

Studies have highlighted the fact that the valuable contributions of social workers to Canada's mental health system often go unrecognized and unrewarded (O'Brien & Calderwood, 2010; Towns & Schwartz, 2012). This lack of awareness about the practices of registered social workers negatively impacts public perceptions of the profession. Concerned about the scarcity of research on social workers' roles, O'Brien and Calderwood (2010) surveyed 339 Ontario social workers involved in mental health services to assess their contributions to the Canadian health care landscape. Their findings revealed that social workers play essential roles within Ontario's mental health system, engaging in diverse functions such as direct practice, administration, and education. The authors found that social workers predominantly work in community and outpatient environments rather than institutional and inpatient settings and that they provide social assessments, supportive counseling, crisis intervention, psychotherapy, and advocacy.

In a similar study, Towns and Schwartz (2012) investigated the roles of social workers within Canada's mental health care system by analyzing data from the Canadian Community Health Survey. They discovered that social workers were the third most commonly accessed mental health professionals, especially among the following populations: individuals aged 25 to 44; women; those with trade certificates, college diplomas, or university certificates; and individuals from upper-middle-income households. The authors found out that since social work services are usually not covered by health insurance in Canada, individuals in the lowest and lower-middle-income brackets

were the least likely to seek help from social workers. As the survey data used by the authors excluded individuals from marginalized communities, such as those living in homeless shelters or nursing homes, their study could not capture the use of social work services among these groups, hindering their ability to examine the roles of social workers more comprehensively.

These findings in the literature are not surprising given the lack of workforce studies that show the roles and contributions of registered social workers in Canada’s behavioral health care settings. The literature provides only two studies that examined the workforce nationally. One is the 2012 study by the CCSWR, and the other is the 2023 study by Mirshahi and Baczowska with the Canadian Health Workforce Network. More than 10 years ago, the CCSWR (2012) conducted an online survey to examine entry-level competency profiles for the social work profession nationwide. As part of the survey findings, the study presented the key characteristics of 4,902 social work practitioners who completed the survey from across the country. As Table 2 summarizes, approximately 42.5% of respondents reported having a bachelor’s degree, and 45.4% indicated having a master’s degree. Nearly three-quarters of them were from Ontario, Alberta, Québec, and British Columbia. And as high as 86% of them identified as service providers in mental health services (24.58%), medical, hospital, or health services (14.42%), child welfare services (12.38%), and family and children’s services (10.75%). Almost 60% of them reported having more than 10 years of social work experience. Unfortunately, the characteristics of the workforce have not received much attention in the literature, and no other national surveys have been conducted to provide a more detailed and updated understanding of the changing workforce.

Table 2

Characteristics of Social Workers Found in a Survey by CCSWR (2012)

Education	%	Role (check all that apply)	%
Certificate	0.30	Practice/service delivery	86.00
Diploma	3.60	Policy	12.40
Bachelor’s	42.50	Education	22.30
Master’s	45.40	Management	19.30
Doctorate	1.50	Primary practice area	%
No social work degree	1.90	Mental health services	24.58
Other	4.80	Medical, hospital or health services	14.42
Province	%	Child welfare services	12.38
British Columbia	11.73	Family and children’s services	10.75
Alberta	20.30	Addiction services	5.22
Manitoba	4.20	Services to the elderly	4.96

Saskatchewan	3.71	School social services	3.24
Ontario	28.89	Years of social work experience	%
Nova Scotia	6.53	None	0.50
Québec	13.95	Less than 2 years	5.30
New Brunswick	2.65	2–5 years	16.70
Prince Edward Island	1.77	6–10	17.20
NL	5.96	11–15	15.00
Yukon	0.22	16–20	13.50
Nunavut	0.02	More than 20 years	31.50
Northwest Territories	0.06		

Source: CCSWR (2012)

The other study that provides the national profile of registered social workers was conducted by Mirshahi and Baczkowska (2023) of the Canadian Health Workforce Network. Using data obtained from the Canadian Institute for Health Information, they explained that 14% of social workers were younger than 30, 74% were between the ages of 30 and 59, and 12% were 60 or older. They estimated that Newfoundland and Labrador (3.08 social workers), New Brunswick (2.71 social workers), and Nova Scotia (2.44 social workers) are the three jurisdictions with the highest density of registered social workers per 1,000 people. Based on the Government of Canada's data, the authors revealed that social workers in Canada typically earned between \$43,680 and \$93,600 annually, or \$21 to \$45 per hour in 2021. The most important determining factors in remuneration were the level of education and the extent of practical experience. Since most registered social workers were employed in the public sector, many received basic benefits such as paid sick days, vacation time, and health insurance with dental coverage (Mirshahi & Baczkowska, 2023). While this study provided the most recent demographic and earnings data for the registered social work workforce, it lacked details on such characteristics and did not report any practice characteristics.

Although there is limited literature on the social work workforce, available data indicate that this workforce may face a labor shortage in the near future. The Canadian Occupational Projection System (COPS) (2025b) forecasts a national risk of labor shortages in the social work profession between 2024 and 2033. As of 2023, there were 77,500 social workers employed, with 23% of them aged 50 and over. COPS projects that, from 2024 to 2033, the number of social work job openings and job seekers will converge at around 27,000, indicating a potential for labor shortage. COPS also predicts that social workers in social assistance will grow at an annual rate of 1.3% during this period, while those in health care are expected to experience a higher annual growth rate of 2.5% (COPS, 2025b). Additionally, COPS projects that social and community services workers are also

likely to face a labor shortage nationally between 2024 and 2033. According to COPS, around 155,600 social and community service workers were employed in 2023. Over the next 10 years, the number of job openings and job seekers for social and community services workers is projected to converge at around 54,000 to 55,000, also indicating a potential labor shortage (COPS, 2025a).

Building upon the existing studies, this study raises the following questions to address some of the important knowledge gaps about the Canadian workforce in the literature. First, what percentage of registered social workers and social service workers work in mental health settings and provide mental health services to their clients? Are there variations in their services by practice category? Second, what are the demographic, employment, practice, and financial characteristics of registered social workers and social service workers, and how do they vary by practice category? Last, what is the geographic density of registered social workers and social service workers by province? Using the microdata from the 2024 Social Work Workforce Survey, this study provides, for the first time in history, a detailed and comprehensive look into the characteristics of the Canadian social work workforce by practice category.

METHODS

SURVEY INSTRUMENT AND DATA COLLECTION

The 2024 Social Work Workforce Survey instrument was developed through a collaborative process. The author drafted the survey instrument based on reviews of previous workforce studies and survey instruments in social work and other behavioral health care professions, such as marriage and family therapists, registered nurses, licensed professional counselors, and health service psychologists, to identify common and essential survey question items. The draft instrument was then revised based on multiple rounds of discussions and comments from the Association of Social Work Boards (ASWB) and the Social Work Workforce Coalition, which was composed of representatives from all major stakeholder organizations, to ensure that all inputs were considered. Some of the stakeholder organizations included in the coalition were the Canadian social work organizations: the Council on Social Work Education (CSWE), the Association of Baccalaureate Social Work Program Directors (BPD), the Latino Social Workers Organization (LSWO), National Association of Black Social Workers (NABSW), National Association of Deans and Directors of Schools of Social Work (NADD), and Clinical Social Work Association (CSWA).

Additionally, based on the literature review and other professions' workforce studies, much effort was made to include the minimum data elements recommended for a workforce survey, such as education, registration, employment, practice, and demographic characteristics of the workforce (Beck et al., 2016; Gerolamo et al., 2022; Healthcare Regulatory Research Institute, 2023). More specifically, the survey included questions about the following five topics:

- Education: Degrees, the field of study and concentration, year of graduation, and current enrollment in degree programs
- Registration: Registration status, practice category, jurisdictions where social workers are registered, whether or not they paid for supervision if it was required for registration, and how they were satisfied with the supervision
- Employment: If their current or recent social work position required a social work degree and registration, number of years employed in social work, type of employer, size of employer, weekly hours and annual weeks of work, number of jobs, annual gross earnings from the primary job in 2023, employer-provided benefits offered, and future career and educational plans or goals

- Practice: Practice category, primary practice setting, function of the practice setting, client population group, primary role, and use of electronic practice
- Demographic: Year of birth, race and ethnicity, gender, province or territory of residence, language used at home, health conditions, immigration and citizenship status, and parental status

The instrument draft was piloted with a small number of social workers and finalized after addressing any potential concerns. The finalized survey instrument was put on an online platform in three languages: English, French, and Spanish. Human Resources Research Organization (HumRRO) collected and housed the data on behalf of ASWB. The workforce survey was part of the 2024 Social Work Census (swcensus.org), funded and launched by ASWB (2024) between March 1 and June 30, 2024. The 2024 Social Work Census was the most comprehensive study in the history of the profession, targeting both U.S. and Canadian social workers and featuring two national surveys: (1) the workforce survey that collected data on social workers' demographic, employment, and practice characteristics and (2) the practice analysis survey necessary for building the blueprints of the next round of licensing exams. The data collection was done online, and survey participation was promoted through a comprehensive approach using digital, social, and face-to-face strategies. First, a series of email campaigns was launched using the email list of past ASWB examinees and exam registrants to reach more than 514,000 social workers. Subsequently, multiple rounds of targeted outreach efforts were made via paid and organic social media posts and in-person engagements at professional conferences and workshops. Finally, ASWB also collaborated with state and provincial regulatory bodies to increase survey participation among licensed social workers. Nearly 85,000 individuals participated in the Social Work Census, and 52,471 completed the workforce survey, including around 3,500 from Canada.

DATA PREPARATION AND ANALYSES

To identify an analytic sample for this study, respondents who met the following criteria were chosen: (1) they had a social work degree — whether a BSW, MSW, DSW, or PhD in social work — and were registered, (2) they were employed or self-employed, and (3) they held a social work position. Respondents with missing or invalid demographic information (e.g., gender, age, province or territories of residence, race and ethnicity, and education) were excluded from the analyses.

Categorizing respondents was challenging because although regulatory colleges had a single registration system, the 2024 Social Work Workforce Survey allowed multiple registration levels per respondent — social service workers, bachelor’s-level, master’s-level, and clinical — as response options as they defined themselves. Many social workers responded that they were registered at multiple registration levels. The survey also asked respondents if they practice as registered social service workers, bachelor’s-level, master’s-level, and clinical social workers. When the respondents’ answers to registration level and practice categories were examined, the relation appeared to be unclear. For example, there were only 350 clinically registered social workers, but more than 960 responded that they were practicing as clinical social workers. Based on the findings, the sample registered social workers and social service workers were grouped by the following three criteria: self-identified registration level, education level, and practice category. **Social service workers** (N=481) who had at least some postsecondary education, were registered as social service workers, and practiced as social service workers were classified as social service workers. **Clinical social workers** (N=257) were those who had at least a master’s degree, who were registered as clinical social workers, and whose practice category was clinical. The rest were categorized as **bachelor’s-level** (N=1,181) or **master’s-level** (N=1,516) social workers based on their highest degree. Altogether, a total of 3,437 registered social workers and social service workers were included in this study.

It was necessary to weight the survey data to ensure that the sample of registered social workers and social service workers could represent the population of the respective workforce in the country. As indicated, the primary sampling frame of the workforce survey was the email list of past ASWB examinees or exam registrants, even though the outreach efforts targeted other social workers, including nonregistered social workers. As almost all of the collected data from Canadian social workers came from registered social workers and social service workers, it was necessary to create a weight variable using the list of registered social workers and social service workers as the sampling frame. Unfortunately, ASWB’s email list did not contain any basic demographic information to inform about the characteristics of the registered social workers or social service workers. Furthermore, as regulatory colleges used a single registration system, the list was not broken down by education (BSW versus MSW) or practice category (e.g., clinical versus nonclinical). This made creating a post-stratification weight impossible. That is, it was not feasible to create a post-stratification weight to reduce potential bias in the sample and make the sample nationally representative of the universe of the regulated social work workforce and social service workforce.

Readers of this study should be aware that the analyses presented below were *not* weighted and may not represent the national social work and social service workforce. These data limitations should be kept in mind when interpreting the findings.

FINDINGS

REGISTRATION LEVEL AND PRACTICE CATEGORIES

Chart 1 and Table 3 present the detailed percentage compositions of the 3,437 registered social workers and registered social service workers included in this study. As Chart 1 shows, about 14% of the respondents were social service workers, 34.38% were bachelor's-level social workers, and 44.13% were master's-level social workers. Approximately 7.5% of the respondents were clinical social workers. As expected, nearly 80% of the respondents were either bachelor's- or master's-level social workers.

Chart 1

Percentage Distribution of the Sample Based on Self-Identified Registration and Practice Categories

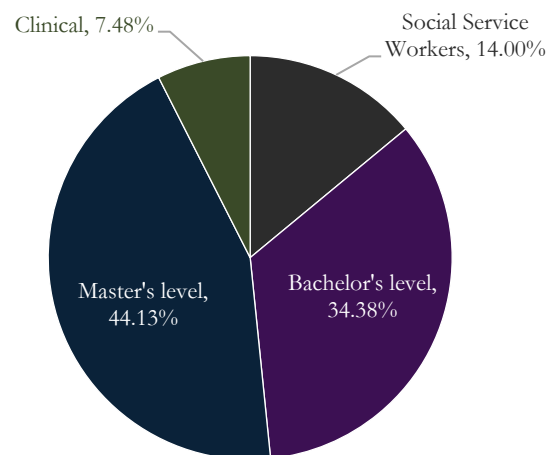


Table 3 provides more detailed information about the registration and practice categories of the sample social workers and social service workers included in this study. As stated above, the survey respondents were allowed to choose their registration level, and many responded that they were registered at multiple levels, as seen in Table 3. For example, while 83.57% of the 481 bachelor's-level social workers responded that they were registered at the bachelor's level, about 20% responded that they were registered as social service workers. Similarly, of the 257 clinical social workers included in this analysis, 42.02% and 11.27% responded that they were also registered as master's- and bachelor's-level social workers, respectively.

In terms of how the sample was distributed across practice categories, 100% of social service workers and 100% of clinical social workers responded that they practiced as social service workers

and clinical social workers, respectively. However, 6.35% of bachelor's-level social workers reported that they practiced as social service workers. Similarly, nearly 47% of master's-level social workers reported that they practiced as clinical social workers (but without being registered as clinical social workers, probably because their regulatory bodies did not require it).

Table 3

Percentage Distribution by Registration Level and Practice Categories

	Social Service Workers	Bachelor's Level	Master's Level	Clinical
	N=481	N=1,181	N=1,516	N=257
Self-defined registration level (check all that apply)				
Social service worker	100.00	20.07	15.96	8.17
Bachelor's	6.44	83.57	16.29	11.28
Master's	1.25	0.00	77.18	42.02
Clinical	0.62	0.00	3.76	100.00
Practice category				
Social service worker	100.00	6.35	1.39	--
Bachelor's	--	93.65	5.61	--
Master's	--	--	46.44	--
Clinical	--	--	46.57	100.00

DEMOGRAPHIC CHARACTERISTICS

Chart 2 presents summary statistics about the demographic profile of social service workers and social workers included in this study. Detailed findings are shown in Table A1 in the Appendix. The table shows that the **mean age** of social service workers was 41.06, with a median age of 40. Bachelor's-level social workers were younger than master's-level social workers. The mean ages of bachelor's- and master's-level social workers were 38.27 and 45.23 years, with the median ages of 36 and 43 years, respectively. Clinical social workers were the oldest group of all, with the mean and median ages of about 51 and 50 years old.

Chart 2

Median and Mean Ages

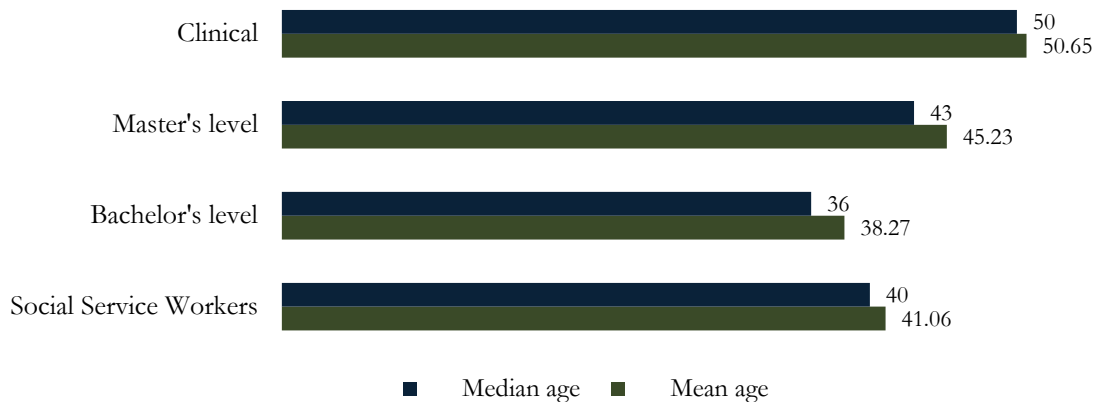
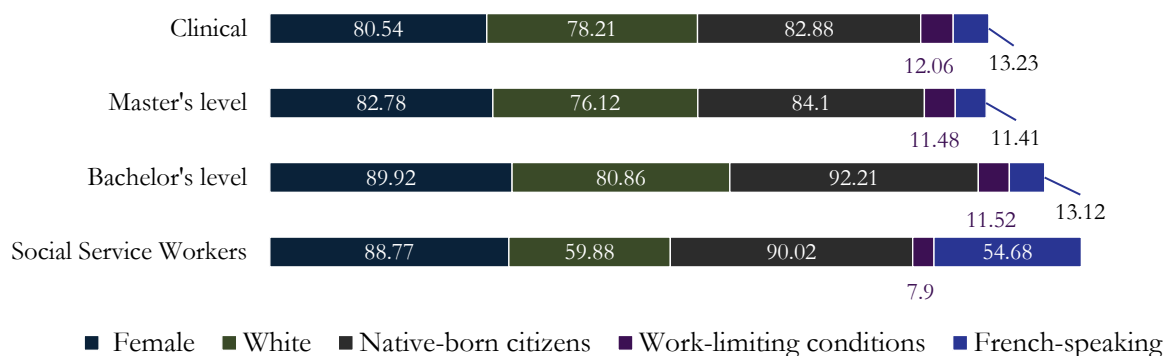


Chart 3

Percentage of Demographic Group



As Chart 3 shows, social service workers and social workers were predominantly **female** across all categories. However, the percentage of women was the highest among social service workers and bachelor's-level social workers at nearly 89–90% and lowest among clinical social workers at almost 81%. In terms of **race and ethnicity**, the majority of the sample were White. Bachelor's-level social workers had the highest percentage of White individuals (80.86%), and social service workers had the lowest percentage of White individuals (59.88%). Additionally, Table A1 in the Appendix shows that about 19% of bachelor's-level and 24% of master's-level social workers were either Indigenous, Asian, Black, and Latin American or people of other races and ethnicities, including a small percentage of examinees who did not respond to the race and ethnicity question. For example, within the master's-level social workers, the proportions of Indigenous,

South and Southeast Asian, and Black and Latin American were 6.33%, 5.15%, and 3.10%, respectively. More than 78% of clinical social workers were White, with Indigenous, South and Southeast Asian, and Black and Latin American social workers comprising 3.50%, 4.28%, and 3.50% of the groups, respectively.

With 84% of master's-level and 92% of bachelor's-level social workers being native-born Canadian citizens, only around 8–16% of the groups were **immigrants**. Within clinical social workers, native-born citizens comprised almost 83% of the group. Table A1 in the Appendix also reports findings about **languages spoken at home**. More than 11% of master's-level and 13% of bachelor's-level social workers reported speaking French at home. Furthermore, nearly 55% of social service workers reported speaking French at home. As seen in Table A1, 2.33% and 7.78% of clinical social workers reported speaking Spanish or languages other than English or French at home.

The workforce survey also included questions about social workers' physical, mental, and other health conditions and whether any of the conditions limited the type and amount of their work. As the bottom rows of Table A1 in the Appendix show, non-negligible percentages of the sample workers reported having various health conditions. For example, some 33% of bachelor's-level and 23% of master's-level social workers indicated having a mental health condition, and about 20% of clinical social workers reported having a mental health condition. As Chart 3 presents, approximately 12% of social workers indicated that their health conditions limited their work activities, while about 8% of social service workers reported so.

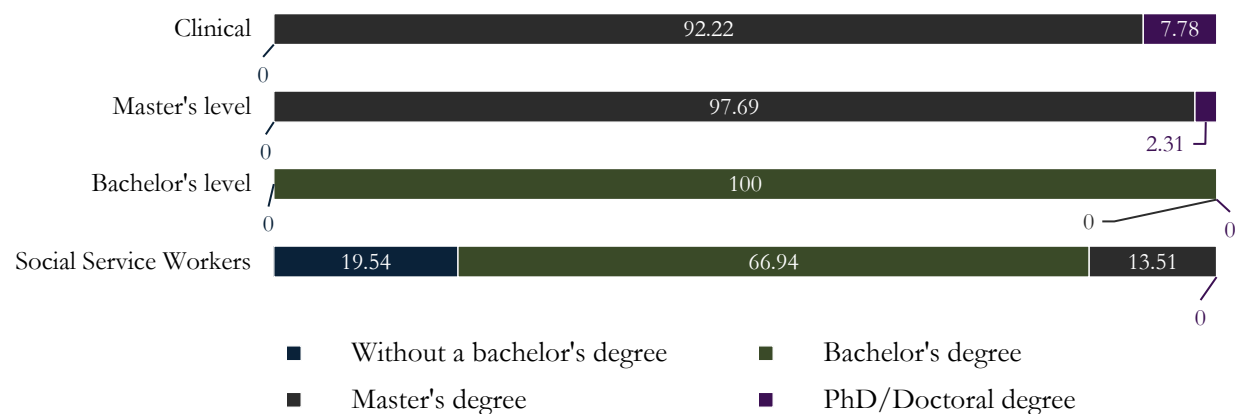
Table A1 in the Appendix also shows how the sample of social workers and social service workers was distributed across the country. More than half of bachelor's-level social workers were concentrated in Alberta (18.54%), British Columbia (17.10%), and Manitoba (18.12%). Nearly 57% of master's-level social workers were located in Ontario (36.81%) and British Columbia (19.59%). More than three-quarters of clinical social workers were located in Alberta (31.13%), British Columbia (22.57%), and Ontario (22.18%). On the other hand, about a third of social service workers were concentrated in New Brunswick.

EDUCATIONAL CHARACTERISTICS

Table A2 in the Appendix presents findings about the educational characteristics of the sample social service workers and social workers. Chart 4 shows that about 92% of clinical social

workers had a master's degree, but nearly 8% had a PhD or doctoral degree. About 2% of master's-level social workers also had a PhD or doctoral degree, but no bachelor's-level social workers had a graduate or more advanced degree. The educational composition of social service workers was the most diverse. While nearly 67% of them had a bachelor's degree, about 20% and 13.51% had less than a bachelor's degree or had a master's degree, respectively.

Chart 4
Percentage of Highest Education

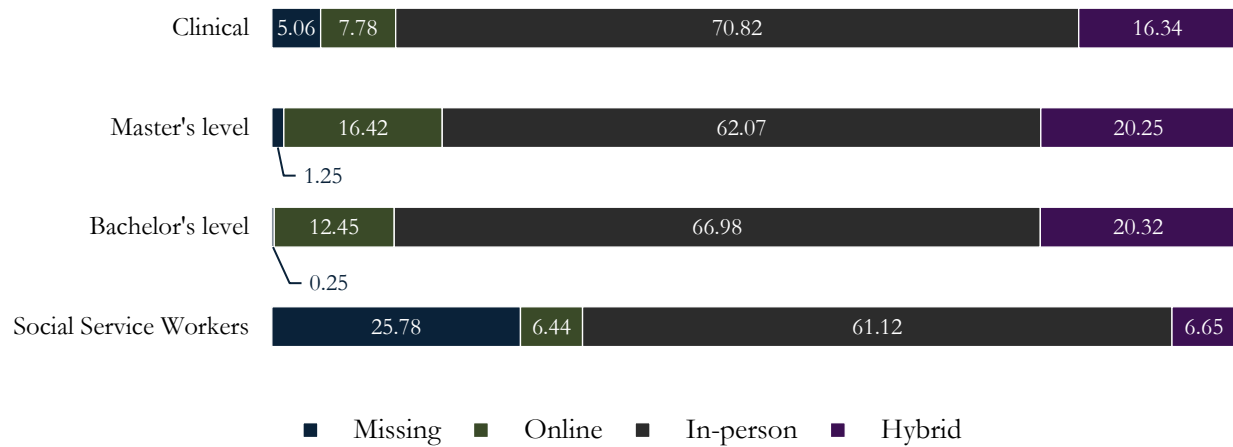


As Table A2 suggests, the majority (about 66%) of master's-level social workers and clinical social workers did not provide their undergraduate majors. Yet among those who responded to the question, most reported majoring in social work. Nearly 95% of bachelor's-level social workers provided their undergraduate majors, and more than 94% of the respondents reported that they majored in social work. Likewise, nearly all of the master's-level and clinical social workers who responded to the graduate major question reported that they had an MSW.

Chart 5 shows that while most social workers earned their highest degrees (undergraduate degrees for social service workers and bachelor's-level social workers and graduate degrees for master's-level and clinical social workers) through an in-person program, a considerable share earned their degrees from hybrid or online programs. The percentage earning a degree from a hybrid or online program was the highest among master's-level social workers, at 20.25% and 16.42%, respectively. On the other hand, nearly 71% of clinical social workers completed their MSW through an in-person program, while 16.34% and 7.78% did so through a hybrid or an online program, respectively.

Chart 5

Percentage of Program Type for the Highest Degree¹ Earned

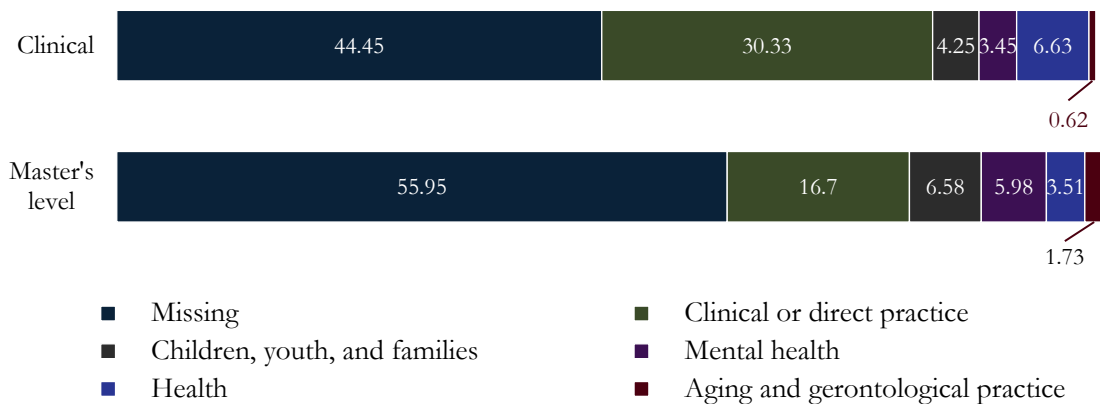


¹ Highest degrees mean undergraduate degrees for social service workers and bachelor's-level social workers and graduate degrees for master's-level and clinical social workers.

Chart 6 presents findings about master's-level and clinical social workers' concentrations in their MSW programs. Although about half of the respondents did not answer the concentration question, the top choices among those who answered were clinical or direct practice; children, youth, and families; and mental health. More than 30% of clinical social workers reported choosing clinical or direct practice concentration in their MSW programs.

Chart 6

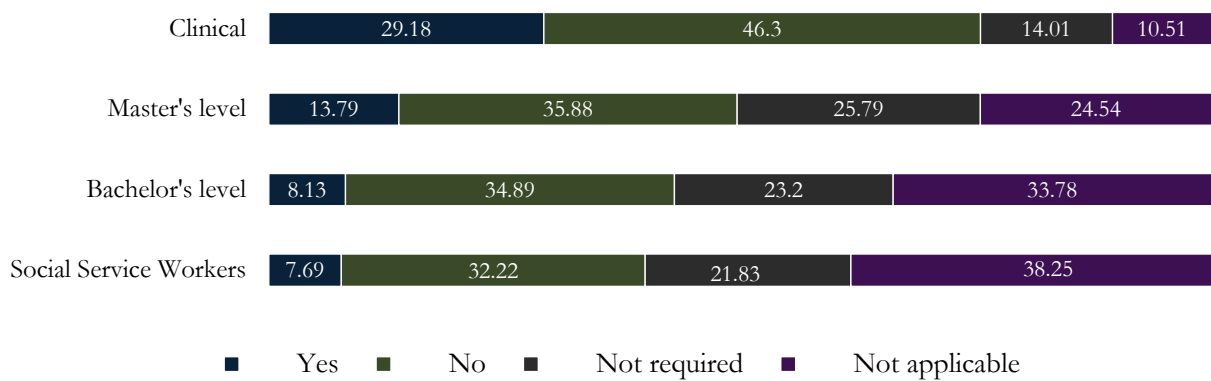
Percentage with Top Five Concentrations for MSW Programs



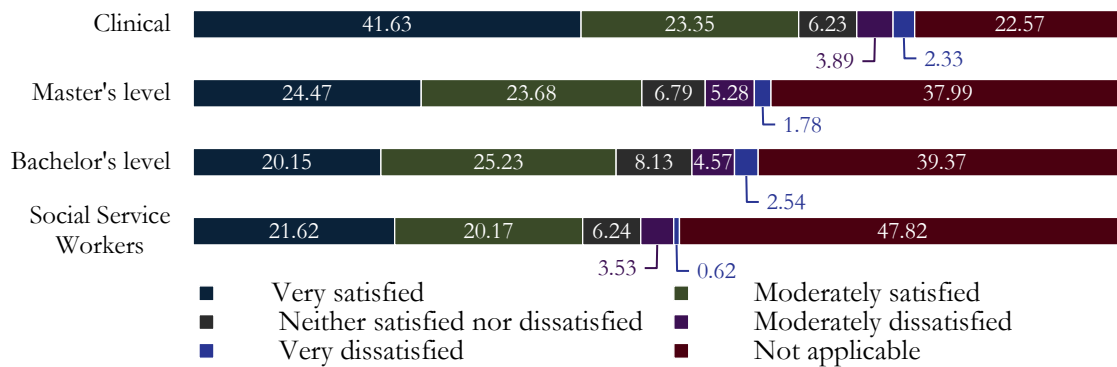
SUPERVISION EXPERIENCE

Table A3 in the Appendix reports detailed findings about the supervision-related experiences of the sample social workers and social service workers. The workforce survey asked respondents whether they paid for supervision and how satisfied they were with supervision. Charts 7 and 8 summarize the findings. While about 25% of clinical social workers reported that the question was nonapplicable or that supervision was not required, about 29% of them indicated having paid for supervision. Similarly, about 14% of master’s-level social workers and 8% of bachelor’s-level social workers and social service workers reported that they paid for supervision.

Chart 7
Percentage Paying for Supervision



As Chart 8 suggests, most clinical social workers were either very satisfied or moderately satisfied with their supervision experiences. While 22.57% of clinical social workers reported that the question was nonapplicable, 65% responded that they were either very or moderately satisfied with the supervision experience, indicating that approximately 84% of those who received supervision were very or moderately satisfied. In contrast, according to the chart, 3.89% and 2.33% of clinical social workers reported that they were moderately and very dissatisfied with their supervision experience. These numbers suggest that approximately 8% of clinical social workers who received supervision were dissatisfied with their experience. The chart also suggests that most social workers and social service workers who received supervision were, in general, satisfied with their supervision experience.

Chart 8*Percentage Satisfied with Supervision*

EMPLOYMENT CHARACTERISTICS

Findings about the employment characteristics of social workers and social service workers draw special attention. They not only reveal the labor market values of social work degrees and registration in the country but also highlight differences in the workers' employment characteristics by practice category. Table A4 in the Appendix presents detailed findings. Chart 9 shows that the overwhelming majority of social workers and social service workers reported that their positions required or preferred a social work degree. Furthermore, the percentage of those reporting that their positions required a social work degree gradually increased from 70% of social service workers, 79% of bachelor's-level, 83% of master's-level, to 86% of clinical social workers. While more than 90% of social service workers and social workers reported that their positions required or preferred a social work degree, the percentages reporting that a social work degree is preferred declined from 21% of social service workers, 17% of bachelor's-level social workers, 11% of master's-level social workers, to less than 7% of clinical social workers.

Chart 9

Percentage Reporting That Their Position Required or Preferred a Social Work Degree

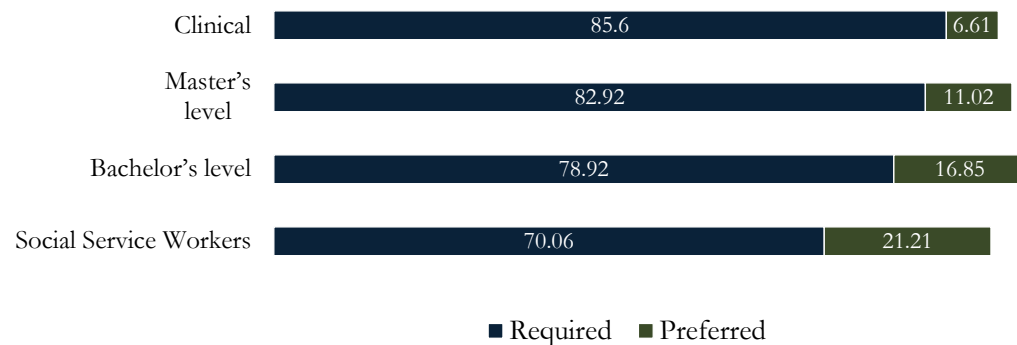


Chart 10

Percentage Reporting That Their Position Required or Preferred Social Work Registration

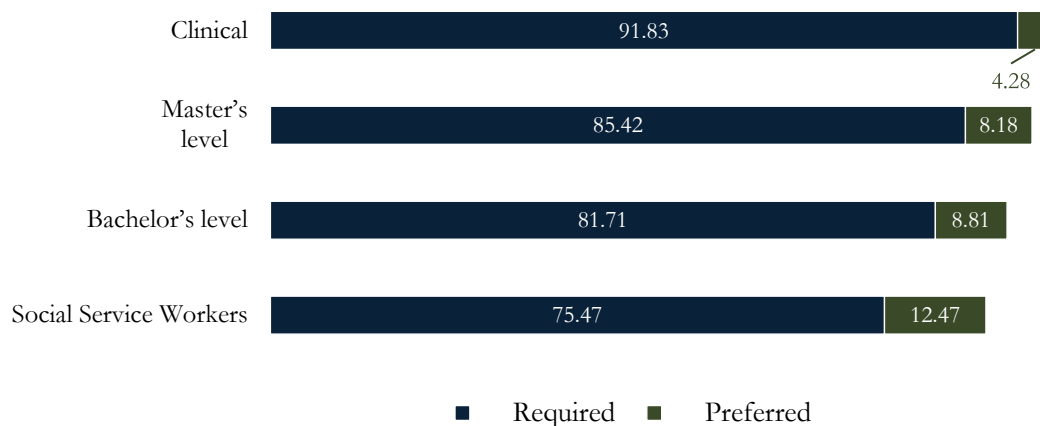


Chart 10 also shows how social work registration was required or preferred by the positions that the social service workers and social workers held. Similar to the findings above, the overwhelming majority responded that their positions required or preferred them to be registered as social workers or social service workers. As expected, nearly 92% of clinical social workers reported that their position required a social work registration, followed by 85% of master's-level and 82% of bachelor's-level social workers. More than 75% of social service workers reported that their positions required them to be registered. The percentage of those reporting that their position preferred a registration increased from 4% of clinical social workers, 8% of master's-level and 9% of bachelor's-level social workers, to 12% of social service workers.

Chart 11 presents the type of employers for which the sample social workers and social service workers worked. Overall, the findings showed that provincial governments were the largest employers of social workers and social service workers. Approximately 64–65% of social service workers and bachelor’s-level social workers worked for provincial governments, followed by nearly 44% of master’s-level social workers and 39% of clinical social workers. Private nonprofit employers were also important in that about 17% of bachelor’s-level social workers and social service workers and 16% of master’s-level social workers worked for private nonprofit agencies. One of the most interesting findings is that **as high as 44% of clinical social workers were self-employed** (33.85% were in private solo practice, 4.28% were in group practice, and 5.84% worked as independent contractors). **More than 28% of master’s-level social workers were also self-employed**, with 18.21% in private solo practice, 4.29% in group practice, and 5.61% in independent contracting.

Chart 11

Percentage Breakdown of Employer Type

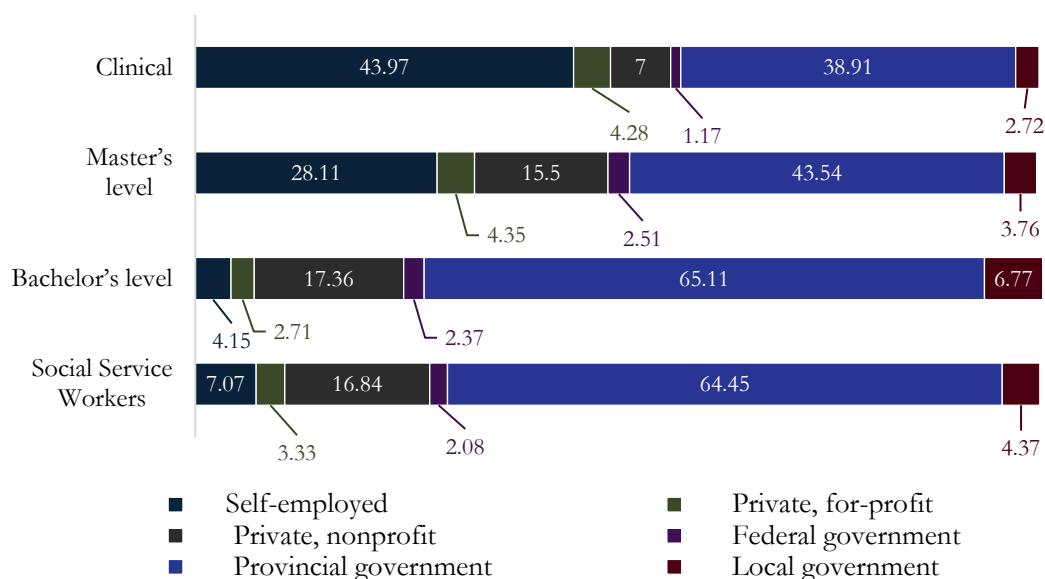
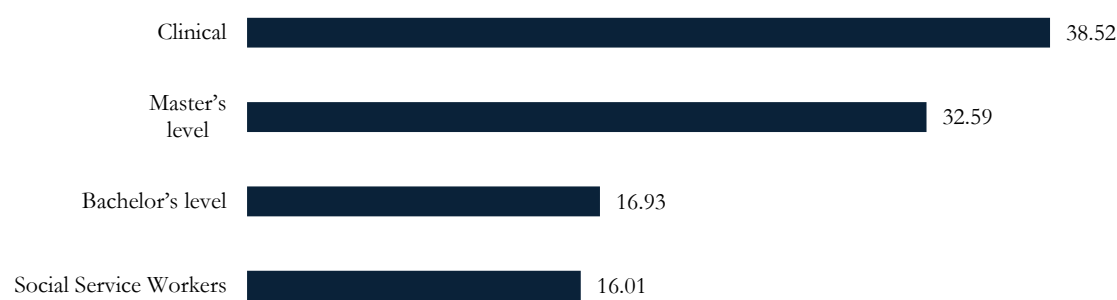


Table A4 in the Appendix also presents the fact that the size of employers varied by the categories of social workers who worked as employees. While about 51% of social service workers worked for a large employer with at least 1,000 employees, 55% of bachelor’s- and master’s-level social workers and 67% of clinical social workers did so, indicating that advanced social work positions are related to working for larger employers.

Another interesting finding about the employment characteristics was that a high percentage of social workers, particularly clinical and master’s-level social workers, reported holding more than one job simultaneously. Chart 12 below shows that as high as 38.52% of clinical social workers and 32.59% of master’s-level social workers indicated holding multiple jobs. In fact, the rate of **holding multiple jobs** appeared to be very high across all categories of social workers and social service workers when compared to 5.1% among all Canadian workers in 2021 (Statistics Canada, 2022). This high rate of holding multiple jobs may suggest that the earnings from social work jobs are insufficient and/or that these social workers have diverse interests or skills. Since the workforce survey did not ask any further questions about multiple jobs, these findings call for future studies to examine the motivations for and characteristics of multiple job activities.

Chart 12
Percentage Holding Multiple Jobs



Findings about how much social workers worked per week and year-round reveal other interesting differences by practice category. As presented in Table A4 in the Appendix, clinical social workers and master’s-level social workers worked an average of 32 and 33 hours per week, while bachelor’s-level social workers and social service workers worked an average of 36 hours per week. The median weekly work hours was 35 hours for clinical social workers but about 37 hours for other categories of social workers and social service workers. The table also shows that the median annual work weeks for clinical social workers was 50 weeks per year, while the medians for the rest of the categories of social workers were 52 weeks. According to Chart 13, higher shares of clinical and master’s-level social workers worked part-time (that is, less than 35 hours per week). More specifically, nearly 38% of clinical social workers and more than 31% of master’s-level social workers worked fewer than 35 hours per week. On the other hand, 16–19% of bachelor’s-level social

workers and social service workers reported working part-time per week. Similarly, Chart 14 presents the fact that while more than 42% of clinical social workers worked part year, less than 30% of master’s-level social workers and social service workers and less than 20% of bachelor’s-level social workers worked part year. Both charts suggest that clinical social workers worked fewer hours throughout the year.

Chart 13
Percentage Distribution of Weekly Work Hours

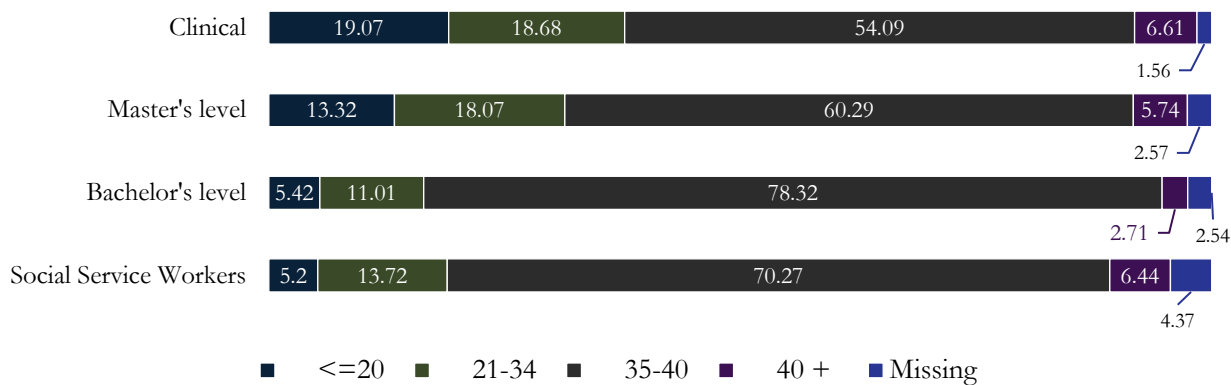


Chart 14
Percentage Distribution of Annual Work Weeks

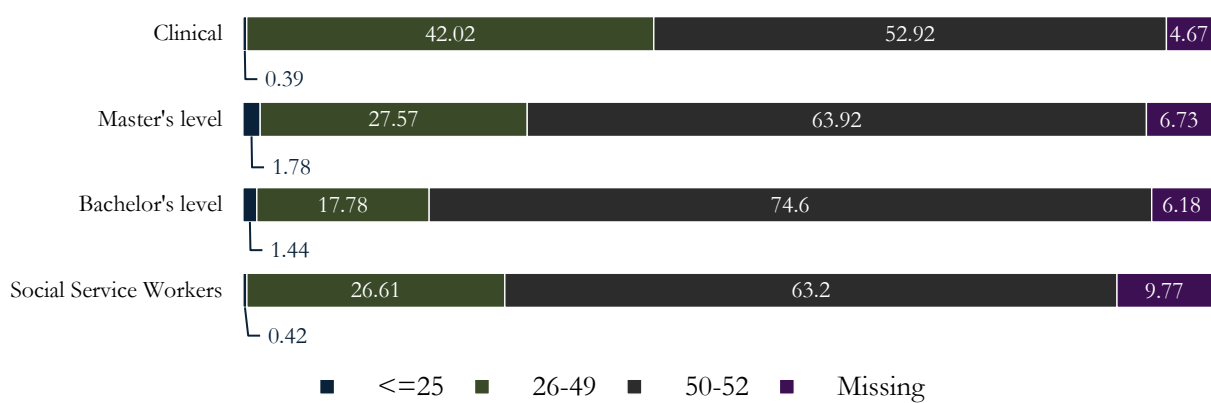
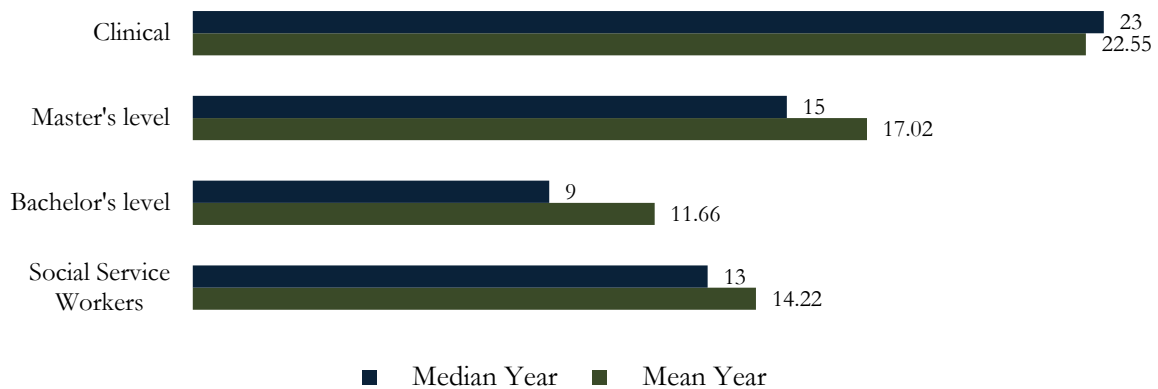


Chart 15 shows that the number of years the sample social workers worked in social work varied widely. Clinical social workers had far more **years of social work experience** than any other category of social workers (as indicated by the fact that they were older than the rest). The average years of social work experience among clinical social workers was 23 years, six years longer than 17

years among master’s-level social workers. At nine years, bachelor’s-level social workers had the shortest social work experience, as they were the youngest group, and the average years of social work experience among social service workers was 13 years.

Chart 15

Number of Years of Social Work Experience



Although not presented in any charts, the bottom rows of Table A4 in the Appendix revealed findings about the social workers’ current job tenure. Master’s-level social workers and social service workers, on average, worked with their current employers for about eight and nine years. However, clinical social workers worked for nearly 11 years, while bachelor’s-level social workers had only about seven years with their current employers.

PRACTICE CHARACTERISTICS

Tables A5 through A9 in the Appendix report detailed practice characteristics of social workers and social service workers, including practice setting, function, client groups, primary roles, and the use of electronic practice. Chart 16 summarizes social workers’ **practice settings** by presenting the top five settings for all practice categories: (1) individual and family services agencies, (2) elementary or secondary schools, (3) outpatient care centers, (4) general or specialty hospitals, and (5) other health care agencies. Although all categories of social workers worked in these five settings, the prevalence differed considerably by practice category. Overall, as the category moved from social service workers, bachelor’s-level, master’s-level, to clinical social workers, the share working in three health care settings — outpatient care centers, hospitals, and other health services

agencies — increased gradually. Conversely, the share of those working in individual and family services agencies declined correspondingly. While the largest percentage of social service workers (41%) worked in individual and family services agencies, only about 11% of them worked in the three health care settings. On the other hand, only about 16% of clinical social workers reported working in individual and family services agencies. However, nearly 56% of them worked in the three health care settings, the largest being outpatient care centers. Smaller percentages of master’s-level social workers, compared to clinical social workers, worked in outpatient care centers (10.31% versus 23.91%). However, similar shares of the two groups worked in hospitals and other health care services agencies.

Chart 16
Percentage of Top Five Practice Settings

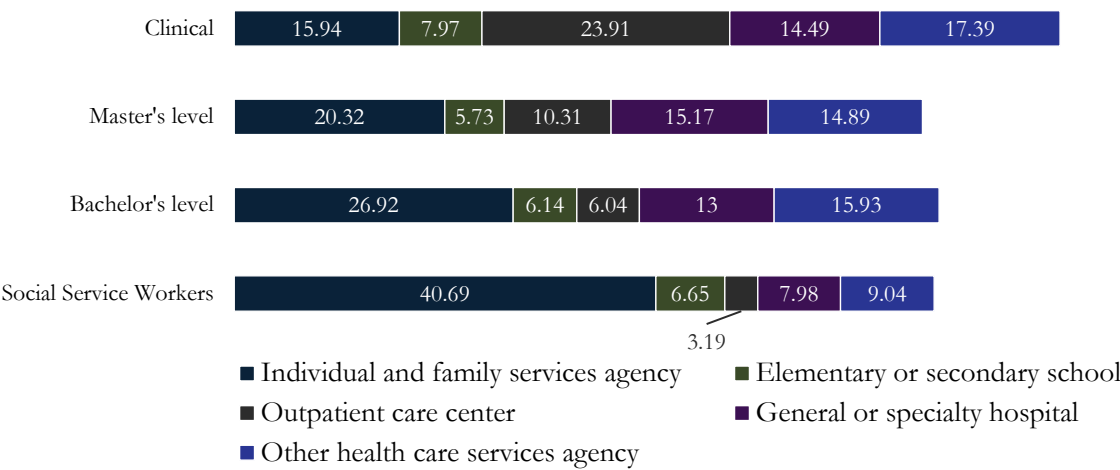
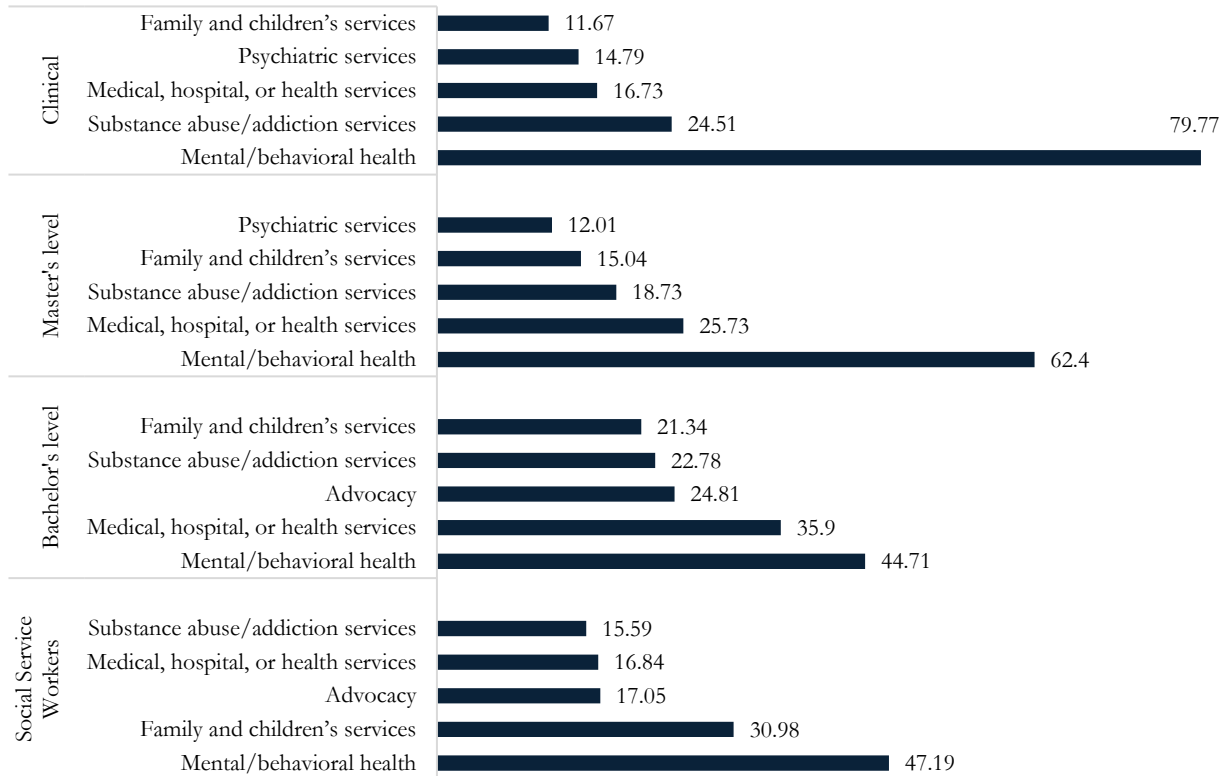


Table A6 in the Appendix, as well as Chart 17, show findings about social workers’ **practice functions**. These findings help address one of the main concerns in the literature about social workers’ contributions to the mental and behavioral health care system (O’Brien & Calderwood, 2010; Towns & Schwartz, 2012). Chart 17 reveals that the largest shares of social workers across all categories reported providing mental and behavioral health services. Nearly 80% of clinical social workers, 62.4% of master’s-level social workers, 44.71% of bachelor’s-level social workers, and 47.19% of social service workers reported that they provided mental and behavioral health services. Substance abuse and addiction services were also one of the top five functions of these workers across all categories. These findings clearly demonstrate the undeniable contributions that social workers make to the Canadian mental and behavioral health care system. Besides those functions, a

considerable share of social workers also reported providing medical, hospital, or health care services; family and children’s services; and advocacy services. Furthermore, about 15% of clinical social workers and 12% of master’s-level social workers reported providing psychiatric services.

Chart 17

*Percentage of Top Five Practice Functions,
Check All That Apply*



Four charts from Charts 18 to 21 summarize findings about the **main client groups** that the sample social workers reported to serve. Table A7 in the Appendix presents detailed findings. According to Chart 18, social workers appear to serve clients of all age groups, including children, adolescents, adults, and older adults, regardless of their practice categories. No visible pattern was observed in their client age groups.

Chart 18

*Percentage Reporting to Serve Clients by Client Age Group,
Check All That Apply*

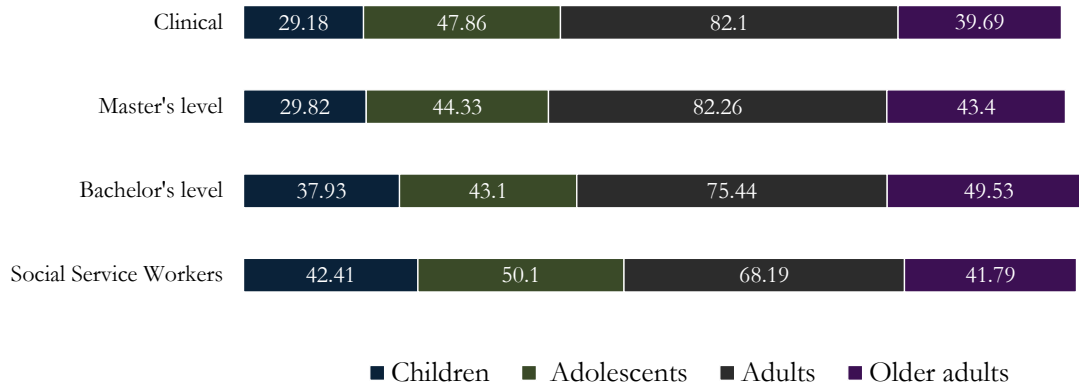


Chart 19

*Percentage Reporting to Serve Clients by Client Characteristics,
Check All That Apply*

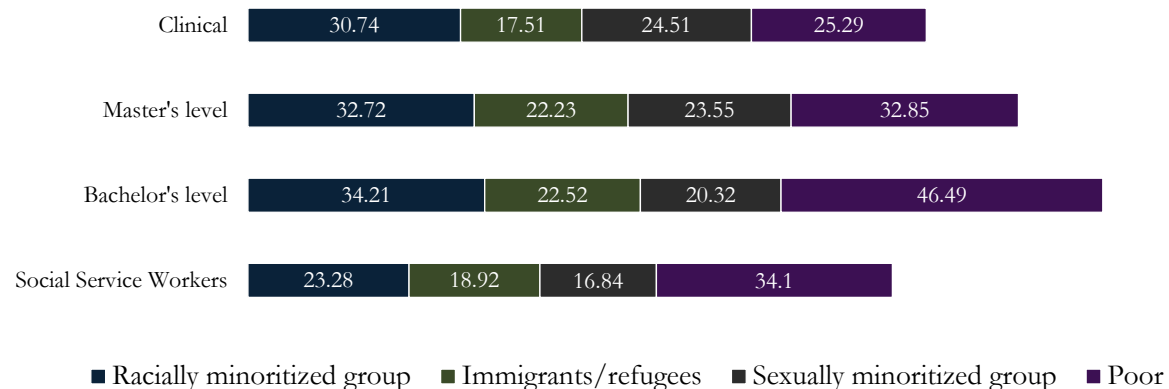


Chart 19 shows that the sample social workers and social service workers in this study served diverse client groups, including members of racially minoritized groups, immigrants and refugees, members of sexually minoritized groups, and people with limited incomes, regardless of their practice categories. Although no visible pattern emerged in terms of which categories of social workers tend to focus on certain client groups, the largest share of bachelor's-level social workers (46.49%) reported serving people with limited incomes. In contrast, the lowest percentage of clinical social workers (25.29%) worked with the same client group.

As shown in Chart 20, social workers and social service workers worked with clients who

had diverse language backgrounds. More than 28% of social service workers served clients whose primary language was French. This finding should be relevant to the findings that more than 50% of social service workers were located in Québec and New Brunswick. While a small percentage of social workers and social service workers reported serving clients whose primary language was Spanish, approximately 12–15% indicated that they worked with clients whose primary language was not English, French, or Spanish.

Chart 20
Percentage Reporting to Serve Clients by Client Primary Language, Check All That Apply

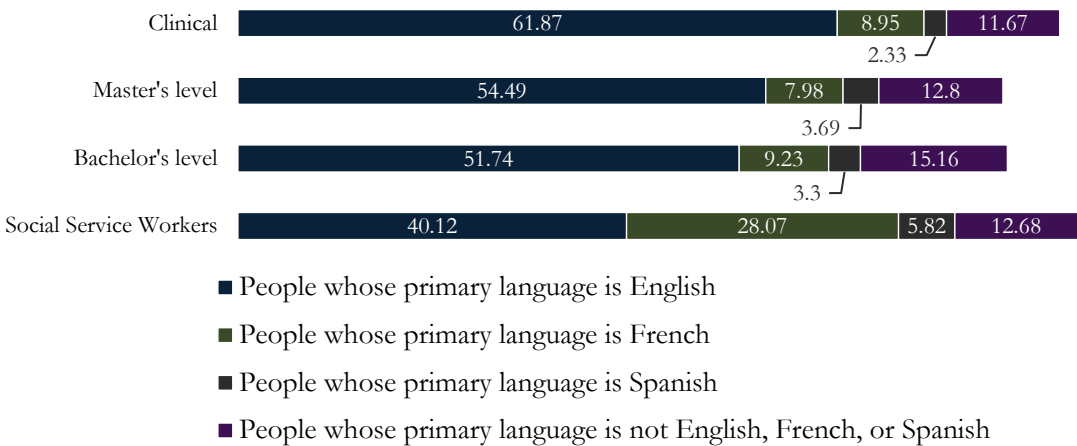


Chart 21
Percentage Reporting to Serve Clients by Client Needs, Check All That Apply

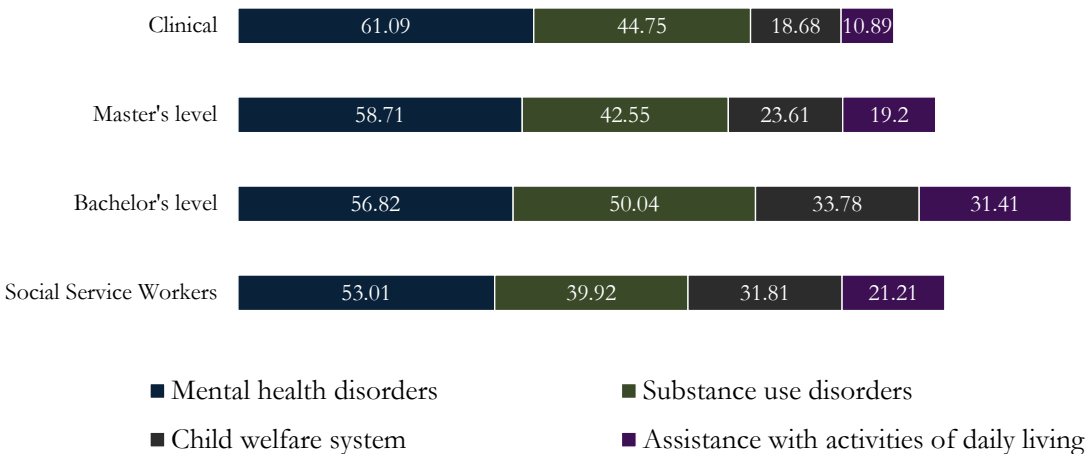
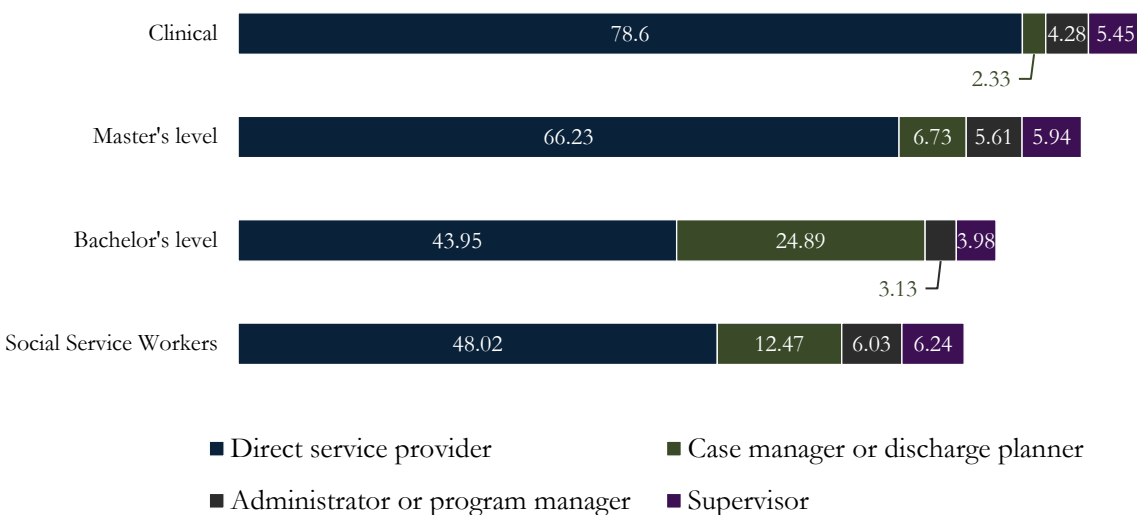


Chart 21 shows that social workers and social service workers served clients with various needs, including mental health disorders, substance use disorders, issues with child safety and well-being, and needs for assistance with daily living activities. Part of this finding reinforces the findings discussed above about the share of social workers providing mental and behavioral health care services. Compared to social workers of other practice categories, a higher share — about a third (33.78%) — of bachelor’s-level social workers reported assisting people involved with the child welfare system as well as those who need assistance with daily living activities (31.42%). As expected, the share of social workers serving people with mental health disorders increased as the practice category moved up, from 56.82% among bachelor’s-level social workers to 58.71% among master’s-level social workers and again to 61.09% among clinical social workers.

The workforce survey asked social workers what their **primary roles** were in their practice settings, and the top four roles are summarized in Chart 22.

Chart 22

Percentage of Top Four Primary Roles



The chart suggests a close relationship between social workers’ practice category and their roles. Almost 79% of clinical social workers identified as direct service providers, compared to 66% of master’s-level and 44% of bachelor’s-level social workers. The prevalence of direct service provider roles appears to be related to the mental and behavioral health services that most social workers reported providing. Nearly a quarter of bachelor’s-level social workers were case managers or discharge planners, but less than 7% of master’s-level social workers identified with such roles.

Social service workers' primary roles were relatively evenly divided into being direct service providers (48%), case managers (12.5%), administrators (6%), and supervisors (6%).

As electronic practice has become increasingly important in promoting client access to health care, the workforce survey included a question regarding its use. In the question, **electronic practice** was defined as providing services electronically using the internet, social media, online chat, text, email, smartphone, or other platforms. According to Table A9 in the Appendix and Chart 23, only a small percentage (approximately 2–6%) of social workers and social service workers reported that they have never engaged in electronic practice. Among those who utilized electronic practice 100% of the time, the highest percentage consisted of clinical social workers, with around 10% indicating that they engaged in it 100% of their practice time. Workers across all practice categories reported using electronic practice more than 50% of the time. Specifically, approximately 26% of clinical social workers and 30% of master's- and bachelor's-level social workers and social service workers indicated that they used electronic practice more than 50% of their practice time.

Chart 23

Percentage of Time Using Electronic Practice

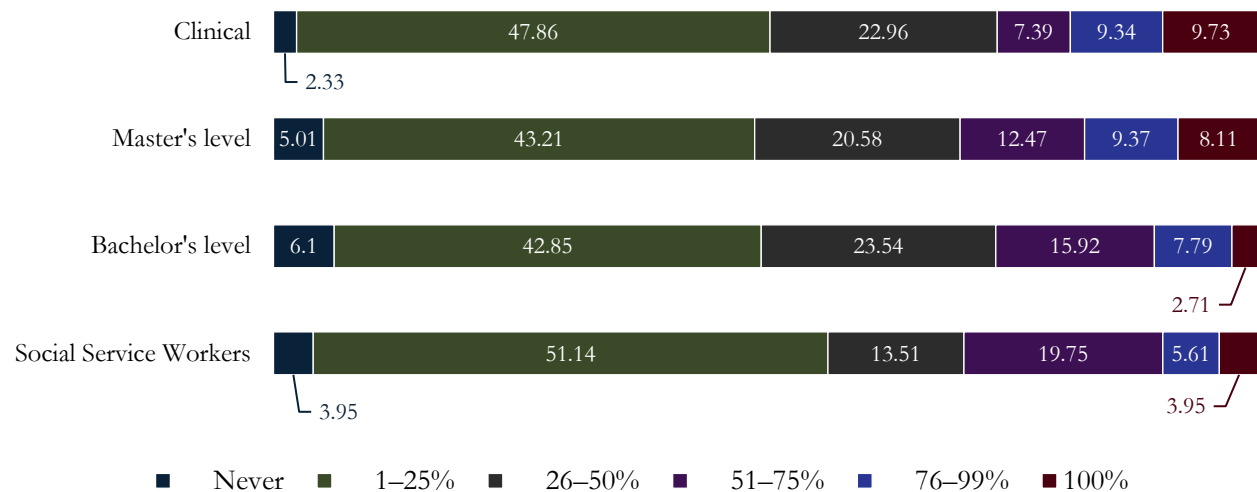
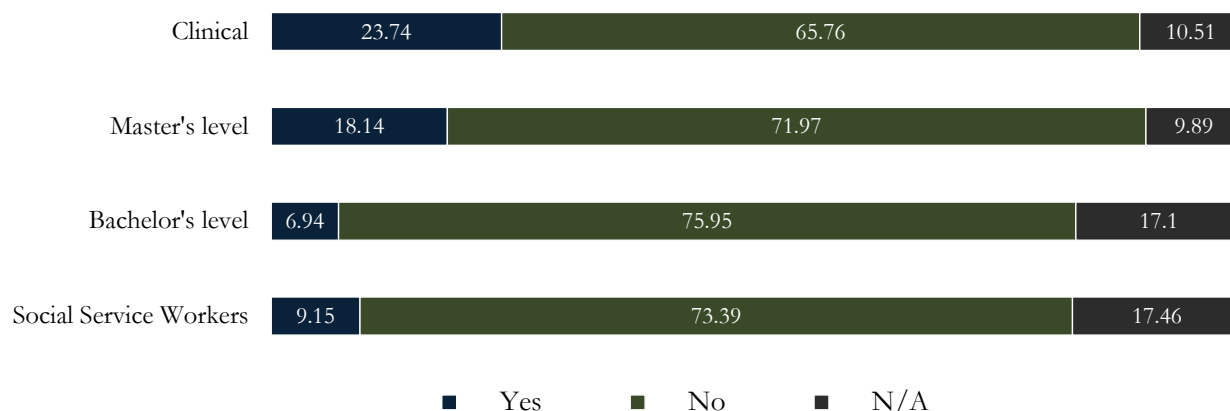


Chart 24*Percentage Working Primarily Online*

In the workforce survey, respondents were also asked whether they worked primarily online. The findings presented in Chart 24 show that about 24% of clinical social workers did so, followed by 18% of master's-level social workers, 7% of bachelor's-level social workers, and 9% of social service workers. In general, as the practice category moved from bachelor's-level social workers to clinical social workers, the percentage of those working primarily online increased steadily, although a higher percentage of social service workers than bachelor's-level social workers reported working primarily online (9.15% versus 6.94%). It is also important to note that a considerable share of social workers — 17% of both bachelor's-level social workers and social service workers — indicated that online practice was not applicable to their work.

FINANCIAL CHARACTERISTICS

Table A10 in the Appendix shows detailed findings about the financial characteristics of social workers and social service workers, such as the amount of student loan debt, annual gross earnings from the primary jobs, and percentages of those with employer-provided benefits. It is known that the amount of student loan debt varies by the level of education. According to Statistics Canada (2024), about 51% of bachelor's degree holders had student loan debt at the time of graduation, with an average amount of \$27,900 and a median of \$21,700. It was known that 38% of bachelor's degree holders had debt exceeding \$30,000. For master's degree holders, around 44% owed student loan debt at the time of graduation, with an average of \$33,300 and a median of

\$25,000. About 43% of these graduates were known to owe more than \$30,000 (Statistics Canada, 2024).

Findings presented in Chart 25 suggest that, compared to the national statistics discussed above, a higher percentage of social workers graduated from postsecondary institutions with **student loan debt**. For example, only 29.27% of bachelor’s-level social workers graduated from undergraduate programs without student loan debt, compared to the national rate of 49%. Additionally, only 38.18% of master’s-level social workers graduated from MSW programs without student loan debt, lower than the 56% national rate reported by Statistics Canada (2024). Furthermore, Chart 25 shows that nearly 33% of social service workers and more than 29% of bachelor’s-level social workers had student loan debt exceeding \$43,006 at the time of graduation. For master’s-level and clinical social workers, the percentages holding more than \$43,006 in student loan debt were smaller at 22.44% and 24.33%, respectively.

Chart 25
Percentage Breakdown of Student Loan Debt Amount Upon Graduation With the Highest Degree (in Canadian Dollars)

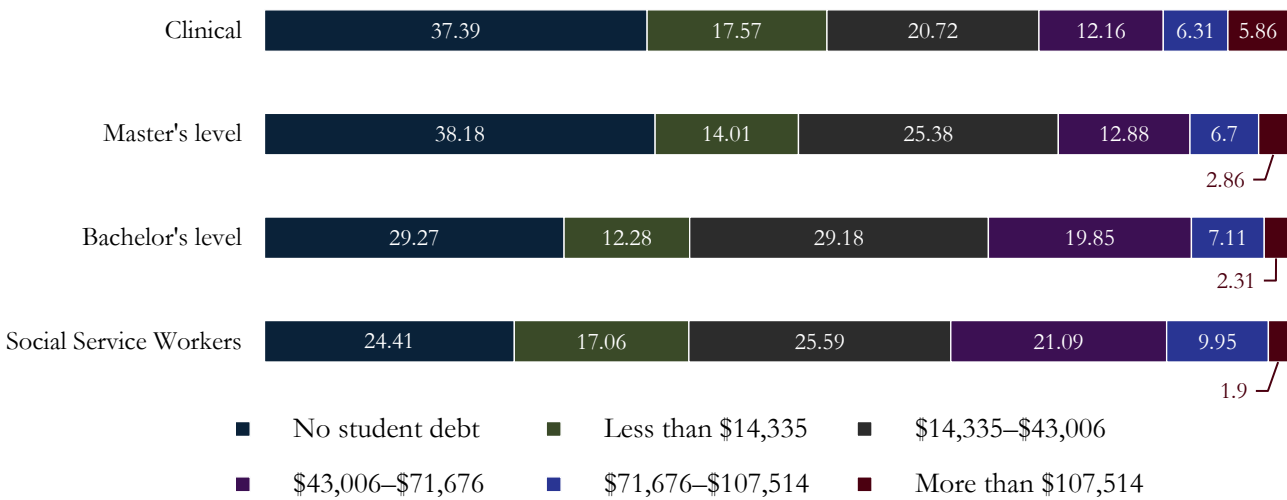


Chart 26 reveals the **annual gross earnings** (from the primary job) of social service workers and social workers at the 10th, 25th, 50th, 75th, and 90th percentile by their practice category. These workers’ 50th percentile (median) earnings increased steadily as their practice category moved from social service worker (\$74,438), bachelor’s-level social worker (\$76,478), master’s-level social worker (\$85,655), to clinical social worker (\$94,832). This gradual increase in annual gross earnings by practice category was also observed at each percentile of earnings, except for the lowest 10th

percentile. At the 75th percentile, for example, earnings ranged from \$85,655 for social service workers, \$88,714 for bachelor’s-level social workers, \$101,970 for master’s-level social workers, and \$115,226 for clinical social workers. As Table A10 in the Appendix shows, the mean gross earnings were \$72,928 for social service workers, \$75,037 for bachelor’s-level social workers, \$83,301 for master’s-level social workers, and \$94,028 for clinical social workers.

Chart 26
Annual Gross Earnings from the Primary Job (in 2024 Canadian Dollars)

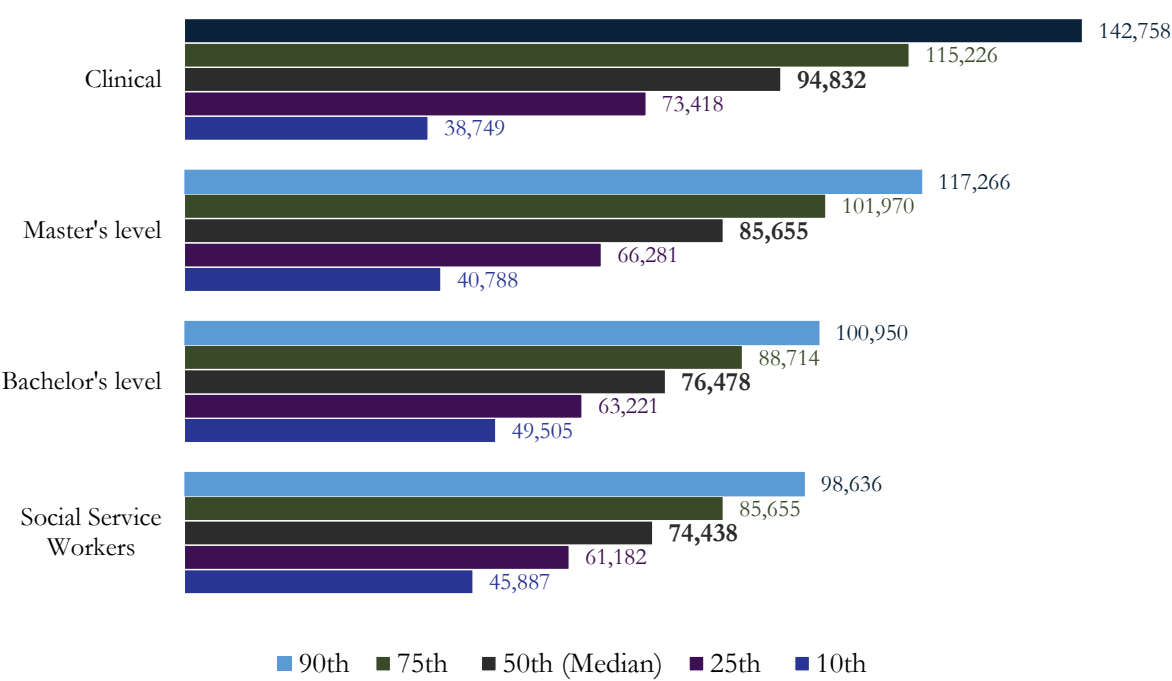


Table 4
Estimated Hourly Wages and Annual Earnings (Dollars) Based on the Labour Force Survey, Statistics Canada, 2022–2023

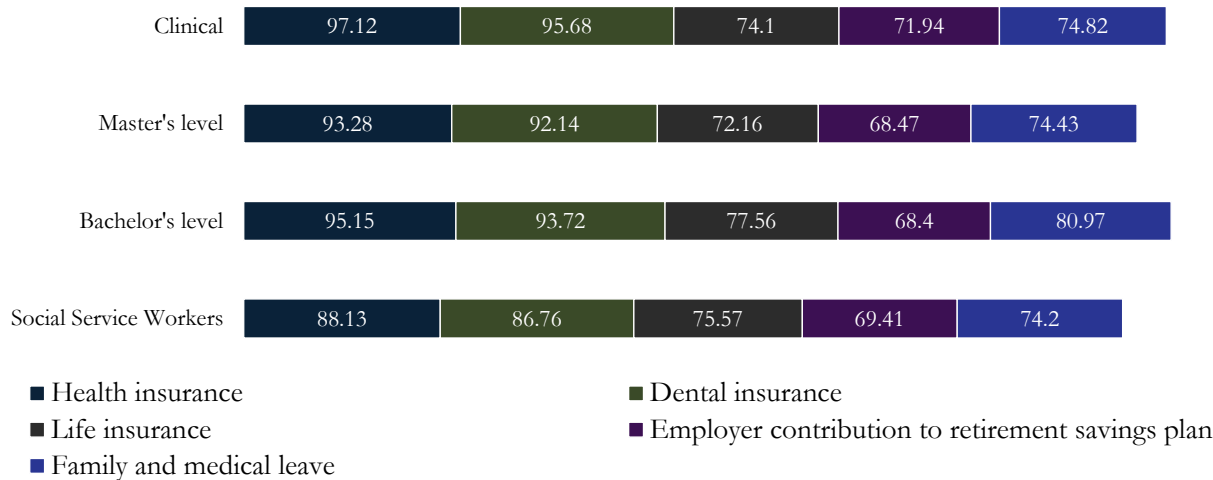
	Hourly Wage		Annual Earnings ³	
	Social Service Worker ¹	Social Worker ²	Social Service Worker	Social Worker
Low	18.5	24.11	37,740	49,184
Median	25	37	51,000	75,480
High	35	49	71,400	99,960

Sources:
¹ Government of Canada (2025a).
² Government of Canada (2025c).
³ Annual earnings were estimated, assuming 40 hours of work per week and 51 weeks of work per year.

To compare these findings to the publicly available earnings data for the workforce, Table 4 shows the estimated annual earnings for 2022–2023 based on the latest Labour Force Survey by Statistics Canada available from the Government of Canada. According to the table, the inflation-adjusted median annual earnings for social workers would be about \$77,744 in 2024, which is comparable to the median earnings of bachelor’s-level social workers. The rough comparison suggests that the publicly available earnings information for the social work workforce may not accurately describe the earnings of social workers with advanced degrees and specialized clinical skills. As shown in Chart 26, the annual earnings of masters’-level and clinical social workers were far greater than the overall estimates provided by the Government of Canada for the workforce.

The lower rows of Table A10 in the Appendix also display the percentage of social workers and social service workers whose **employers offered benefits** such as health insurance, life insurance, retirement savings plans, and family and medical leave (the analyses excluded self-employed social workers). Chart 27 demonstrates that a very high percentage of social workers and social service workers — across all practice categories — were offered various employment-based benefits by their employers. This is not surprising, considering the high prevalence of government employment among these workers. As mentioned earlier, over 70% of social service workers and bachelor’s-level social workers, as well as nearly 50% of master’s-level social workers, were employed by government agencies. Additionally, more than 40% of clinical social workers were also employed by government agencies.

Chart 27
*Percentage With Employer-Provided Benefits
(Excluding the Self-Employed), Check All That Apply*



For example, more than 95% and 93% of bachelor’s- and master’s-level social workers reported that their employers offered a health insurance plan (i.e., supplemental medical plan), respectively. Similarly, almost 94% of bachelor’s-level and 92% of master’s-level social workers reported that their employers offered a dental insurance plan. Nearly 72% of clinical social workers reported that their employers contributed to their retirement plans.

Table 5
Percentage of Canadian Workers With Access to Employer-Provided Benefits, 2020

	All Workers	Female Workers	Permanent Employees
Supplemental medical or dental care	54.0	51.7	67.5
Pension plan	51.2	50.4	61.3
Paid sick leave	52.1	54.4	66.3
Disability insurance or death benefits	48.3	44.8	67.5

Source: Statistics Canada (2021).

Table 5 presents the percentages of all Canadian workers, female workers, and permanent employees offered similar benefits reported by Statistics Canada for 2020. Although findings presented in Chart 27 should not be directly compared to those in Table 5 because of differences in data sources, measurement, and years of observation, a general comparison of the figures in Chart 27 and Table 5 suggests that social workers and social service workers, in general, enjoyed better or comparable rates of access to various benefits offered by their employers.

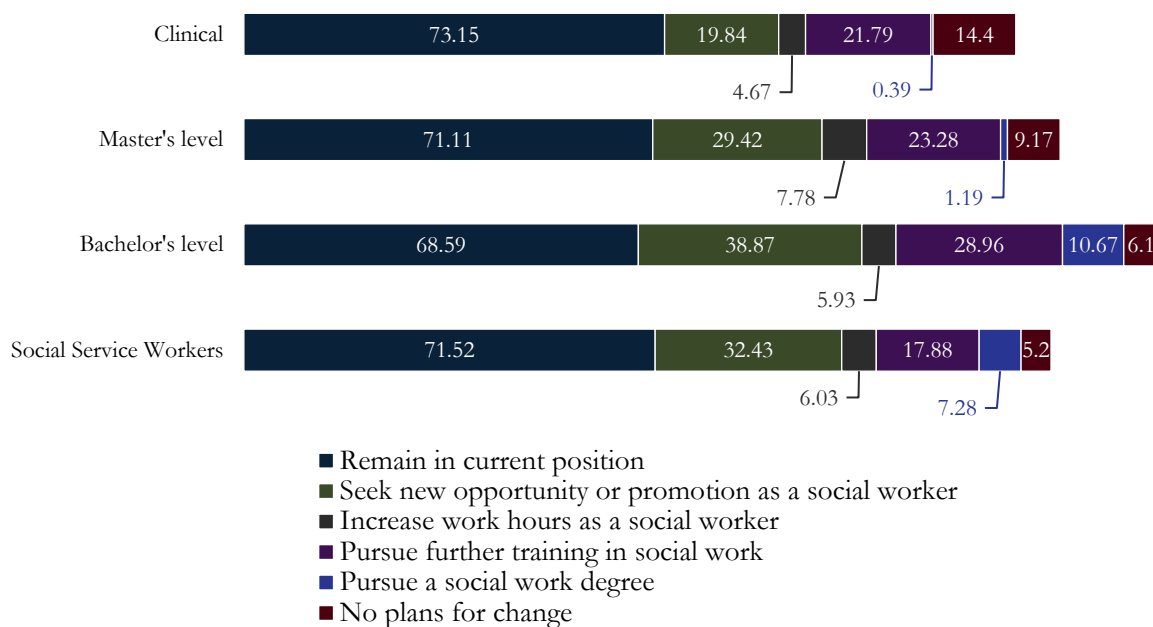
CAREER AND EDUCATIONAL PLANS

The Workforce Survey asked social workers about their **career and educational plans or goals** for the next two years to inform any workforce development needs in the coming years. Respondents were allowed to choose multiple career plan options. Table A11 in the Appendix presents detailed findings. Chart 28 shows the percentage of social workers and social service workers with career and educational plans that may signal that they were satisfied with the social work profession. Surprisingly higher percentages, approximately 70% of all workers, responded that they were planning to remain in their current position, regardless of their practice categories. Many were also planning to seek new opportunities or promotions as social workers. The highest percentage of social workers with such a plan was found among bachelor’s-level social workers at

nearly 39%, while the smallest percentage was among clinical social workers at around 20%. Considering that bachelor’s-level social workers were notably younger than their clinical counterparts — 36 years versus 50 years in median age — the difference in pursuing new opportunities and promotions might have been linked not only to differences in practice category but also to age differences.

Chart 28

Percentage With Plans That May Signal Satisfaction in the Profession, Check All That Apply

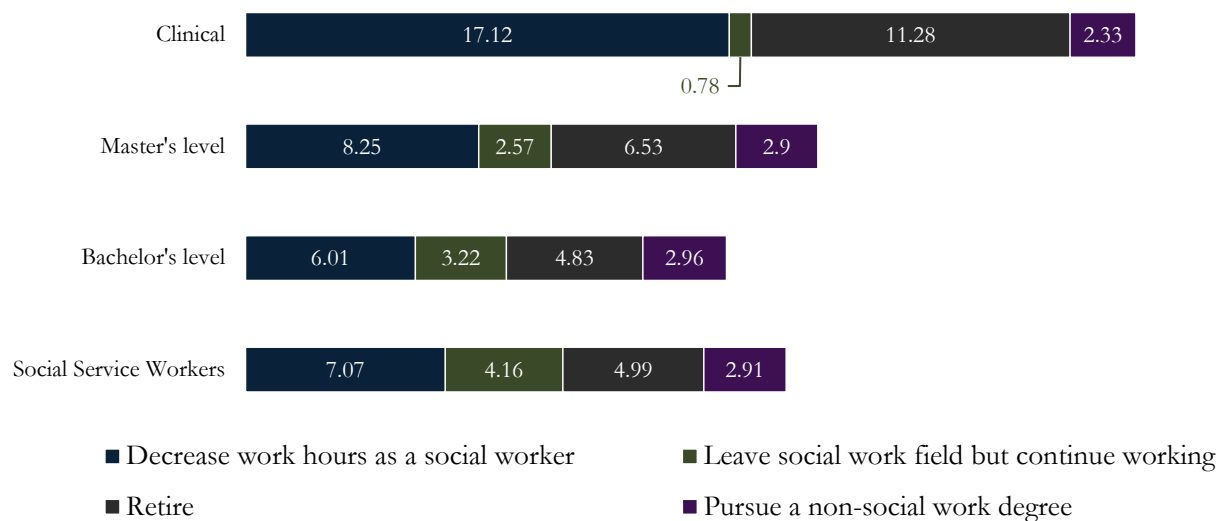


Furthermore, approximately 29% of bachelor’s-level and 23% of master’s-level social workers reported that they planned to pursue further training in social work. More than 7% of social service workers and nearly 11% of bachelor’s-level social workers were planning to pursue a social work degree, perhaps an MSW. Interestingly, more than 14% of clinical social workers reported that they did not have plans for any changes. Overall, the findings shown in Chart 28 suggest that most registered social workers and social service workers were planning to look for more opportunities, training, and promotions while remaining in their current positions.

Chart 29 illustrates the percentage of social workers and social service workers with career and educational plans that may indicate dissatisfaction with the social work profession. The percentages of these workers who reported intentions to leave the social work field or pursue a non–

social work degree were relatively small. For instance, approximately 4.16% of social service workers and 3.22% of bachelor’s-level social workers indicated plans to leave the social work field while continuing to work, and 2.57% of master’s-level social workers, along with 0.78% of clinical social workers, gave similar responses. However, over 17% of clinical social workers indicated plans to reduce their work hours, and more than 11% reported intentions to retire within two years. As depicted in the chart, the percentages of these workers planning to decrease their work hours exceeded 6% across all practice categories. The findings may indicate that professional stakeholders should consider the implications of these results for the future supply of social workers, particularly for clinical social workers.

Chart 29
Percentage With Plans That May Signal Dissatisfaction in the Profession (Check All That Apply)



GEOGRAPHIC DISTRIBUTION AND DENSITY

Social work regulatory colleges in Canada report the number of registered social workers and social service workers within their jurisdictions to ASWB, which compiles the numbers. Using ASWB’s compiled data for 2023, along with the 2023 population size by province and territory from Statistics Canada (2025), the geographic density of registered social workers and social service workers was estimated. This density was defined as the number of these professionals per 1,000 people, as shown in Table 6. The first two columns of the table show the compiled numbers of registered social workers and social service workers and their percentage distribution by province. As

discussed earlier, 37.54% and 25.12% of these social workers were located in Ontario (ON) and Québec (QC), reflecting the nation's population density across provinces.

Table 6

Estimated Number of Registered Social Workers and Social Service Workers per 1,000 People, 2023

	Registered Social Workers ¹		Population ²		Number of Registered Social Workers per 1,000	Rank
	N	%	N	%		
Nationwide	63,279	100.00	40,382,712	100.00	1.57	--
AB	7,583	11.98	4,744,897	11.75	1.60	6
BC	5,358	8.47	5,593,961	13.85	0.96	10
MB	2,342	3.70	1,465,035	3.63	1.60	6
NB	2,042	3.23	840,578	2.08	2.43	2
NL	1,743	2.75	541,000	1.34	3.22	1
NS	1,382	2.18	1,064,297	2.64	1.30	9
ON	23,757	37.54	15,818,465	39.17	1.50	8
PE	415	0.66	175,871	0.44	2.36	3
QC	15,898	25.12	8,918,906	22.09	1.78	5
SK	2,759	4.36	1,219,702	3.02	2.26	4

Sources:

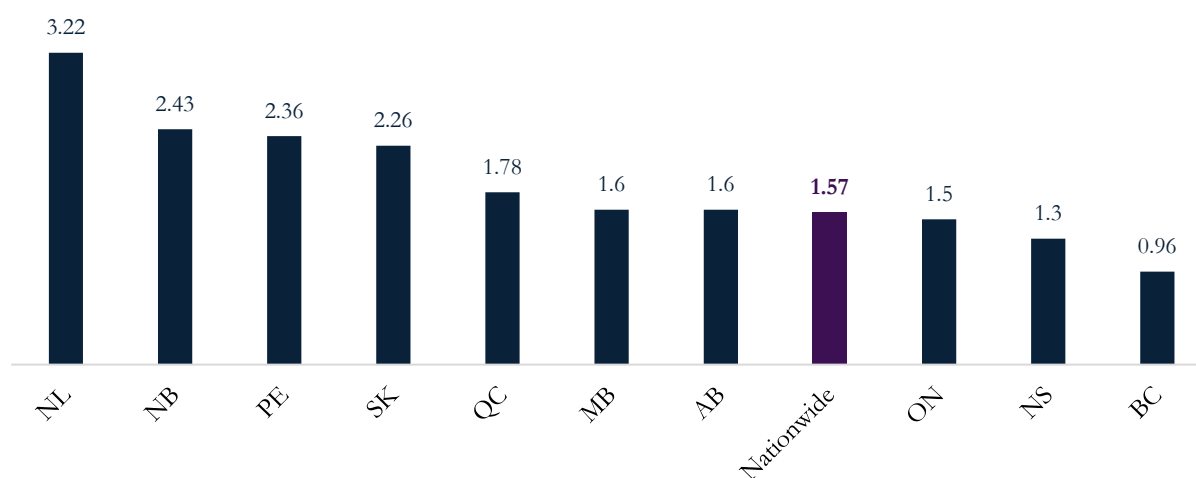
¹ ASWB compilation of regulatory bodies' reporting.

² Statistics Canada (2025).

The sixth and final columns of Table 6 show the **geographic density** of registered social workers and social service workers across jurisdictions. According to the sixth column of the table, the national estimated rate of registered social workers and social service workers was 1.57 per 1,000 people. This density, however, ranged from a low of 0.96 in British Columbia (ranking 10th place in the country) to a high of 3.22 in Newfoundland and Labrador (ranking first in the country) and 2.43 in New Brunswick (ranking second in the country). The findings were, in general, aligned with the findings by Mirshahi and Baczowska (2023) of the Canadian Health Workforce Network. The authors also estimated that Newfoundland and Labrador and New Brunswick had the highest density of registered social workers per 1,000 people. Ontario and Québec had the highest total of registered social workers and social service workers, but the numbers translated to a density close to the national average of 1.5 social workers per 1,000 people in Ontario and 1.78 per 1,000 in Québec. Chart 30 illustrates the rank order of 10 jurisdictions based on the geographic density of registered social workers and social service workers across Canada.

Chart 30

Estimated Number of Registered Social Workers and Social Service Workers Per 1,000 People, 2023



These findings provide crude estimations for the geographic density of the social work workforce across Canada, including both social service workers and social workers who may not be employed in health care settings. However, more refined geographic density analyses are necessary for the health care system to ensure that the findings are useful for workforce planning and policy decisions. For such refined analyses, a national registry of social workers with their specializations and practice settings may be needed. This issue will be addressed briefly in the discussion section.

DISCUSSION

Using the data from the 2024 Social Work Workforce Survey, which collected information from registered social workers and social service workers across Canada, this study provides, for the first time in history, a detailed and comprehensive look into the characteristics of those workers by their practice category. The findings of this study were meant to address some of the most important knowledge gaps about the Canadian social work workforce discussed in the literature. This study set out to learn what percentage of registered social workers and social service workers worked in mental health settings and provided mental health services to their clients in Canada. Findings clearly demonstrated that a significant portion of registered social workers delivered mental and behavioral health services to their clients. Nearly 80% of clinical social workers provided mental health services, followed by 62.4% of master's-level social workers. For bachelor's-level social workers, 44.71% reported providing mental health services, while 47.19% of social service workers did so.

This study also found that, as the social workers' practice category advanced, the percentage working in health care settings — outpatient care centers, hospitals, and other health services agencies — increased gradually yet clearly. Indeed, nearly 79% of clinical social workers, 66% of master's-level social workers, and 44% of bachelor's-level social workers reported working as direct service providers for clients dealing with mental health disorders, substance use disorders, or issues related to child safety and well-being needs. These findings undoubtedly demonstrate that registered social workers play a crucial role in Canada's mental health and behavioral care system. Using the findings of this study, professional stakeholders, such as CASW, can engage in more active advocacy to enhance public awareness of the profession and its contributions to the mental and behavioral health care system in Canada (Schibli, 2019).

As the literature provides little information about the registered social work workforce, this study aimed to provide statistical profiles of the demographic, employment, practice, and financial characteristics of the workforce by its practice category. The analyses revealed findings that had never been documented in the literature regarding some of the most distinctive employment characteristics of registered social workers and social service workers in Canada. First, the overwhelming majority of workers in this study reported that their positions required both a social work degree and registration, reinforcing the labor market values of social work education and regulation in Canada. Second, another notable finding was the prevalence of self-employment

among registered social workers. Around 44% of clinical social workers and over 28% of master's-level social workers reported working in private practice, mostly in solo or group practices, or as independent contractors. This unusually high rate of private practice underscores the importance of enforcing ethical standards, continuing education, and professional regulations more than ever for competent and ethical practice for the public.

Another noteworthy finding never documented in the literature was the prevalence of holding multiple jobs among registered social workers. This study reported that 39% of clinical and 33% of master's-level social workers held more than one job, a much higher rate than the general workforce. The prevalence of holding multiple jobs might be connected to the high rates of part-time work, especially among clinical (38%) and master's-level social workers (31%). Unfortunately, since the 2024 Social Work Workforce Survey did not inquire about secondary jobs, there was no information available regarding the type, nature, and intensity of the supplemental jobs. Because the high prevalence of holding multiple jobs may indicate that the earnings and career opportunities from primary social work jobs were inadequate, future workforce studies should further investigate this issue by examining the motivations, nature, and intensity of secondary jobs.

Furthermore, this study revealed that the publicly available information on social workers' median earnings (\$77,744) is comparable to the earnings of bachelor's-level social workers but not to those of master's-level and clinical social workers. Findings suggested that the median annual earnings of master's-level social workers (\$85,655) and clinical social workers (\$94,832) were much higher than the earnings of bachelor's-level social workers (\$76,478). These findings may emphasize the financial benefits of obtaining an MSW, having more years of social work experience, and possessing clinical skills in the job market. They also demonstrate considerable variation in the financial characteristics of social workers based on the level of social work experience and practice category. Because a national household survey, such as the Labour Force Survey of Statistics Canada, cannot distinguish social workers by practice category, the profession must conduct national workforce surveys on a regular basis to gather up-to-date and accurate labor market information about the workforce.

Last, this study found that the geographic density of registered social workers was uneven across the country, indicating that public access to social work services would vary substantially by province and territory. For example, British Columbia was estimated to have fewer than one registered social worker per 1,000 residents. Assessing whether this level of low-density province needs policy interventions is difficult due to uncertainty surrounding appropriate population-to-

provider ratios. Nevertheless, as discussed earlier, the Canadian Occupational Projection System forecasted future shortages of registered social workers (COPS, 2025b). In light of this, professional stakeholders should acknowledge the disparities in the density of registered social workers nationwide and consider strategies for monitoring and creating workforce development plans collectively.

Many findings of this study underscore the importance of national workforce studies. An accurate understanding of the workforce profile is beneficial for establishing professional identity and influencing public perception of the profession (Williams & Vieyra, 2018). However, the social work profession currently lacks the essential research infrastructure necessary to conduct national workforce studies. For example, the social work profession in Canada does not appear to have a data collection system common across provinces and territories to generate a sampling frame for a nationally representative sample of registered social workers and social service workers. Many provinces use a single-tier registration system without distinguishing clinical social workers or recording any key demographic and specialization information of registered social workers. This hinders nationally representative studies of the workforce, not to mention geographic density analyses for the workforce in the mental and behavioral health care system to evaluate worker shortage issues. To eliminate this barrier to a national workforce study, key professional organizations — such as the Canadian Association of Social Workers, the Canadian Council of Social Work Regulators, provincial social work regulatory bodies, and the Canadian Association of Social Work Education — should collaborate to develop resources and expertise for a workforce data collection system. This system can help produce nationally representative workforce statistics, monitor significant workforce trends, and support the workforce, stakeholders, and the public.

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APPENDIX TABLES

Table A1*Demographic Characteristics of Registered Social Workers and Social Service Workers in Canada*

	Social Service Workers	Bachelor's Level	Master's Level	Clinical
	N=481	N=1,181	N=1,516	N=257
Gender				
Female	88.77	89.92	82.78	80.54
Male	9.98	7.62	13.79	16.73
Nonbinary	1.04	1.78	2.51	1.95
Other	0.21	0.68	0.92	0.78
Age				
<i>Mean age (yrs)</i>	<i>41.06</i>	<i>38.27</i>	<i>45.23</i>	<i>50.65</i>
<i>Median age (yrs)</i>	<i>40.00</i>	<i>36.00</i>	<i>43.00</i>	<i>50.00</i>
20s	20.58	28.20	10.62	5.06
30s	26.61	30.74	28.89	19.84
40s	29.52	22.95	26.25	24.90
50s	14.55	10.92	14.38	18.29
60s	7.90	6.35	15.24	21.01
70s	0.83	0.85	4.62	10.89
Race/Ethnicity				
Indigenous	5.82	8.21	6.33	3.50
White	59.88	80.86	76.12	78.21
South and Southeast Asian	1.66	2.37	5.15	4.28
East Asian	0.83	1.61	2.90	1.95
Black and Latin American	4.37	1.95	3.10	3.50
Arab and West Asian	0.42	0.51	0.46	0.00
Other	2.29	2.54	4.35	7.39
Missing	24.74	1.95	1.58	1.17
Immigration/Citizenship				
Native-born citizen	90.02	92.21	84.1	82.88
Naturalized citizen	9.15	6.86	13.32	13.23
Noncitizen	0.83	0.93	2.57	3.89
Having children under 13				
Missing	0.42	0.68	0.86	1.56
0	66.94	65.71	69.33	73.15
1	15.59	14.99	14.78	10.12
2	12.89	15.16	11.74	12.45
3 or more	4.16	3.47	3.30	2.72
Language use at home (check all that apply)				
English	80.04	98.05	99.27	98.44
French	54.68	13.12	11.41	13.23
Spanish	2.70	1.10	2.37	2.33
Other	3.74	4.06	6.53	7.78
Health conditions				
Physical health condition	9.15	13.72	16.16	16.73
Mental health condition	17.88	33.02	22.89	19.84
Other	2.91	5.84	5.01	5.84
Work-limiting condition	7.90	11.52	11.48	12.06

Province				
Alberta	11.02	18.54	12.99	31.13
British Columbia	2.91	17.10	19.59	22.57
Manitoba	11.64	18.12	9.96	5.06
New Brunswick	32.64	14.90	6.73	3.50
Newfoundland and Labrador	0.83	9.65	4.02	1.56
Nova Scotia	0.83	2.20	3.43	6.61
Ontario	17.46	7.54	36.81	22.18
Prince Edward Island	0.00	2.37	2.37	4.67
Québec	19.13	1.19	1.25	1.95
Saskatchewan	3.53	8.38	2.84	0.78

Table A2*Educational Characteristics of Registered Social Workers and Social Service Workers in Canada*

	Social Service Workers N=481	Bachelor's Level N=1,181	Master's Level N=1,516	Clinical N=257
Highest education				
Below bachelor's	19.54	0.00	0.00	0.00
Bachelor's	66.94	100.00	0.00	0.00
Master's	13.51	0.00	97.69	92.22
PhD/doctoral	0.00	0.00	2.31	7.78
<i>Undergraduate Degree Earned</i>				
Top five majors				
Missing	33.26	4.91	65.44	66.92
Social work	56.34	89.92	25.79	20.23
Psychology	4.78	2.96	5.15	8.17
Criminal justice or criminology	0.42	0.42	0.53	0.78
Sociology	4.16	1.02	1.58	2.72
Other	1.04	0.77	1.51	1.18
Full-time or part-time				
Missing	25.99	0.51	58.77	64.59
Full-time	67.36	86.88	36.48	31.52
Part-time	6.65	12.62	4.75	3.89
Program type				
Missing	25.78	0.25	58.84	64.59
Online	6.44	12.45	2.11	1.56
In-person	61.12	66.98	35.22	31.91
Hybrid	6.65	20.32	3.83	1.95
<i>Graduate Degree Earned</i>				
Majors				
Missing	89.4	--	11.47	10.51
Social work	8.32	--	85.42	88.33
Other	2.28	--	3.11	1.16
Full-time or part-time				
Missing	86.28	--	1.39	5.06
Full-time	9.77	--	68.93	70.43
Part-time	3.95	--	29.68	24.51
Program type				
Missing	86.49	--	1.25	5.06
Online	2.7	--	16.42	7.78
In-person	8.73	--	62.07	70.82
Hybrid	2.08	--	20.25	16.34
Top five concentrations				
Missing	--	--	55.95	44.45
Clinical or direct practice	--	--	16.7	30.33
Children, youth, and families	--	--	6.58	4.25

Mental health	--	--	5.98	3.45
Health	--	--	3.51	6.63
Aging and gerontological practice	--	--	1.73	0.62
Degree program enrolled				
Undergraduate	7.28	3.64	0.92	0.00
Graduate	3.12	13.80	2.97	1.17
Doctoral	0.00	0.00	0.46	1.17
PhD	0.00	0.00	0.92	1.17

Note: -- indicates that data are unavailable.

Table A3*Supervision-Related Experiences of Registered Social Workers and Social Service Workers in Canada*

	Social Service Workers	Bachelor's Level	Master's Level	Clinical
	N=481	N=1,181	N=1,516	N=257
Paid for supervision				
Yes	7.69	8.13	13.79	29.18
No	32.22	34.89	35.88	46.30
Not required	21.83	23.20	25.79	14.01
Not applicable	38.25	33.78	24.54	10.51
Satisfaction with supervision				
Very satisfied	21.62	20.15	24.47	41.63
Moderately satisfied	20.17	25.23	23.68	23.35
Neither satisfied nor dissatisfied	6.24	8.13	6.79	6.23
Moderately dissatisfied	3.53	4.57	5.28	3.89
Very dissatisfied	0.62	2.54	1.78	2.33
Not applicable	47.82	39.37	37.99	22.57

Table A4*Employment Characteristics of Registered Social Workers and Social Service Workers in Canada*

	Social Service Workers N=481	Bachelor's Level N=1,181	Master's Level N=1,516	Clinical N=257
Social work degree required				
Required	70.06	78.92	82.92	85.6
Preferred	21.21	16.85	11.02	6.61
Neither	5.82	3.98	5.28	6.23
Not applicable	2.91	0.25	0.79	1.56
Social work registration required				
Required	75.47	81.71	85.42	91.83
Preferred	12.47	8.81	8.18	4.28
Neither	9.77	9.14	5.15	3.11
Not applicable	2.29	0.34	1.25	0.78
Type of employer				
Self-employed: Private sole practice	5.20	2.29	18.21	33.85
Self-employed: Group practice	0.21	0.51	4.29	4.28
Self-employed: Independent contractor	1.66	1.35	5.61	5.84
Private, for-profit	3.33	2.71	4.35	4.28
Private, nonprofit	16.84	17.36	15.5	7.00
Federal government	2.08	2.37	2.51	1.17
Provincial government	64.45	65.11	43.54	38.91
Local government	4.37	6.77	3.76	2.72
Missing	1.87	1.52	2.24	1.95
Size of employer (excluding self-employed)				
1–9 employees	3.88	2.60	3.69	2.88
10–49 employees	12.10	9.43	10.80	7.91
50–99 employees	7.53	5.39	5.87	2.88
100–499 employees	16.67	19.39	16.76	12.23
500–999 employees	7.08	7.36	6.72	6.47
1,000 or more employees	51.37	55.21	55.59	66.91
Not applicable	1.37	0.63	0.57	0.72
Multiple job-holding status				
Missing	4.16	2.54	3.23	2.33
One	79.83	80.52	64.18	59.14
Two or more	16.01	16.93	32.59	38.52
Weekly work hours				
Missing	4.37	2.54	2.57	1.56
<=20	5.20	5.42	13.32	19.07
21–34	13.72	11.01	18.07	18.68
35–40	70.27	78.32	60.29	54.09
40 +	6.44	2.71	5.74	6.61
Mean (hours)	35.89	35.62	33.26	31.76
Median (hours)	37.20	37.50	37.00	35.00
Annual work weeks				
Missing	9.77	6.18	6.73	4.67

<=25	0.42	1.44	1.78	0.39
26–49	26.61	17.78	27.57	42.02
50–52	63.20	74.60	63.92	52.92
<i>Mean (weeks)</i>	<i>49.71</i>	<i>49.73</i>	<i>48.96</i>	<i>48.70</i>
<i>Median (weeks)</i>	<i>52.00</i>	<i>52.00</i>	<i>52.00</i>	<i>50.00</i>
Years of social work experiences				
Less than 5	24.53	34.04	16.75	5.06
5–10	18.30	21.59	19.72	15.56
10–15	15.18	15.07	14.58	11.67
15–20	14.14	11.26	15.50	12.84
20–25	12.68	7.71	12.14	16.73
25–30	7.90	4.66	7.78	14.79
30+	6.65	5.08	13.32	23.35
Missing	0.62	0.59	0.20	0.00
<i>Mean (years)</i>	<i>14.22</i>	<i>11.66</i>	<i>17.02</i>	<i>22.55</i>
<i>Median (years)</i>	<i>13.00</i>	<i>9.00</i>	<i>15.00</i>	<i>23.00</i>
Number of years with current employer				
Less than 5	46.57	58.34	49.67	31.13
5–10	17.67	17.02	18.80	20.62
10–15	13.10	9.91	9.56	16.73
15–20	9.56	7.45	7.98	11.67
20+	11.64	6.27	9.96	11.67
Missing	1.46	1.02	4.02	8.17
<i>Mean (years)</i>	<i>9.03</i>	<i>6.92</i>	<i>8.33</i>	<i>10.86</i>
<i>Median (years)</i>	<i>6.00</i>	<i>4.00</i>	<i>5.00</i>	<i>9.00</i>

Table A5*Practice Setting of Registered Social Workers and Social Service Workers in Canada (Excluding Self-Employees)*

	Social Service Workers N=376	Bachelor's Level N=1,092	Master's Level N=1,048	Clinical N=138
Individual and family services agency	40.69	26.92	20.32	15.94
Agency for justice, public order, and safety activities	2.39	3.75	3.82	2.17
Administration of human resource program	1.60	0.37	0.67	0.00
Psychiatric and substance abuse hospital	6.91	5.31	7.35	7.25
Outpatient care centers	3.19	6.04	10.31	23.91
Elementary or secondary school	6.65	6.14	5.73	7.97
Nursing care facility (skilled nursing facility)	3.19	3.30	1.91	0.00
Residential care facility, except skilled nursing facility	4.79	2.38	2.19	0.72
Civic, social, advocacy organization and grantmaking agency	2.13	2.01	1.53	0.00
General medical and surgical hospital or specialty hospital	7.98	13.00	15.17	14.49
Public administration, including executive office or legislative body	0.80	1.10	2.00	0.72
Community food and housing and emergency services agency	3.72	3.57	2.67	1.45
Home health care services agency	1.86	6.41	2.10	0.00
Other health care services agency	9.04	15.93	14.89	17.39
Insurance-related agency	0.00	0.00	0.19	0.00
Child day care services agency	0.53	0.09	0.10	0.00
College, university, or professional school, including junior/community college	1.60	1.56	6.30	4.35
Vocational rehabilitation services agency	1.33	0.92	0.29	0.00
Office of physician(s)	1.06	1.10	1.91	3.62
[other]	0.53	0.09	0.57	0.00

Table A6*Practice Function of Registered Social Workers and Social Service Workers in Canada (Check All That Apply)*

	Social Service Workers N=481	Bachelor's Level N=1,181	Master's Level N=1,516	Clinical N=257
Mental/behavioral health	47.19	44.71	62.40	79.77
Medical, hospital, or health services	16.84	35.90	25.73	16.73
Family and children's services	30.98	21.34	15.04	11.67
Advocacy	17.05	24.81	11.68	8.17
Substance abuse/addiction services	15.59	22.78	18.73	24.51
Psychiatric services	9.98	12.53	12.01	14.79
Elder services	13.72	16.17	7.12	2.33
Child welfare and child protective services	13.10	12.11	4.75	1.56
Homeless services	8.52	12.70	4.95	1.17
Public social services	13.10	10.75	5.87	1.56
School social services	8.73	6.69	5.28	4.28
Community organizing	7.28	5.59	3.56	0.78
Domestic violence services	7.48	7.54	6.79	4.28
Intellectual/development services	2.29	5.33	3.10	2.33
Hospice care	3.33	3.64	2.90	1.56
Rehabilitation services	3.95	6.86	4.62	3.50
Managed care	1.87	1.95	0.79	1.17
Adoption/foster care services	2.91	4.32	1.06	1.17
Residential treatment services	1.66	2.46	2.04	1.17
Veterans' services	1.04	1.52	2.77	5.45
Adult protective services	2.70	5.93	1.85	0.39
Employee assistance services	1.66	1.27	2.84	4.28
Law enforcement or correction services	2.08	2.71	2.57	1.56
Higher education	1.46	1.35	5.08	4.67
[other]	5.41	6.94	8.44	8.56

Table A7*Main Client Groups of Registered Social Workers and Social Service Workers in Canada (Check All That Apply)*

	Social Service Workers	Bachelor's Level	Master's Level	Clinical
	N=481	N=1,181	N=1,516	N=257
Children (under 11)	42.41	37.93	29.82	29.18
Adolescents (12–17)	50.10	43.10	44.33	47.86
Adults (18–65)	68.19	75.44	82.26	82.10
Older adults (66 or older)	41.79	49.53	43.4	39.69
Racially minoritized groups	23.28	34.21	32.72	30.74
Immigrants and refugees	18.92	22.52	22.23	17.51
Sexually minoritized groups	16.84	20.32	23.55	24.51
People whose income is below the poverty level	34.10	46.49	32.85	25.29
People with mental health disorders	53.01	56.82	58.71	61.09
People with substance use disorders	39.92	50.04	42.55	44.75
People involved with the child welfare system	31.81	33.78	23.61	18.68
People in need of assistance with activities of daily living	21.21	31.41	19.20	10.89
People whose primary language is English	40.12	51.74	54.49	61.87
People whose primary language is French	28.07	9.23	7.98	8.95
People whose primary language is Spanish	5.82	3.30	3.69	2.33
People whose primary language is not English, French, or Spanish	12.68	15.16	12.8	11.67

Table A8*Primary Role of Registered Social Workers and Social Service Workers in Canada*

	Social Service Workers N=481	Bachelor's Level N=1,181	Master's Level N=1,516	Clinical N=257
Direct service provider (e.g., clinician, therapist, counselor)	48.02	43.95	66.23	78.6
Case manager or discharge planner	12.47	24.89	6.73	2.33
Administrator or program manager	6.03	3.13	5.61	4.28
Supervisor	6.24	3.98	5.94	5.45
Service coordinator	3.53	3.81	2.18	1.17
Consultant	1.04	1.86	2.04	1.17
Advocate	2.29	1.95	0.26	0.78
Educator or academician	1.66	0.42	2.51	1.56
Trainer, instructor, or facilitator	1.46	1.27	1.25	1.95
Investigator	0.83	2.79	0.59	0
Evaluator or researcher	0.21	0.34	0.13	0
Community organizer	0.21	0.17	0.26	0
Policy analyst	0.21	0.42	0.4	0
Speaker	0.42	0	0.13	0
Liaison	0.42	0.85	0.33	0
Assessor	1.04	2.46	0.86	0.39
Foster care worker	2.7	1.44	0.07	0
Forensic interviewer	0.42	0.08	0	0.39
Mediator	0	0.25	0.4	0
Community support	4.78	2.46	0.73	0
Mentor	0.62	0.25	0.26	0
Not applicable	0.83	0.25	0.4	0
Missing	4.57	2.96	2.7	1.95

Table A9*Use of Electronic Practice Among Licensed Social Workers and Social Service Workers in Canada*

	Social Service Workers	Bachelor's Level	Master's Level	Clinical
	N=481	N=1,181	N=1,516	N=257
Percentage of time using electronic practice				
Never	3.95	6.10	5.01	2.33
1–25%	51.14	42.85	43.21	47.86
26–50%	13.51	23.54	20.58	22.96
51–75%	19.75	15.92	12.47	7.39
76–99%	5.61	7.79	9.37	9.34
100%	3.95	2.71	8.11	9.73
Not applicable	2.08	1.10	1.25	0.39
Work primarily online				
Yes	9.15	6.94	18.14	23.74
No	73.39	75.95	71.97	65.76
Not applicable	17.46	17.10	9.89	10.51

Table A10

Financial Characteristics of Registered Social Workers and Social Service Workers in Canada (in Canadian Dollars)

	Social Service Workers	Bachelor's Level	Master's Level	Clinical
	N=481	N=1,181	N=1,516	N=257
Student loan debt total				
No student debt	24.41	29.27	38.18	37.39
Less than \$14,335	17.06	12.28	14.01	17.57
\$14,335–\$43,006	25.59	29.18	25.38	20.72
\$43,006–\$71,676	21.09	19.85	12.88	12.16
\$71,676–\$107,514	9.95	7.11	6.70	6.31
More than \$107,514	1.90	2.31	2.86	5.86
Student loan debt balance				
No student debt	34.93	40.43	53.10	63.83
Less than \$14,335	30.15	26.83	23.55	20.57
\$14,335–\$43,006	17.65	19.90	15.04	8.51
\$43,006–\$71,676	12.87	8.69	4.84	2.13
\$71,676–\$107,514	3.68	3.15	2.10	1.42
More than \$107,514	0.74	1.01	1.37	3.55
Annual gross earnings from the primary job (2024 Canadian dollars)				
(unweighted N)	N=420	N=1,081	N=1,397	N=236
Mean	72,928	75,037	83,301	94,028
10th	45,887	49,505	40,788	38,749
25th	61,182	63,221	66,281	73,418
50th (Median)	74,438	76,478	85,655	94,832
75th	85,655	88,714	101,970	115,226
90th	98,636	100,950	117,266	142,758
Employment compensation (excluding self-employed), check all that apply				
Health insurance	88.13	95.15	93.28	97.12
Dental insurance	86.76	93.72	92.14	95.68
Life insurance	75.57	77.56	72.16	74.10
Employer contribution to retirement savings plan	69.41	68.4	68.47	71.94
Family and medical leave	74.20	80.97	74.43	74.82
Tuition reimbursement	6.85	13.02	15.44	13.67
Flexible work schedule	32.42	29.62	32.67	33.81

Table A11*Career Plan of Registered Social Workers and Social Service Workers in Canada (Check All That Apply)*

	Social Service Workers	Bachelor's	Master's	Clinical
	N=481	N=1,181	N=1,516	N=257
Remain in current position	71.52	68.59	71.11	73.15
Seek new opportunities or promotions as a social worker	32.43	38.87	29.42	19.84
Increase work hours as a social worker	6.03	5.93	7.78	4.67
Decrease work hours as a social worker	7.07	6.01	8.25	17.12
Pursue a social work degree	7.28	10.67	1.19	0.39
Pursue a non-social work degree	2.91	2.96	2.90	2.33
Leave social work field but continue working	4.16	3.22	2.57	0.78
Retire	4.99	4.83	6.53	11.28
Pursue further training in social work	17.88	28.96	23.28	21.79
No plans for change	5.20	6.10	9.17	14.4

Note:

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