

Focusing a Gender Lens on the Nursing Shortage: Issues and Perspectives from New Jersey and the U.S.

The Nursing and Health Care Provider Shortage

- According to the U.S. Department of Labor, Bureau of Labor Statistics (BLS), health professions dominate among occupations slated for the largest job growth between 2008 and 2018:

2008 National Employment Matrix Title	2008 Actual Employment	2018 Projected Employment	2008-2018 Change	Percent Change (%)	Post-secondary source of education or training
Registered nurses (RNs)	2,618.7	3,200.2	+581.5	22.20	Associate Degree
Home health aides	921.7	1,382.6	+460.9	50.01	Short term on-the-job training
Personal and home care aides	817.2	1,193.0	+375.8	45.99	Short term on-the-job training
Nursing aides	1,469.8	1,745.8	+276.0	18.78	Postsecondary vocational award
Medical Assistants	483.6	647.5	+163.9	33.90	Moderate-term on-the-job training
Licensed practical and licensed vocational nurses (LPNs)	753.6	909.2	+155.6	20.65	Postsecondary vocational award
Physicians and Nurses	661.4	805.5	+144.1	21.79	First professional degree

*All numbers are in thousands.

- However, while enrollment in entry-level baccalaureate nursing programs has increased overall in recent years, these increases are grossly insufficient to meet (1) replacement rates, and (2) projected growth in demand.
- According to a 2007 Robert Wood Johnson Foundation report, long-term workforce projections for New Jersey estimate a shortage of at least 40,000 nurses statewide by 2020.

Recruitment, Retention, and Replacement (“Supply-side issues”):

- Aging nursing population: The average age of registered nurses in the U.S. is climbing (from 46.8 in 2004, to 47 in 2008), suggesting that insufficient numbers of younger workers are entering the profession to offset retirements and early career exits.
- Faculty Shortages: In 2009 alone, U.S. nursing schools reported turning away 54,991 qualified applicants from baccalaureate and graduate-level nursing programs. Almost two-thirds of schools surveyed indicated that faculty shortages prevent them from accepting qualified applicants.
 - New Jersey shares in this problem, due to both existing nursing faculty shortages and a high rate of projected retirements among full-time faculty.
- Gendered perceptions: Cultural perceptions of nursing as a subsidiary and subservient profession to majority male physicians continue to discourage both women and men from pursuing this career.
- Turnover: Existing nursing shortages exacerbate levels of stress in an already high-demand job; a recent nurses’ survey found that more than 75 percent of RNs perceive the nursing shortage to have a negative impact on their work life, on the quality of patient care, and on the amount of time spent with patients.
 - According to a 2007 New Jersey nurses’ survey, 53 percent of nurses report insufficient numbers of nurses on staff to provide quality patient care.

Expanded Service Needs (“Demand-side issues”):

- Aging of the population: According to a 2001 report by the Nursing Institute at the University of Illinois, College of Nursing, the ratio of potential caregivers to those with the greatest projected need for care may decline by as much as 40 percent in the next 20 years (2010-2030).
- Health coverage reform: The RAND corporation estimates that, by 2019, 24 million fewer people will be uninsured, with benefits felt particularly by those who are older, low-income, and medically needy.

Current Program and Policy Remedies

Recruitment of men:

- The proportion of both active nurses and nursing school students that are men is increasing. The percent of active nurses who are male reached 6.1 percent in 2004.

- As of 2010, Rutgers University is reporting that 14 percent of its nursing undergraduate students are men.
- At Fairleigh Dickinson University, men comprise 12 percent of doctoral students, 7 percent of master's students, and 11 percent of BSN students.
- Recruiting men who have previously been involved in related healthcare professions to become RNs can improve their job status and income.
- Men are well represented among medics in the armed forces. These prior experiences may allow men to enter into the nursing profession soon after they return.
 - The New Jersey State Approving Agency contracts with the U.S. Department of Veterans' Affairs to approve programs of education and training for veterans up to 14 years after separation from active duty. These include programs in the healthcare field.
 - Through the Yellow Ribbon GI Education Enhancement Programs, New Jersey universities partner with the Department of Veterans Affairs to actively reach out to Iraq War veterans eligible through the GI Bill.

Privately-funded initiatives:

- New Jersey Nursing Initiative: Robert Wood Johnson Foundation and the New Jersey Chamber of Commerce \$22-million initiative
- Johnson & Johnson and the American Association of Colleges of Nursing launched a scholarship program designed to increase the number of nurse faculty from ethnic backgrounds.

Legislative changes:

- The Patient Protection and Affordable Care Act reauthorizes Title VIII of the Public Health Service Act. This provides:
 - Workforce Diversity Grants: increases opportunities for economically disadvantaged students and racial and ethnic minorities underrepresented in the nursing field
 - Nurse Education Loan Repayment Program: repays 60 to 85 percent of nursing student loans for at least two years of practice in a facility designated to have a critical shortage of nurses
 - Nurse Faculty Loan Program: supports students pursuing masters and doctoral degrees. Loan recipients are required to teach at a nursing school in exchange for cancellation of up to 85 percent of their educational loans
 - Comprehensive Geriatric Education Grants: provides grants to train nurses who provide care for the elderly

- The Patient Protection Affordable Care Act also provides nurse retention programs under:
 - Section 5309: awards grants to nursing schools or health facilities to promote career advancement among nurses
 - Section 5501: provides 10 percent bonus payment under Medicare for fiscal years 2011 through 2016 to primary care practitioners
 - Section 5507: establishes a demonstration grant to provide educational and training opportunities for low-income individuals for positions in the healthcare field that pay well and are expected to be in high demand