

SimplePractice | Heard



2026 Clinician Well-Being Study

Inside the everyday reality of running an independent behavioral health practice.

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Introduction

Disclaimer: This report is provided to you for informational purposes only and intended to help you understand broad market trends. It does not constitute any professional advice and should not be relied upon as a substitute for your own independent judgment.

SimplePractice partnered with Heard, a financial management platform built specifically for practitioners in private practice, to examine the realities shaping independent behavioral health practice today: where pressure is building, what makes the work feel sustainable, and how practitioners are adapting.

About this survey

This report is based on a survey of 862 independent behavioral health practitioners, fielded by SimplePractice in partnership with Heard in 2026.

Who we heard from

80% of respondents run solo practices and 20% work in group practices.

64% work full-time in their practice, 22% work part-time, and 13% fluctuate between full- and part-time.

Most commonly, respondents are licensed as counselors (42%), social workers (31%), or marriage and family therapists (17%). We also heard from psychologists, psychiatric nurse practitioners, psychiatrists, substance abuse counselors, and applied behavior analysts.



Key findings

This report examines the conditions shaping clinician well-being and sustainability in independent behavioral health practice. Across the findings, a consistent tension emerges: clinicians continue to find deep meaning in their work, while the financial, operational, and personal demands surrounding care place growing pressure on the practices they are trying to sustain.

Fulfillment in private practice

Ask clinicians how they feel about the work they do, and the answers are nearly unanimous: approximately 96% say they can meet their clients' needs and 95% find deep personal meaning in their work. But that commitment comes at a cost: 42% agree that they feel burned out, up from 29% in 2023, and 37% have reduced their caseload as a result.

AI adoption

65% of clinicians now use AI in some capacity, most often for clinical documentation. But use has not translated into confidence: concerns about ethics, privacy, accuracy, and the human element of care remain widespread. About half of clinicians feel optimistic about how AI can ethically support practitioner well-being and care.

Administrative challenges

Independent practitioners are also running small businesses, and much of the strain sits there. Among clinicians experiencing burnout, 68% cite the inability to take time off without financial penalty as a top challenge, while 55% point to administrative burdens as a key friction point. Marketing and client acquisition also stand out as particular pressure points: they are both the most stressful tasks clinicians face and the areas most likely to have gotten harder over the past year.

Clinician self-care

Practitioners are using the flexibility of independent practice to protect their capacity. 72% have built dedicated time for self-care into their routine, 55% have modified their work schedule, 53% are in their own therapy or mental health care, and 48% have reinforced stricter boundaries around working hours.

Sustainability via technology

For clinicians who pay for additional tools and administrative support, the impact of their investment is substantial. 88% say those tools reduce administrative burden, and 80% say they free up more time for client care and make it more sustainable to stay in the profession. Still, 57% say they spend too much time on tasks their current tools don't cover.

Communities and support

Running an independent practice can be a solitary experience. 67% say independent practice can feel isolating around major business or financial decisions, and 68% wish they had a larger network of peers who understand the realities of private practice. That support matters: 78% say a trusted peer network makes their practice feel more sustainable.

The cost of care

The cost pressure clinicians feel isn't abstract. 88% say the rising cost of living is squeezing their own finances, and 86% say economic uncertainty adds to their stress as a practitioner. That pressure doesn't stop with them; 69% say their clients have reduced session frequency or paused therapy altogether because of cost, and 59% have responded by lowering their fees, offering a sliding scale, or personally subsidizing the cost of their clients' care.



FULFILLMENT IN PRIVATE PRACTICE

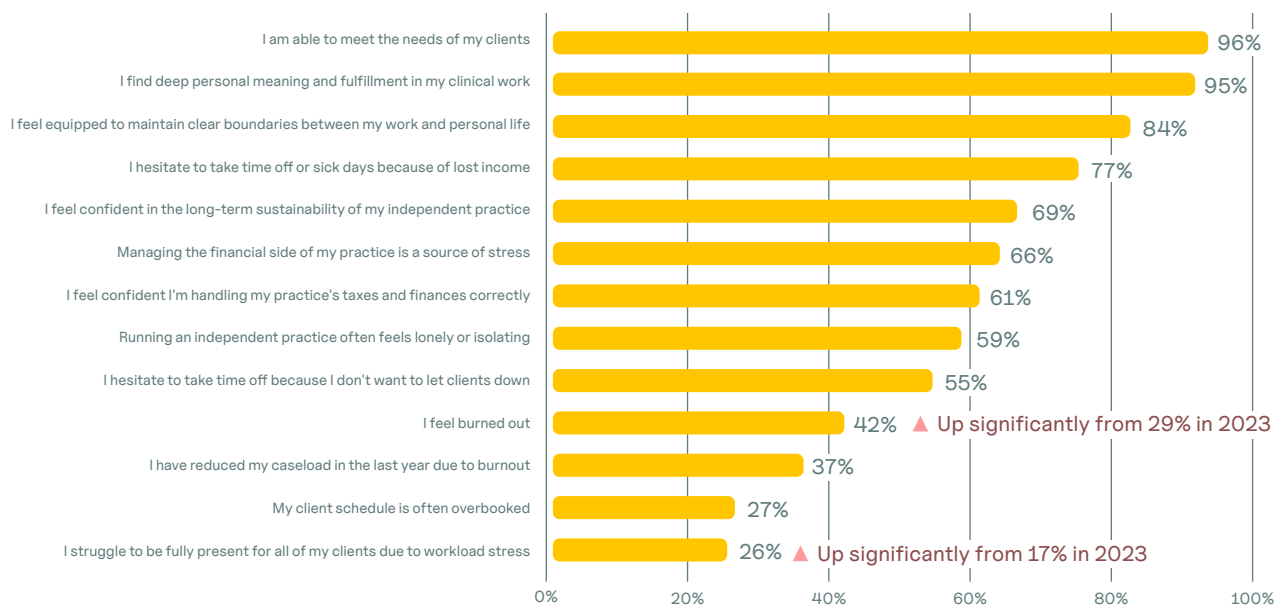
The clinical work isn't the problem

Clinicians overwhelmingly believe in the work they do, and in their ability to keep doing it.

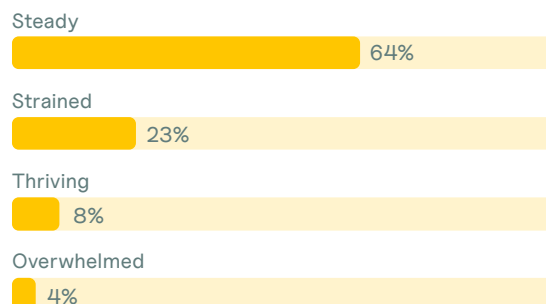
Independent practitioners feel effective in their work and find real meaning in it. **96% say they're able to meet their clients' needs**, and **95% find deep personal meaning and fulfillment in their clinical work**. Most also feel confident in their practice as a business: **69% believe in its long-term sustainability**, and **64% describe their current practice as steady, managing well with typical everyday stress**.

But that sense of purpose does not insulate clinicians from burnout. **42% now say they feel burned out, up from 29% in a 2023 SimplePractice study** of 550 independent practitioners, and **37% have reduced their caseload as a result**.

Practice Outlook and Well-Being



Current State of Practice



Takeaway

While clinical care itself can carry emotional weight on practitioners, the rising rate of burnout indicates that non-clinical business demands are compounding that strain.



ADMINISTRATIVE CHALLENGES

The business behind the care

Running an independent business is where clinicians feel the most friction.

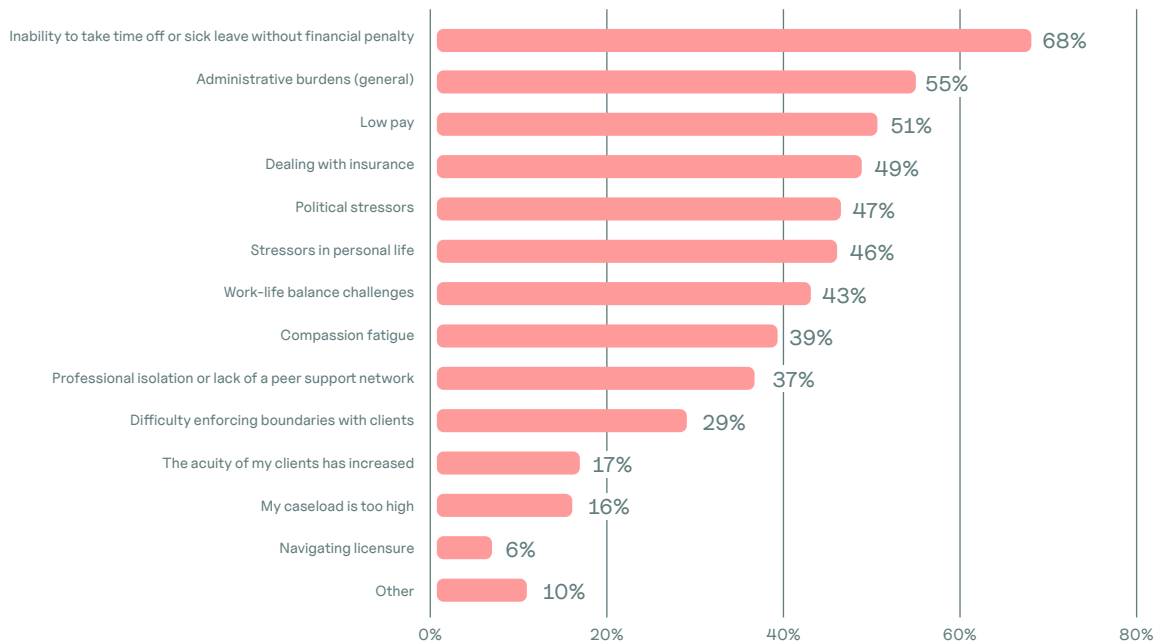
Independent practitioners are not only providing care; they are also managing the demands of a small business. That strain shows up most clearly in the tradeoffs surrounding time and administration. **Among clinicians experiencing burnout (n=365), 68% cite the inability to take time off or sick leave without financial penalty as a top challenge, while 55% point to administrative burdens as a key pain point. Low pay (51%) and dealing with insurance (49%) add to that pressure.**

Some tasks are especially difficult to absorb. **Clinicians ranked marketing and finding new clients as the most stressful practice task (48%), followed by taxes (42%) and client documentation (38%).**

It is also the area most likely to have gotten harder over the past year, with **31% saying marketing and client acquisition have worsened.**

The time commitment is substantial, too. **37% spend six or more hours each week on non-clinical work, and 54% manage their practice finances without support** from a bookkeeper, accountant, or financial software.

Top Challenges in Running a Practice

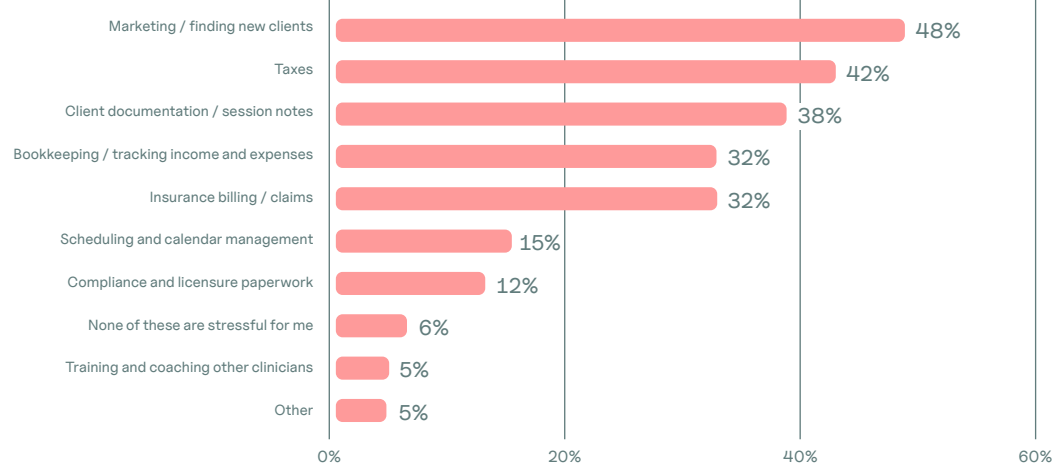


Base: Those experiencing burnout (% completely/somewhat agree "I feel burned out") (n=365)



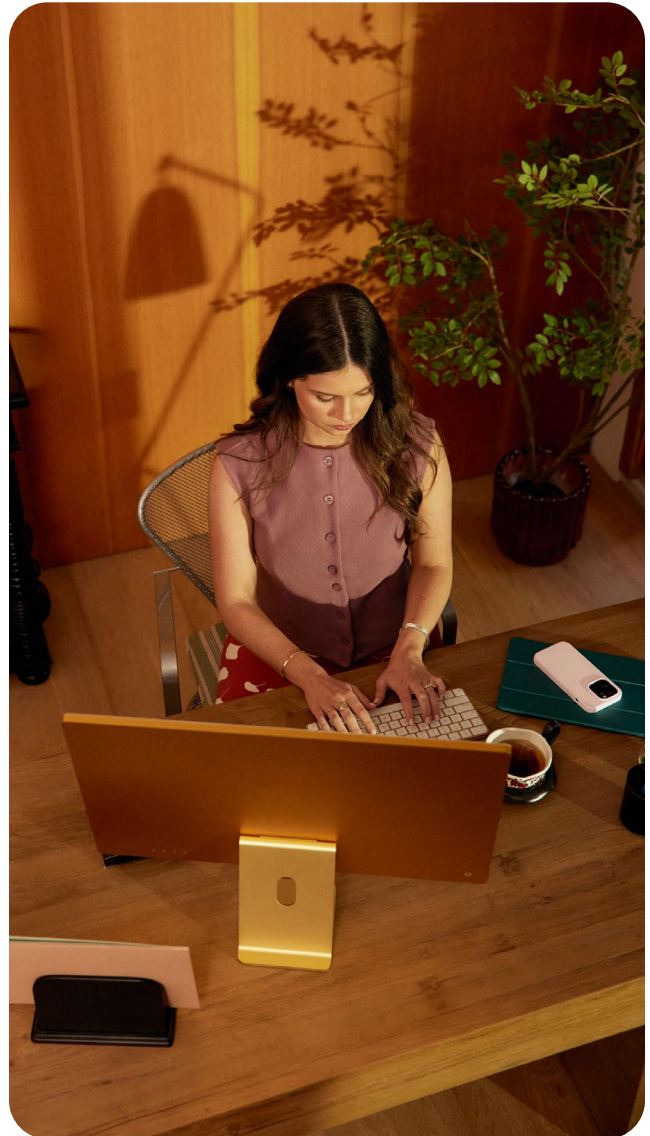
ADMINISTRATIVE CHALLENGES

Rankings of Most Stressful Practice Tasks



Takeaway

Clinicians are navigating friction on multiple fronts at once: the financial cost of taking time off, an administrative load that adds time and stress, and business tasks like marketing and keeping their client list full.



SUSTAINABILITY VIA TECHNOLOGY

Technology is reducing the administrative weight of care

When clinicians get the right support, friction measurably drops.

Most independent practitioners have already built a stack of tools to help run their practice. **82% use an EHR or practice management platform**, and **60% use bookkeeping or tax software**. For clinicians paying for additional tools and support, the improvement to day-to-day stress is striking. Before adopting practice management tools, **nearly half (47%) described feeling high or extreme stress managing their work**. Today, **just 11% feel this**, and the pattern repeats across every tool clinicians use. This suggests that even when the work itself doesn't disappear, having systems in place can materially change how burdensome it feels.

That relief extends beyond stress alone. **88% say the tools they use have reduced their administrative burden**, and **62% say they have eased financial stress**. But support remains incomplete: **57% still spend time on tasks their current toolkit doesn't cover**.

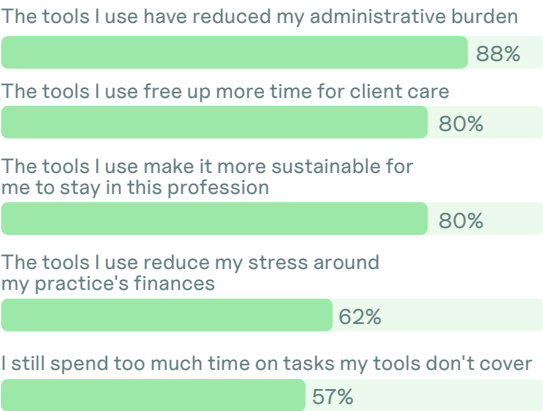
Stress Levels Before and After Tool Adoption

Percentage of clinicians reporting high or extreme practice stress

Adopted practice tools / services	Before using these tools / services*	Today
Virtual assistant or administrative support staff	59%	16%
AI tools (e.g., session notes, documentation, etc.)	57%	13%
Bookkeeping, tax, or accounting software or service	53%	13%
Billing service or clearinghouse	50%	12%
Scheduling software	48%	12%
EHR / practice management software	47%	11%

*Pre-adoption levels rated retrospectively

Impact of Practice Tools



Takeaway

Adopting technology meaningfully reduces the burden of running a practice, but clinicians still encounter gaps their current tools don't address.



AI ADOPTION

AI use does not equal complete confidence

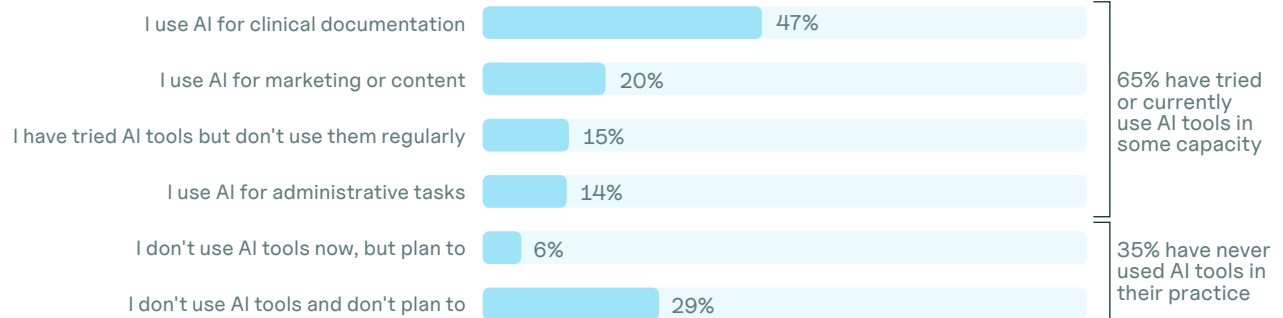
Clinicians see potential in AI, but questions about its role in care remain.

Approximately two in three clinicians (65%) already use AI in some capacity, most often for clinical documentation (47%), with smaller shares using it for marketing (20%) and administrative tasks (14%). But adoption is not universal: 29% say they do not use AI and do not plan to, compared with just 6% who intend to start.

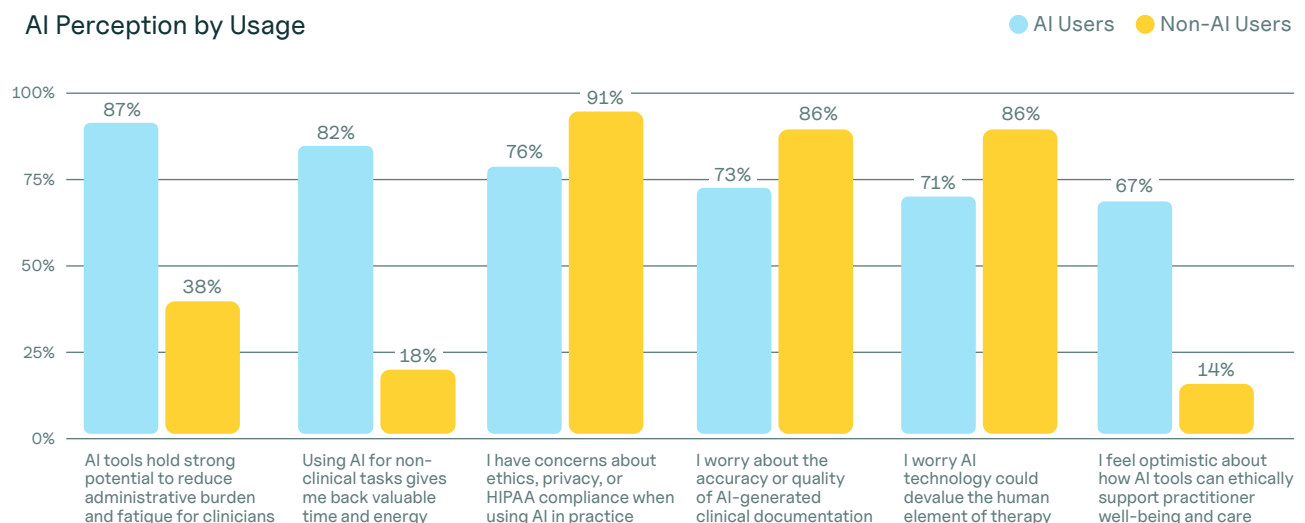
Usage of AI appears to shape how clinicians view its potential. Among users, 87% say AI has strong potential to reduce administrative burden, compared with 38% of non-users. Similarly, 67% of users feel optimistic about its ethical role in care, versus 14% of non-users.

But use does not eliminate concern. Even among clinicians already using AI, 73% worry about the accuracy of AI-generated documentation and 71% worry it could devalue the human element of therapy. Those concerns are even more common among non-users, at 86% for both.

How Clinicians Use AI



AI Perception by Usage



COST OF CARE

Cost of care is a two-way squeeze

Financial pressure is showing up for clinicians and their clients at the same time.

Nearly nine in ten clinicians (88%) say the rising cost of living has put pressure on their own finances, and 86% say economic uncertainty adds directly to their stress as a practitioner. The cost of running a practice is climbing too, with 71% saying it's gone up over the past year.

Managing practice finances adds another layer of stress: 66% say bookkeeping, taxes, and invoicing are a source of stress, and only 61% feel confident they're handling their practice's taxes and finances correctly. Financial pressure also influences decisions about time off. More than three in four clinicians (77%) hesitate to take time off or take sick days because of lost income, while 55% hesitate because they don't want to leave clients without support.

Financial Pressures on Practice



Takeaway

Financial pressure is moving through the entire care relationship. Clinicians are facing higher personal and practice costs at the same time clients are pulling back on care, leaving many practitioners to absorb part of that strain themselves through lower fees, sliding scales, or other concessions.



CLINICIAN SELF CARE

Prioritizing well-being helps protect capacity for care

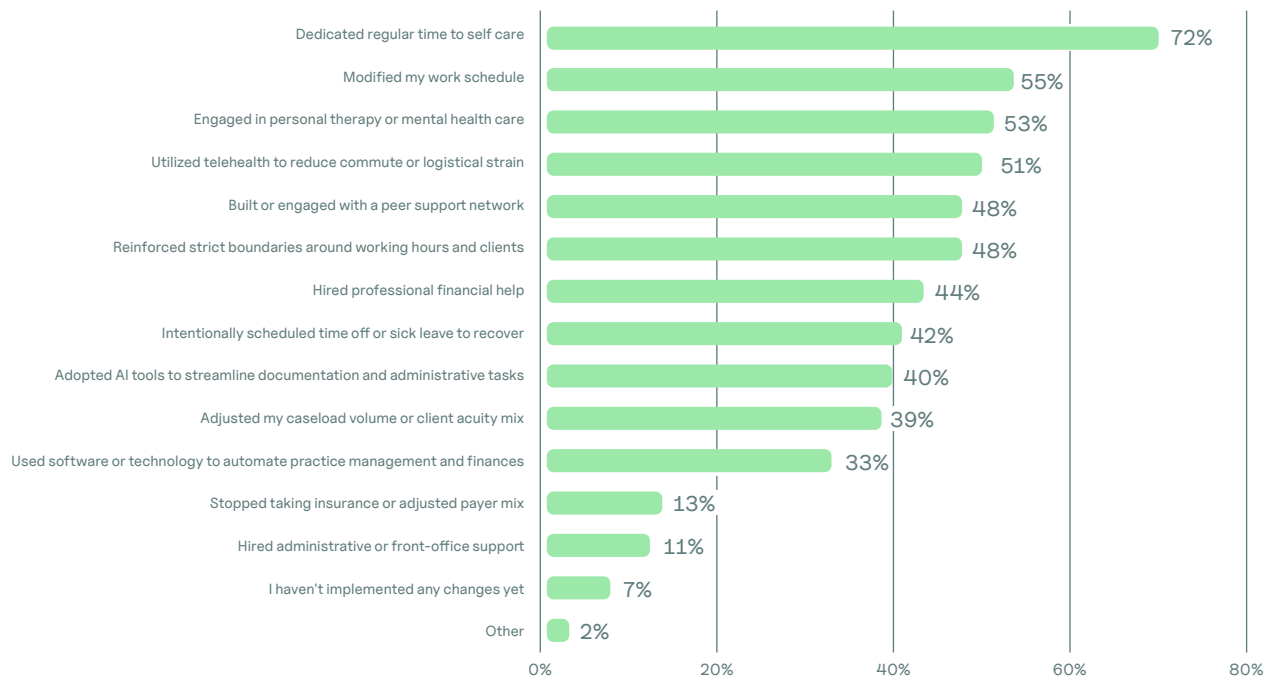
Beyond building sustainable technology systems, clinicians are building their own personal habits to stay well.

The strategies vary, but the instinct is the same: Independent clinicians are intentionally implementing habits and boundaries to protect their time and energy. **72% have built dedicated time for self-care into their routine, and 48% have reinforced strict boundaries around their working hours.**

Many are also restructuring how they work day to day: **55% have modified their work schedule, and 51% have turned to telehealth to reduce commute time or other logistical strain.**

Some are addressing the root of their stress directly. **53% have engaged in their own therapy or mental health care, and 44% have hired professional financial help (a bookkeeper, accountant, or tax service),** to take some of the business burden off their plate. **42% have gone a step further and intentionally scheduled time off or sick leave specifically to recover.**

Strategies & Tools to Protect Well-Being



Takeaway

Clinicians are taking advantage of the autonomy of private practice to actively redesign how they work.



COMMUNITIES AND SUPPORT

Independent practice still needs infrastructure for connection

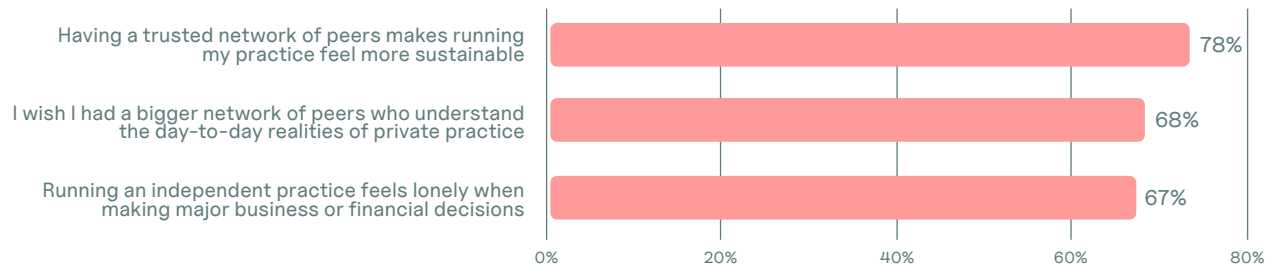
The right peer networks are critical to easing the isolation of private practice.

Independent practice can be isolating, but the gap clinicians describe isn't primarily clinical. Practitioners are looking for peers who understand the financial and operational decisions that come with running a business on their own.

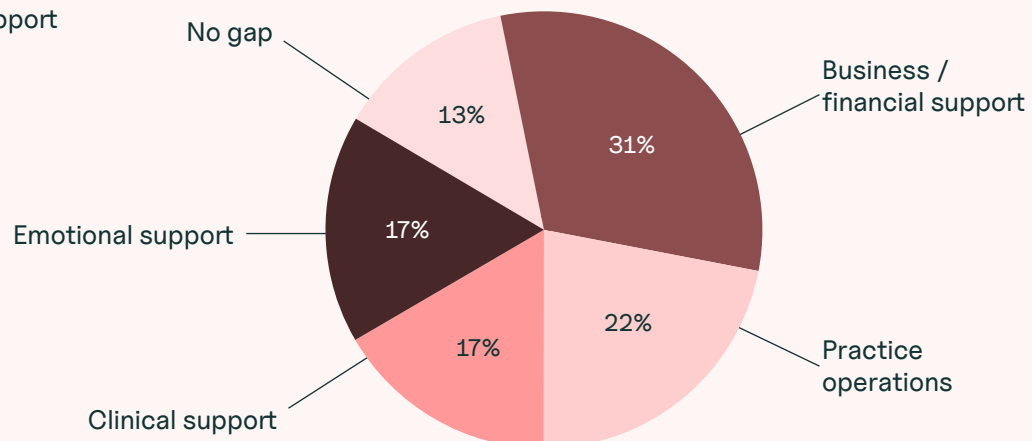
That isolation shows up clearly in the data. **59% of clinicians say running an independent practice often feels lonely or isolating**, and **37% of those experiencing burnout cite professional isolation or a lack of peer support as one of the biggest challenges in running their practice**. That feeling sharpens around major decisions: **67% say running an independent practice feels isolating when it comes to business or financial decisions**, and **68% wish they had a bigger network of peers** who understand the day-to-day realities of private practice.

Connection helps close that gap. **78% say a trusted network of peers makes running their practice feel more sustainable**. That need is especially clear when clinicians are asked where their current network falls short: **31% cite business or financial support as their biggest gap**, ahead of practice operations (22%), clinical support (17%), and emotional support (17%).

Peer Networks & Sustainability



Gaps in Network and Community Support



2026 CLINICIAN WELL-BEING STUDY

Closing thoughts

Independent practice asks clinicians to hold two roles at once: care provider and business owner. Clinicians continue to find deep meaning in their role as providers, but running a business can be stressful.

That tension runs through nearly every finding in this report. Clinicians value the autonomy of private practice, but that autonomy comes with responsibility for the systems an employer might otherwise provide: managing finances, finding clients, choosing technology, protecting time off, setting boundaries, and building a professional network. Those demands are substantial, and for many practitioners, they are becoming harder to absorb.

Still, clinicians are not simply enduring that pressure. They are actively reshaping their practices in

response. They are adopting tools that reduce administrative burden, changing how and when they work, protecting time for their own well-being, seeking financial support, and building stronger peer networks. Together, these choices show how practitioners are using the flexibility of independent practice to make their work more sustainable over time.

The findings suggest that the future of independent practice will depend not only on preserving the autonomy clinicians value, but on surrounding that autonomy with stronger support. The more practitioners can minimize administrative friction and leverage dedicated support systems for the work surrounding care, the more sustainable, autonomous, and impactful independent practice becomes.



Appendix

Methodology

This report is based on a 10–12 minute survey of 862 independent behavioral health practitioners, fielded by SimplePractice in partnership with Heard between September 8 and 14, 2026, and distributed via SimplePractice's customer email list and Heard's newsletter. Respondents were predominantly solo practitioners (80%), with the remainder in group private practice (20%), and most commonly licensed as counselors (42%), social workers (31%), or marriage and family therapists (17%), along with psychologists, psychiatric nurse practitioners, psychiatrists, substance abuse counselors, and applied behavior analysts. Figures reflect top-2-box agreement ('completely' or 'somewhat agree') unless otherwise noted.

Data Privacy & Ethics

Survey responses were analyzed and reported in aggregate. This report does not include individually identifying information about survey respondents or patients. Survey participation was voluntary and findings are presented to reflect respondents' reported experiences and perspectives.

