
Models to Enhance Practicum Site Development and Supervision for Master-Level Behavioral Health Trainees

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Background

Practicum education bridges classroom preparation and applied clinical practice in master's-level social work, counseling, and marriage and family therapy (MFT) programs. Yet programs increasingly struggle to secure and sustain practicum placements as community agencies face high caseloads, workforce shortage, and limited capacity to supervise trainees. This study examined how accredited U.S. programs develop practicum sites, support supervisors and host organizations, and navigate barriers to maintaining and expanding new placement capacity.

Methods

This explanatory sequential mixed methods study surveyed practicum education leaders from accredited, U.S.-based master's programs in social work, counseling, and MFT (Phase 1: October–December 2025), followed by semi-structured interviews analyzed using reflexive thematic analysis to contextualize the quantitative findings (Phase 2: October 2025–February 2026). Publicly available data were used to identify discipline-specific accredited programs and publicly available email addresses for participant recruitment. The survey and qualitative interviews focused on recruitment strategies, incentives, and barriers related to developing and sustaining practicum placements.

Key Findings

Quantitative

A total of 68 practicum education leaders across 31 states and Puerto Rico completed the survey, representing social work (43%, n=29), counseling (34%, n=23), MFT programs (22%, n=15), and one fully online program offering all three disciplines. The most common and effective recruitment strategies were student-initiated proposals and geographic preferences (78%, n=53, each), alumni outreach (75%, n=51), student interest (69%, n=47), and employment-based placements (50%, n=34). Most programs (71%, n=49) offered no material or financial incentives to hosting sites or supervisors. Only 16% (n=11) and 18% (n=12) provided direct resources to sites and individual practicum supervisors, respectively. Among programs providing organizational support, the most common incentive was arranging external supervision for students to reduce staff burden (91%, n=10). Among programs providing direct support to supervisors, the most common incentives were continuing education units (CEUs), supervisor training resources, and faculty consultation (67%, n=8, each). The most commonly reported barriers to expanding practicum placements were lack of an available supervisor (74%, n=50), supervisor time constraints (63%, n=43), student travel

distance (57%, n=39), lack of student stipends (51%, n=35), and insufficient community agencies willing to host students (46%, n=31).

Qualitative

A total of 24 practicum education leaders from accredited social work (n=9), counseling (n=8), and MFT (n=7) programs participated in interviews. Findings underscored that placement capacity depended less on formalized infrastructure or material resources than on sustained relationship building with community partners, cultivated through alumni networks (Theme 1), intentional program and school investment (Theme 2), and long-standing community presence (Theme 3). Across all three themes, participants emphasized that practicum sites became vulnerable when these relationships were not actively maintained. Alumni were consistently described as the most reliable pipeline for new placements, reflecting a reciprocal and self-renewing relationship in which programs proactively reconnected with alumni once they became eligible to supervise students and, increasingly, alumni initiate contact themselves. Participants also described virtual internship fairs, intentional relationship-building and community visibility, and clearly articulated partnership values in competitive markets as strategies for maintaining and expanding placements. Long-standing institutional presence emerged as a stabilizing force on placement capacity. Threats to placement stability included funding cuts, legal and insurance requirements, staff turnover, supervisory burden, and uneven supervision quality.

Policy Implications

Practicum capacity relies largely on uncompensated relational labor rather than durable infrastructure. Academic programs, host organizations, accrediting bodies, professional associations, state licensing authorities, and policymakers should invest in supervisor compensation and workload protection, expand supervision training and consultation, streamline affiliation and risk management processes, and support shared or external supervision models. These investments are needed to stabilize the behavioral health training pipeline and protect access to high-quality behavioral health services.

Conclusions

Professional goodwill alone is not a sustainable strategy for preparing the behavioral health workforce. Strengthening practicum education requires structural investment in the people, partnerships, and systems that make high-quality clinical training possible.

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