



## **Investing in Nursing Education to Advance Global Health**

### *A position of the Global Alliance for Leadership in Nursing Education and Science*

Maintaining a robust nursing workforce is essential to meeting the needs of diverse patient populations and advancing global health. As the largest segment of the healthcare workforce, nurses play a critical role in providing life-saving and life-sustaining care across settings. The worldwide nursing shortage of the last decade underscored the importance of preparing adequate numbers of professional nurses and the dangers that result when too few nurses are available to provide care. Recent investigations led by Drs. Jack Needleman and Mary Blegen add to the growing body of research that correlates insufficient nurse staffing and expanding workloads with higher patient mortality and failure-to-rescue rates. With evidence showing a direct link to patient safety, the global supply of professional nurses must be increased to enhance access to quality care.

The recent downturn in the world economy has had a far-reaching impact across industries and has led to a temporary easing of the nursing shortage in some countries. Leading health workforce analysts, including Dr. Peter Buerhaus from Vanderbilt University, have documented this shift in employment, but cautioned against slowing down the production of new nurses to avoid putting the public's health at risk (Tri-Council for Nursing, 2010). The same factors that intensified the last nursing shortage, including an aging patient population and the graying nursing workforce, are still present and will likely instigate a more severe nursing shortage once usual nurse employment and utilization patterns resume.

The Global Alliance for Leadership in Nursing Education and Science (GANES) recognizes the strong connection between maintaining a healthy supply of professional nurses and investing in education. GANES member organizations are concerned that cuts in funding to nursing programs in many countries may leave nations vulnerable to crippling nursing shortages once the economy regains strength. The current economic crisis has impacted the supply and demand for professional nurses on several fronts. For example, many retired nurses are returning to work to enhance family income, and others considering retirement are holding onto their positions. Some hospitals have instituted hiring freezes and are reducing services, which has released some experienced nurses back into the applicant pool to compete with new graduates for jobs. These developments, however, are not adding professional nurses to the workforce to fill new positions that are being created to meet the growing demand for healthcare services. Relying on an older nursing workforce will inevitably lead to an even larger wave of retirements in the coming years.

GANES believes that investments in nursing must extend to advanced levels of education given the great need for more nurses to serve in teaching, research, primary care, specialty, and leadership roles. The demand for nursing faculty is particularly acute, with many nations experiencing a significant gap in the number of educators needed to teach future generations of nurse clinicians. Given the time required to prepare nurses for advanced roles and the impending return of the nursing shortage, a much greater investment must be made to prepare the faculty needed to expand nursing school capacity across continents.

The current stabilization in the nursing workforce is a temporary development and should not be used as justification to curtail public funding for nursing education. Given the aging of the baby boomers and the expected retirement of a large segment of the nurse population, steps must be taken now to ensure that world supply of nurses is strengthened before a crisis emerges. Maintaining a viable nursing workforce will not be possible without consistent and continuing financial support for educational programs that prepare professional nurses.

### **Summary**

Expanding nursing education programs at all levels is essential to ensuring access to quality health care for the world's population. The easing of the nursing shortage in some nations is a direct result of the global financial crisis and should not be used as justification to cut funding for entry-level and advanced programs that prepare professional nurses. Given the aging of the population and a large wave of retirements projected for the nursing workforce, action must be taken now to ensure that an adequate supply of nurses is available to avert a global crisis in the future. As leaders in the nursing community, GANES is calling on all colleague organizations to alert their policymakers and stakeholders to the need for robust and stable funding for nursing education as an effective mechanism for advancing global health.

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### **About GANES**

The Global Alliance for Leadership in Nursing Education and Science (GANES) serves as the international voice on the contribution of professional nursing education and scholarship to improving global health and health care. GANES constitutes the only international body providing strategic-level expertise in the education and professional development of nurses worldwide. Its membership comprises national associations of nursing deans and schools of nursing and is able to offer information, support, and advice to healthcare policy makers and nurse educators across the world. GANES works in partnership with global and national organizations to raise awareness of the key role of nurse education in the improvement of global health and quality of care. See <http://www.ganes.info>.

### **GANES Members**

American Association of Colleges of Nursing  
Canadian Association of Schools of Nursing  
Council of Deans and Heads of UK University Faculties for Nursing and Health Professionals  
Council of Deans of Nursing and Midwifery (Australia and New Zealand)  
Forum of University Nursing Deans in South Africa

## **Addendum and References to the GANES Position Statement on *Investing in Nursing Education to Advance Global Health***

The following is a snapshot of nursing education developments, including funding concerns, raised by individual GANES member organizations.

### **The United Kingdom**

Last year, applications to nursing degree programs increased by 73.7% in the United Kingdom (UK), making nursing the top subject area in terms of the highest number of applications received. Despite the strong student interest, the Department of Health in England recently announced the need to cut funding to nursing programs by up to 15% over the next 3 years. Universities in England have confirmed that the number of commissions is likely to decrease by approximately 10-15%, which would curtail future growth in nursing programs.

Within this overall reduction, there exists considerable variation within each region and by specialty area. In Scotland, cuts of 10% have been announced, which is similar to decreases initiated in Northern Ireland last year. Wales is likely to follow suit and reduce funding as well. With 180,000 nurses in UK due to retire in the next 10 years, cuts of this magnitude may inhibit nursing schools from producing enough nurses to replace those lost to retirement.

Universities are distressed about the level of these cuts, particularly in light of the future changes to the health education and training system in England. Universities remain concerned that if the cuts are front loaded now and a new system emphasizing local decision making is implemented at a later date, instability within this educational sector could increase. Equally, some universities receive approximately 25% of their funding from health professional courses. Therefore the broader stability of some institutions could be influenced by the cuts.

A further concern is the wide level of variation in the number of students being commissioned across the UK. For example, in midwifery, some institutions are facing a 50% cut and yet others are being asked to substantially increase the number of new midwives they are preparing. In the UK, health professional education for individual non-medical courses is funded through a benchmark price, which is determined at the national level. Universities have pointed out that if the benchmark price is cut, it will have an impact within the context of the wider higher education sector where universities will be able to charge fees in most other subject areas.

### **Canada**

Admissions to registered nurse (RN) programs rose steadily in Canada over the last decade from 8,947 in 1999 to 14,010 in 2008-2009. This significant growth represents a multifaceted response to a strong societal demand for more nursing graduates, including government investment in additional seats, the opening of new nursing schools, and the introduction of new program models. The demand for nurses and the baccalaureate entry requirement instituted in all provinces except Quebec also stimulated applicant interest and an upgrade in the quality of applicants to nursing programs.

Despite some regional variation, overall there was intensive recruitment of new nursing graduates in Canada until 2010 when the economic downturn began to result in position cutbacks. Reports across the country indicated that new graduates were experiencing difficulty in finding employment. This change in demand is being attributed to economic factors and to provincial/territorial government policies aimed at increasing the use of practical nurses in positions previously held by registered nurses. Senior nurses who normally would be retired or work fewer hours are remaining in the workforce. However when the economy improves these nurses are expected to withdraw, thus creating a significant gap in the number of nurses needed. Moreover, workforce projections by the Canadian Nurses Association for 2020 continue to predict a shortage of 60,000 nurses based on current enrollments in nursing programs, the demographic profile of the nursing workforce, and assuming no new policy scenarios are implemented. In addition, demand for healthcare services is expected to increase with the aging of the population and the documented increase in chronic disease, such as obesity and diabetes.

The decade between 1999 and 2009 also saw an increase in the number of master's and doctoral programs with a corresponding increase in graduate program enrollments. Currently, 33 schools offer master's programs, and 15 offer doctoral programs in nursing. There were 850 admissions to master's programs in 2004-2005, and 1,130 in 2008-2009. Doctoral program admissions rose from 76 to 84 in the same period. Faculty shortages, however, are also projected. In 2009, 34.2% of permanent faculty were age 55 and older, and 13.7% were over the age of 60.

Despite a recent decrease in employment opportunities for entry-level nurses, projections indicate that it is essential to sustain the increased capacity that schools of nursing developed over the last decade in the next 5 years. Projections also demonstrate that enrollments in graduate programs need to continue to increase to offset anticipated faculty shortages.

### **Australia & New Zealand**

In Australia and New Zealand, there are three levels of nurse: Enrolled Nurse (EN), Registered Nurse (RN) and Nurse Practitioner (NP), an RN with advanced education and training. Nursing and midwifery qualifications are recognized between the two nations under the Trans Tasman Mutual Recognition Agreement. Nurses and midwives represent around 50% of Australia's health workforce, though the availability of clinicians varies greatly in urban and remote areas. New Zealand has a total nursing workforce of approximately 40,000 practicing nurses and nurse assistants. Though there are almost 14,000 midwives on the Midwifery Council of New Zealand registry, only 2,659 held practicing certificates in June 2009.

Like the population in general, the nursing workforce is aging, and impending retirements are likely to exacerbate future nursing shortages. In Australia, the proportion of nurses and midwives age 50 years and over increased from 29.1% to 34.9% from 2004 to 2008. In New Zealand, the average age of the practicing nurses is 47. With a large cohort of nurses expected to retire over the next 5 years, a major challenge exists to ensure an adequate supply of nurses in the coming years. This issue is compounded by the high proportion of part-time workers within this female-dominated profession, retention issues, and international competition for the nursing labor force.

In Australia, increased attention has been given to nurse workforce planning in response to workforce shortages. Following a review of four national reports produced between 2001 and

2004, the Australian Health Workforce Advisory Committee (AHWAC) found ‘sign posts’ pointing to:

- inadequacy in the numbers of nursing graduates to meet the demand
- aging of the nursing workforce, decreasing hours worked, and turnover
- growth in demand for health services, especially in aged care and acute care sectors

AHWAC concluded that the number of nursing places (or seats in nursing education programs) was not sufficient to meet the projected demand and that reforms were needed within the education and clinical environments to ensure that nurses are trained, retained, and supported.

In 2010 a national body was established to meet the future challenges of providing a health workforce that responds to the needs of the Australian community. Health Workforce Australia (HWA) will develop policy and deliver programs across four main areas—workforce planning, policy, and research; clinical education; innovation and reform of the health workforce; and the recruitment and retention of international health professionals. HWA has commenced work to develop a national training plan (NTP) for a number of health professionals, including nurses and midwives. The NTP is required by the government to identify the numbers of health professionals that Australia will need through the year 2025.

At a time when the government is spending millions on compiling workforce research and increasing the supply of nurses and other health professionals, Australia is facing an over-supply of graduates. HWA recognizes that this is a temporary issue, due in part to the global financial crisis. The agency is attempting to quantify the oversupply, the reasons behind it, and possible solutions.

## **United States**

In March 2011, the American Association of Colleges of Nursing (AACN) released data collected in Fall 2010 showing that enrollment in entry-level baccalaureate nursing programs increased by 5.7% from 2009 to 2010, marking the tenth consecutive year of enrollment growth in these programs. Early findings also point to an impressive 21.6% growth in enrollments in RN-to-baccalaureate programs, a 10.8% increase in master’s programs, a 10.4% increase in research-focused doctoral programs, and a 35.3% increase in Doctor of Nursing Practice programs. Interest in nursing careers in the U.S. remains high with more than 400,000 completed applications received at 706 of the nation’s 801 schools of nursing with baccalaureate and/or higher degree nursing programs.

Though enrollment is growing, nursing schools turned away more than 67,000 qualified applications in 2010, including more than 11,000 applications to graduate programs. This trend is particularly troublesome given the great need to expand the number of nurse faculty, which requires preparation at the graduate level. The primary reasons reported by schools for not accepting all qualified applicants were a shortage of faculty and clinical placement sites as well as deep funding cuts at the state and local levels.

In November 2008, Peter Buerhaus, chair of the new National Health Care Workforce Commission, published an article in *Journal of the American Medical Association* on the current

and future state of the U.S. nursing workforce, which speaks to a short-term easing of the nursing shortage in some parts of the country and points to the current recession as a contributing factor. Dr. Buerhaus warns stakeholders and policymakers to not view this current reprieve as the end of the nursing shortage. The shortage is still projected to intensify through 2025 given the aging of the U.S. population and the fact that a large segment of the RN workforce is nearing retirement.

Despite some concerns about new college graduates finding employment in today's tight job market, graduates of baccalaureate nursing programs are securing positions at a significantly higher rate than the national average. In August 2010, AACN conducted an online survey of nursing schools offering entry-level baccalaureate and graduate programs in the U.S. to better assess the experience of new graduates seeking employment. The survey found that the average job offer rate at the time of graduation was 65% for new nurses based on data collected from 402 schools. By comparison, the National Association of Colleges and Employers (NACE) conducted a national survey of new college graduates across disciplines and found that only 24.4% of new graduates had a job offer at graduation. As more practice settings move to require higher levels of education for their registered nurses, AACN expects the demand for baccalaureate-prepared nurses to remain strong as nurse employers seek to raise quality standards and meet consumer expectations for safe patient care.

## References

American Association of Colleges of Nursing. (2011). 2010-2011 Enrollment and graduations in baccalaureate and graduate programs in nursing. Washington, DC: Author.

Australian Institute of Health and Welfare, (2010). *Nursing and Midwifery Labour Force 2008*. Bulletin no. 81. Cat. no. AUS 130. Canberra: AIHW.

Blegen, M.A., Goode, C.J., Spetz, J., Vaughn, T., & Park, S.H. (2011, April). Nurse staffing effects on patient outcomes: Safety-net and non-safety-net hospitals. *Medical Care*, 49(4), 406-414.

Buerhaus, P. (2008, November 26). Current and future state of the US nursing workforce. Commentary. *Journal of the American Medical Association*, 300(20), 2422-2424.

Canadian Nurses Association. (2010, December). Nursing Education in Canada Statistics, 2008-2009. Available online at [http://www.cna-aiic.ca/CNA/documents/pdf/publications/Education\\_Statistics\\_Report\\_2008\\_2009\\_e.pdf](http://www.cna-aiic.ca/CNA/documents/pdf/publications/Education_Statistics_Report_2008_2009_e.pdf).

Needleman, J., Buerhaus, P, Pankratz, S, Leibson, C.L., Stevens, S.R., & Harris, M. (2011, March 17). Nurse staffing and inpatient hospital mortality. *New England Journal of Medicine*, 364,(11) 364:1037-1045.

Tri-Council for Nursing. (2010, May). Educational advancement of registered nurses: A consensus position. Available online at <http://www.aacn.nche.edu/Education/pdf/TricouncilEdStatement.pdf>.