



# Consensus Study Report

## HIGHLIGHTS

MAY 2021

## The Future of Nursing 2020–2030

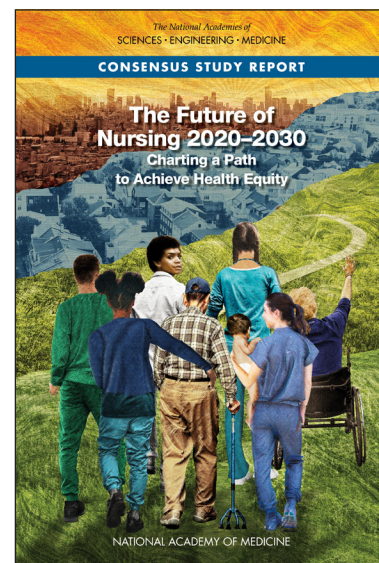
### Charting a Path to Achieve Health Equity

The decade ahead will test the nation's nearly 4 million nurses in new and complex ways. Nurses live and work at the intersection of health, education, and communities and in a wide array of settings and practice at a range of professional levels. They are often the most frequent line of contact with people of all backgrounds and experiences seeking care and they represent the largest of the health care professions.

#### THE ROLE OF NURSES IN ADVANCING HEALTH EQUITY

A nation cannot fully thrive until everyone—no matter who they are, where they live, or how much money they make—can live their healthiest possible life, and helping people live their healthiest life is and has always been the essential role of nurses. Nurses have a critical role to play in achieving the goal of health equity, but they need robust education, supportive work environments, and autonomy. Accordingly, at the request of the Robert Wood Johnson Foundation, on behalf of the National Academy of Medicine, an ad hoc committee under the auspices of the National Academies of Sciences, Engineering, and Medicine conducted a study aimed at envisioning and charting a path forward for the nursing profession to help reduce inequities in people's ability to achieve their full health potential. **The ultimate goal is the achievement of health equity in the United States built on strengthened nursing capacity and expertise.** (For a full list of the committee's recommendations, view the Recommendations insert.)

The committee developed a framework identifying the key areas for strengthening the nursing profession to meet the challenges of the decade ahead. These areas include the nursing workforce, leadership, nursing education, nurse well-being, and emergency preparedness and response, as well as responsibilities of nursing with respect to structural and individual determinants of health. Nurses play multiple roles in acute care, community, and public health settings, through which they can influence the medical and social factors that drive health outcomes, health equity, and health care equity.



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## **ACTING NOW TO IMPROVE THE HEALTH AND WELL-BEING OF THE NATION**

The demand for nurses will increase in the decade ahead due to the health needs of the aging population, increases in behavioral and mental health conditions, increases in lack of access to primary health care, high maternal mortality rates, worsening physician shortages, and other sociodemographic factors and health workforce imbalances. The nursing workforce will also face challenges from within the health care system and the health care workforce, and from health-related policies and other factors that affect the scope of practice, size, distribution, diversity, and nursing education. In the current system, care is often disjointed. Nurses provide care coordination that helps ensure seamless care, serve as advocates for patients and communities, and assist in increasing individuals' trust in and engagement with the health care system.

## **LIFTING BARRIERS TO EXPAND THE CONTRIBUTIONS OF NURSING**

The past two decades have seen progress in lifting state-level regulations restricting the scope of practice for advanced practice registered nurses (APRNs), but 27 states still do not allow full practice authority for nurse practitioners.<sup>1</sup> Eliminating these restrictions so APRNs can practice to the full extent of their education and training will increase the types and amount of high-quality health care services that can be provided to those with complex health and social needs. Institutional barriers also need to be lifted for APRNs and other nurses, including registered nurses (RNs) and licensed practical nurses (LPNs), to allow them to practice to the top of their education and training.

## **DESIGNING BETTER PAYMENT MODELS**

The current payment systems are not designed to pay for services that address social needs and social determinants of health (SDOH) nor advance health equity.<sup>2</sup> By supporting team-based care, improved communication, and proven interventions and strategies that can reduce health disparities, payment systems can enable nurses to make these essential contributions to improving care and outcomes for all patients. New payment models (e.g., accountable care organizations, accountable health communities, value-based payment) can give health care organizations the flexibility to address social needs and SDOH and advance health equity.

## **STRENGTHENING NURSING EDUCATION**

Nursing education coursework and experiential learning that prepare students to promote health equity, reduce health inequities, and improve the health and well-being of the population will build the capacity of the nursing workforce. Substantive education in community (e.g., schools, workplaces, home health care, public health clinics) and telework settings allows nursing students to learn about the broad range of care environments and to work collaboratively with other health and non-health professionals. Additionally, nursing schools should continue expanding efforts to recruit and support diverse students and faculty that reflect the populations they serve, through holistic efforts to support, mentor, and sponsor students and faculty from a wide range of backgrounds.

## **VALUING COMMUNITY AND PUBLIC HEALTH NURSING**

Community and public health nurses play a vital role in advancing health equity. School nurses, for example, are front-line health care providers, serving as a bridge between the health care and education systems and other sectors as well as links to broader community health issues through the student populations they serve. More school nurses need the practice authority and payment structure to address complex health and social needs. The COVID-19 pandemic has also heightened the need for team-based care, infection control and prevention, person-centered care, and other population-based skills that reflect the strengths of community and public health nurses.

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<sup>1</sup> APRNs hold at least a master's degree in addition to the initial nursing education and licensing required for all RNs, and may continue in clinical practice or prepare for administrative and leadership positions.

<sup>2</sup> The conditions of the environments in which people live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.

## **FOSTERING NURSES' ROLES AS LEADERS AND ADVOCATES**

A new generation of nurse leaders is now needed—one that recognizes the importance of diversity and equity and is able to use and build on the increasing evidence base supporting the link between SDOH and health status. This requires the contributions of nurses in all roles and settings in a collaborative system of leadership. Nurse leaders can play an important role in acknowledging the history of racism within the profession and health care and help mitigate the effects of discrimination and implicit bias on health.

## **PREPARING NURSES TO RESPOND TO DISASTERS**

The COVID-19 pandemic has revealed chasms within an already fragmented U.S. health care system, resulting in significant excess mortality and morbidity and glaring health inequities. Most affected are communities of color, who suffer from the compound disadvantages of racism, poverty, workplace hazards, limited health care access, and pre-existing health conditions. Articulating the roles and responsibilities of nurses in disaster response and public health emergency management is critical to the nation's capacity to plan for and respond to these types of events.

## **SUPPORTING THE HEALTH AND WELL-BEING OF NURSES**

Nurses' health and well-being are affected by the demands of their workplace, and in turn affect the quality of and safety of the care they provide. Thus, it is essential to address the systems, structures, and policies that create workplace hazards and stresses that lead to burnout, fatigue, and poor physical and mental health among the nursing workforce. The pandemic has illuminated and exacerbated the day-to-day demands of nursing. Nurses often cope with unrealistic workloads; insufficient resources and protective equipment; risk of infection; stigma directed at health care workers; and the mental, emotional, and moral burdens of caring for patients with a new and unpredictable disease and helping with contact tracing and testing. To help address the many SDOH, nurses need to first feel healthy, well, and supported. Policy makers, nurse employers, nursing schools, nurse leaders, and nursing associations all have a role in achieving this goal. Ultimately, the health and well-being of nurses influence the quality, safety, and cost of the care they provide, as well as organizations and systems of care.

## **CONCLUDING REMARKS**

Nurses are bridge builders and collaborators who engage and connect with people, communities, and organizations to promote health and well-being. They need ongoing support from the systems that educate, train, employ, and enable nurses to advance health equity. The COVID-19 pandemic has starkly revealed the challenges nurses face every day, and has added significant new challenges. It has also given some nurses more autonomy, shifted payment models, and sparked overdue conversations about dismantling racism in health care. Policy makers and system leaders should seize this moment to support, strengthen, and transform the largest segment of the health workforce so nurses can help chart our country's course to good health and well-being for all.

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To read the full report, please visit  
[nam.edu/publications/the-future-of-nursing-2020-2030](https://nam.edu/publications/the-future-of-nursing-2020-2030)  
<http://www.nationalacademies.org/future-of-nursing-2020-2030>



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# RECOMMENDATIONS

MAY 2021 • THE FUTURE OF NURSING 2020–2030: CHARTING A PATH TO ACHIEVE HEALTH EQUITY

**Recommendation 1:** In 2021, all national nursing organizations should initiate work to develop a shared agenda for addressing social determinants of health and achieving health equity. This agenda should include explicit priorities across nursing practice, education, leadership, and health policy engagement. The Tri-Council for Nursing and the Council of Public Health Nursing Organizations, with their associated member organizations, should work collaboratively and leverage their respective expertise in leading this agenda-setting process. Relevant expertise should be identified and shared across national nursing organizations, including the Federal Nursing Service Council and the National Coalition of Ethnic Minority Nurse Associations. With support from the government, payers, health and health care organizations, and foundations, the implementation of this agenda should include associated timelines and metrics for measuring impact.

**Recommendation 2:** By 2023, state and federal government agencies, health care and public health organizations, payers, and foundations should initiate substantive actions to enable the nursing workforce to address social determinants of health and health equity more comprehensively, regardless of practice setting.

**Recommendation 3:** By 2021, nursing education programs, employers, nursing leaders, licensing boards, and nursing organizations should initiate the implementation of structures, systems, and evidence-based interventions to promote nurses' health and well-being, especially as they take on new roles to advance health equity.

**Recommendation 4:** All organizations, including state and federal entities and employing organizations, should enable nurses to practice to the full extent of their education and training by removing barriers that prevent them from more fully addressing social needs and social determinants of health and by improving health care access, quality, and value. These barriers include regulatory and public and private payment limitations; restrictive policies and practices; and other legal, professional, and commercial<sup>1</sup> impediments.

**Recommendation 5:** Federal, tribal, state, local, and private payers and public health agencies should establish sustainable and flexible payment mechanisms to support nurses in both health care and public health, including school nurses, in addressing social needs, social determinants of health, and health equity.

**Recommendation 6:** All public and private health care systems should incorporate nursing expertise in designing, generating, analyzing, and applying data to support initiatives focused on social determinants of health and health equity using diverse digital platforms, artificial intelligence, and other innovative technologies.

**Recommendation 7:** Nursing education programs, including continuing education, and accreditors and the National Council of State Boards of Nursing should ensure that nurses are prepared to address social determinants of health and achieve health equity.

**Recommendation 8:** To enable nurses to address inequities within communities, federal agencies and other key stakeholders within and outside the nursing profession should strengthen and protect the nursing workforce during the response to such public health emergencies as the COVID-19 pandemic and natural disasters, including those related to climate change.

**Recommendation 9:** The National Institutes of Health, the Centers for Medicare & Medicaid Services, the Centers for Disease Control and Prevention, the Health Resources and Services Administration, the Agency for Healthcare Research and Quality, the Administration for Children and Families, the Administration for Community Living, and private associations and foundations

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<sup>1</sup> The term "commercial" refers to contractual agreements and customary practices that make antiquated or unjustifiable assumptions about nursing.

should convene representatives from nursing, public health, and health care to develop and support a research agenda and evidence base describing the impact of nursing interventions, including multisector collaboration, on social determinants of health, environmental health, health equity, and nurses' health and well-being.

To read the full report, visit  
**[nam.edu/publications/the-future-of-nursing-2020-2030](https://nam.edu/publications/the-future-of-nursing-2020-2030)**  
**[nationalacademies.org/our-work/the-future-of-nursing-2020-2030](https://nationalacademies.org/our-work/the-future-of-nursing-2020-2030)**

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# The Future of Nursing 2020-2030

## Charting a Path to Achieve Health Equity

### REPORT BRIEF



## Lifting Nurse Practice Barriers to Advance Health Equity

### The Challenge

Everyone, no matter who they are or where they live, needs access to high-quality, affordable health care and opportunities for health so they can be healthy and well. But as of March 2020, more than 80 million people—roughly one-quarter of the country—lived in an area with a shortage of health professionals. Factors like race, level of income, and access to safe and affordable housing and transportation also directly impact health and well-being. Nurses at all levels and in all settings have the education, skills, experience, and training to fill this critical care gap and address health disparities—if they are given the autonomy and institutional support to do so.

Expanding scope of practice for advanced practice registered nurses, including nurse practitioners—which allows them to prescribe medication, diagnose patients, and provide treatment independent of a physician—would significantly increase access to care, particularly in rural and underserved communities, which tend to experience high poverty rates and a heavy burden of chronic disease.

Twenty-seven states still restrict full practice authority for nurse practitioners. According to a 2018 UnitedHealth Group report, if all states allowed nurse practitioners to practice to the full extent of their education and training, about 31 million more people living in primary care shortage areas would have access to the primary care they need to stay healthy.

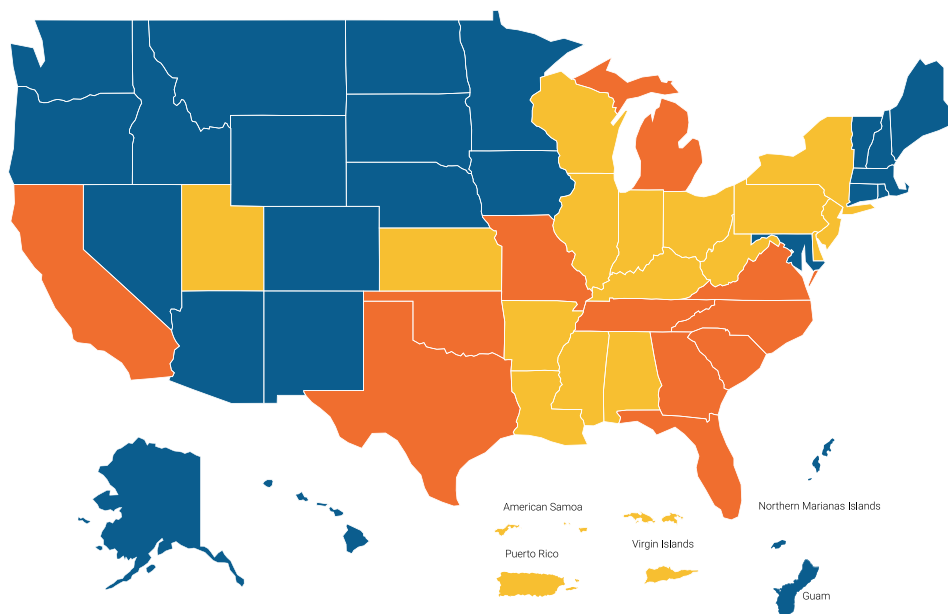
### About the Report

For too long, the United States has overinvested in treating illness and underinvested in promoting health and well-being and preventing disease. Even before COVID-19 illuminated disparities and exacerbated inequities in the United States, nurses were advocating for better care and access for individuals, families, and communities. At the request of the Robert Wood Johnson Foundation, a National Academy of Medicine committee conducted a study aimed at charting a path forward for the nursing profession to help ensure that all people have what they need to live their healthiest lives. The report was published in May 2021 and builds on progress nurses have made over the past decade.<sup>1</sup>

### Why Nurses?

Promoting health and well-being has long been an essential role of nurses—they are bridge builders and collaborators who engage and connect with people, communities, and organizations to ensure people from all backgrounds have what they need to be healthy and well. But they need ongoing support from the systems that educate, train, employ, and enable them to fully deploy their expertise and training so they can help advance health equity for all.

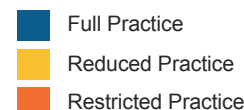
<sup>1</sup> <https://www.nap.edu/catalog/12956/the-future-of-nursing-leading-change-advancing-health>



**FIGURE 3-3**

*Scope of practice for nurse practitioners by state.*

*Source: AANP, 2020.*



#### Expanding scope of practice advances health equity:

- During the pandemic, eight states took emergency action so nurse practitioners could practice to the full extent of their education and training and address care gaps. This expanded access to everything from COVID-19 treatment to maternal care.
- To address the opioid crisis, a 2017 federal waiver allowed nurse practitioners to prescribe buprenorphine. This significantly increased access to care in some rural communities and kept many people experiencing addiction safe.

Nurses at all levels and in all settings face multiple practice barriers to advancing health equity beyond those limiting scope of practice. These range from restrictions on providing telehealth services to workplace policies that prevent them from providing the best care possible. For the country to achieve health equity for all, nurses need environments that allow them to fully leverage their skills and expertise across settings.

#### The Solution

**The committee recommends that all relevant state, federal and private organizations enable nurses to practice to the full extent of their education and training by removing practice barriers that prevent them from more fully addressing social needs and social determinants of health and improve health care access, quality, and value.**

When nurses can practice to the full extent of their education and training, their abilities to tackle the root causes of poor health, expand access to care, and create more equitable communities will be limitless. To accomplish this:

- **By 2022, all changes in policies and state and federal laws adopted in response to COVID-19 should be made permanent**, including those that expanded scope of practice, telehealth eligibility, insurance coverage, and payment parity for services nurses provide.
- **Federal authority should be used to supersede restrictive state laws**, including those addressing scope of practice, telehealth, and insurance coverage and payment.



**Read *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity***



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# The Future of Nursing 2020-2030

## Charting a Path to Achieve Health Equity

### REPORT BRIEF



## Paying for Health Equity

### The Challenge

Improving the health of all people should drive how the U.S. pays for health care and public health. But the current system is designed to pay for quantity, not quality, of care; to treat existing illnesses but not prevent them; and to prioritize hospital and specialty care over primary and preventative care.

In doing so, the payment system undervalues the care that nurses provide and underestimates the critical role that they play in addressing obstacles to good health, such as poverty and discrimination, and in expanding access to care. For example, payment systems often only reimburse for physicians' services—excluding services of other care providers, including nurses, and team-based care.

School nurses are a prime example of the important role the profession plays in bridging health and social needs and filling gaps in access to primary care. A school nurse can build relationships with students, connect them with resources they need, and address the root causes of poor health. One study in Massachusetts found that each dollar invested in school health services yielded \$2.20 in savings per student in avoided medical procedures and lost productivity of teachers and parents. But funding for school nurses, particularly in low-income and underserved communities, is lacking—about 25 percent of U.S. schools don't employ a school nurse and 35 percent only employ one part-time.

### About the Report

For too long, the United States has overinvested in treating illness and underinvested in promoting health and well-being and preventing disease. Even before COVID-19 illuminated disparities and exacerbated inequities in the United States, nurses were advocating for better care and access for individuals, families, and communities. At the request of the Robert Wood Johnson Foundation, a National Academy of Medicine committee conducted a study aimed at charting a path forward for the nursing profession to help ensure that all people have what they need to live their healthiest lives. The report was published in May 2021 and builds on progress nurses have made over the past decade.<sup>1</sup>

### Why Nurses?

Promoting health and well-being has long been an essential role of nurses—they are bridge builders and collaborators who engage and connect with people, communities, and organizations to ensure people from all backgrounds have what they need to be healthy and well. But they need ongoing support from the systems that educate, train, employ, and enable them to fully deploy their expertise and training so they can help advance health equity for all.

<sup>1</sup> <https://www.nap.edu/catalog/12956/the-future-of-nursing-leading-change-advancing-health>

Limited scope of practice for nurses and advanced practice registered nurses, chronic underfunding of public health and school nurses, and underuse of telehealth also hinder nurses' ability to advance health equity. For the United States to provide everyone what they need to be healthy, public and private payment systems must support and incentivize health care and public health organizations to enable nurses to perform these roles.



**Each dollar invested in school health services yielded \$2.20 in savings per student in avoided medical procedures and lost productivity of teachers and parents.**



**1 in 4 U.S. schools don't employ a school nurse**

## The Solution

**The committee recommends that public and private payers and public health agencies establish sustainable and flexible payment mechanisms to support nurses in both health care and public health, including school nurses, in addressing social needs, social determinants of health, and health equity.**

Federal, tribal state, local, and private payers and public health agencies should champion payment reforms that allow nurses to fully address social needs, improve community health, and advance health equity, including:

- **Reforming and embracing payment models**, such as accountable care organizations (ACOs), accountable health communities (AHCs), and value-based payment (VBP), which can give health care organizations the flexibility to pursue these goals.
- **Enabling nurses to bill for telehealth services** so they can reach people anywhere.
- **Centering performance measures on health equity** to incentivize nursing roles and functions that address the social determinants of health.
- **Allowing nurses to practice to the full extent of their education and training**, and ensuring they can bill for these services.
- **Investing in diversifying the nursing workforce and reforming nursing education** so that nurses at all levels and in all settings are prepared to advance health equity and represent the communities they serve.
- **Adequately funding school and public health nurses** to expand their reach and help improve health for all. This includes reimbursing for the care that school nurses provide.



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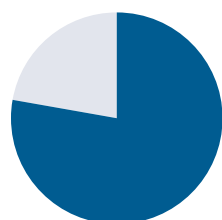
## Preparing Nurses to Respond to Disasters and Public Health Emergencies

### The Challenge

In the last decade, 2.6 billion people globally have been upended by earthquakes, floods, wildfires and other natural disasters. And now, the global coronavirus pandemic has killed more than 3 million people worldwide. All these crises disproportionately affect people of color, those with low incomes, those experiencing housing insecurity, and those with limited access to health care and transportation, ultimately exacerbating health disparities.

Nurses—whether working in a hospital during a disease outbreak or a shelter after a hurricane—serve on the frontlines of these emergencies helping people and communities cope and recover. For instance, a school nurse was the first to notify the Centers for Disease Control and Prevention about the H1N1 outbreak in 2009.

Though nurses heed the call, the U.S. nursing education, health care, and public health systems do not educate, prepare, equip, and support nurses at all levels and in all settings to fully respond to disasters and public health emergencies through an equity lens.



**78%**

of nurses had little or no familiarity with emergency preparedness and disaster response

### About the Report

For too long, the United States has overinvested in treating illness and underinvested in promoting health and well-being and preventing disease. Even before COVID-19 illuminated disparities and exacerbated inequities in the United States, nurses were advocating for better care and access for individuals, families, and communities. At the request of the Robert Wood Johnson Foundation, a National Academy of Medicine committee conducted a study aimed at charting a path forward for the nursing profession to help ensure that all people have what they need to live their healthiest lives. The report was published in May 2021 and builds on progress nurses have made over the past decade.<sup>1</sup>

### Why Nurses?

Promoting health and well-being has long been an essential role of nurses—they are bridge builders and collaborators who engage and connect with people, communities, and organizations to ensure people from all backgrounds have what they need to be healthy and well. But they need ongoing support from the systems that educate, train, employ, and enable them to fully deploy their expertise and training so they can help advance health equity for all.

<sup>1</sup> <https://www.nap.edu/catalog/12956/the-future-of-nursing-leading-change-advancing-health>

- A survey of more than 5,000 nurses revealed that 78 percent had little or no familiarity with emergency preparedness and disaster response.
- Nursing schools' curriculum varies and does not always teach students thoroughly about health care emergency preparedness.
- Students who have learned about the topic report low confidence in their competency.

As the COVID-19 pandemic has starkly revealed, responding to crises also takes a serious mental health toll on nurses at all levels. Throughout the crisis, many nurses did not feel protected, supported, safe, or prepared. The pandemic has revealed the critical importance of protecting the mental health and well-being of nurses so that they can respond to disasters effectively, safely, and with equity at the forefront.

Whether during a hurricane or an infectious disease outbreak, nurses can help build community resilience by understanding how disasters affect people's health and restrict access to resources like transportation, medical care, food, shelter, and jobs. With the right training and support, nurses can play a role in everything from distributing vaccines equitably to ensuring evacuees in shelters receive the physical and mental health care they need to recover.

## The Solution

**The committee recommends that federal agencies and other stakeholders within and outside the nursing profession strengthen and protect the nursing workforce to respond to public health emergencies and natural disasters.**

Bold actions need to be taken now to transform nursing education, practice, and policies across health care and public health systems and organizations so the nursing workforce is prepared to respond to future crises through an equity lens, including:

- **The Centers for Disease Control and Prevention establishing a National Center for Disaster Nursing and Public Health Emergency Response**, along with regional centers, to act as a hub to prepare the nursing workforce. The CDC and the center should create a national action plan to address gaps in nursing emergency preparedness.
- **Federal agencies supporting efforts to develop and support the knowledge base** of the workforce on these issues.
- **Nursing schools and employers expanding disaster preparedness educational and training opportunities** for nurses at all levels and in all settings, while working across sectors to develop emergency response plans.



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# The Future of Nursing 2020-2030

## Charting a Path to Achieve Health Equity

### REPORT BRIEF



## Transforming Nursing Education

### The Challenge

Like the 1918 influenza pandemic and World War I, COVID-19 will forever change how we educate nurses. The pandemic has reinforced that all nurses should possess deep, empathetic, real-world knowledge and understanding of the social, economic, and environmental factors that affect health and well-being. But in the United States, many nurses are still not taught about these issues in their undergraduate or graduate classrooms, including their clinical experiences. Polls show that nurses at all levels think they could have done their jobs better if they had more education and training on these topics.

Most nursing schools cover health equity and the social determinants of health as a siloed topic. This approach does not create a foundational understanding and fails to prepare nurses to work in a wide variety of settings and with people from diverse backgrounds. Whether they are working in a primary care clinic, a hospital, or an elementary school, nurses need the tools to help people and communities navigate and address inequities.

The nursing profession also must reflect the diversity of the country. The United States needs more nurses in clinics and hospitals, communities, and leadership positions who look like the people and families they care for and who can inspire underrepresented students to join the workforce. The educational system can play a key role in making this happen.

### About the Report

For too long, the United States has overinvested in treating illness and underinvested in promoting health and well-being and preventing disease. Even before COVID-19 illuminated disparities and exacerbated inequities in the United States, nurses were advocating for better care and access for individuals, families, and communities. At the request of the Robert Wood Johnson Foundation, a National Academy of Medicine committee conducted a study aimed at charting a path forward for the nursing profession to help ensure that all people have what they need to live their healthiest lives. The report was published in May 2021 and builds on progress nurses have made over the past decade.<sup>1</sup>

### Why Nurses?

Promoting health and well-being has long been an essential role of nurses—they are bridge builders and collaborators who engage and connect with people, communities, and organizations to ensure people from all backgrounds have what they need to be healthy and well. But they need ongoing support from the systems that educate, train, employ, and enable them to fully deploy their expertise and training so they can help advance health equity for all.

<sup>1</sup> <https://www.nap.edu/catalog/12956/the-future-of-nursing-leading-change-advancing-health>

While the nursing workforce has steadily grown more diverse, there are still significant cost, cultural, social, and awareness barriers that prevent people of color, those with low incomes, first-generation college students, and others from pursuing careers in the field—and particularly from pursuing advanced degrees.

Nursing program faculty are also overwhelmingly white and female: As of 2018, only 17.3 percent of full-time faculty in nursing schools were from underrepresented groups. Currently, these faculty are not all prepared to educate students in the social determinants of health and health equity.

There is also a significant shortage of faculty, which played a role in nursing programs turning away more than 80,000 otherwise qualified applicants in the 2019-2020 enrollment cycle.

To advance health equity for all, nursing schools need to expand their capacity to educate, mentor, and support more aspiring nurses from a range of backgrounds.



**17.3%**

of full-time faculty in nursing schools were from underrepresented groups as of 2018.

**80,000+**

otherwise qualified applicants in the 2019-2020 enrollment cycle were turned away due to faculty shortages.

## The Solution

**The committee recommends that nursing education programs, including continuing education, and accreditors and the National Council of State Boards of Nursing ensure nurses are prepared to address social determinants of health and achieve health equity.**

Nurses at every level and in every setting are wired to be leaders—of teams, of communities, of systems, and in the mission to advance health equity. Educational institutions and accreditors need to be more intentional about inspiring, empowering, and preparing nurses to promote good health and well-being for all, including by:

- **Integrating content on the social determinants of health and health equity throughout nursing educational programs**, not just in a handful of courses.
- **Extending education and training beyond the classroom and traditional clinical experiences** to experiential learning opportunities in communities.
- **Cultivating inclusive learning environments that acknowledge and challenge racism** in all aspects of nursing education and practice.
- **Intentionally recruiting, supporting, and mentoring faculty and students from diverse backgrounds** to ensure that the next generation of nurses reflects the communities they serve. Nursing accreditors can play a role by requiring standards for student diversity just like other health professions schools.



Read *The Future of Nursing 2020-2030: Charting a Path to Achieve Health Equity*



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# The Future of Nursing 2020-2030

## Charting a Path to Achieve Health Equity

### REPORT BRIEF



## Valuing Community and Public Health Nursing

### The Challenge

The COVID-19 pandemic and what it has revealed about the effects of poverty, racism, and underinvestment in communities on health have illuminated the consequences of devaluing public health and underestimating the role that nurses can play in improving health and preventing disease. But if adequately valued and funded, community and public health nurses are uniquely positioned and trained to bridge health care and social needs and advance health equity.

For example, school nurses are a lifeline for 56 million students, particularly children from low-income families. They can detect illnesses early, help manage chronic conditions, and contact trace outbreaks during a pandemic. They also provide mental health care, a need that has grown tremendously during the pandemic among young people. Prior to the pandemic, about one-third of student health visits to school nurses were related to mental health. Students of color face more barriers to accessing mental health treatment than others, and structural racism can exacerbate these conditions.

Though school nurses play a vital role in increasing access to health care, advancing health equity, and keeping kids in school, they are vastly underfunded and undervalued. The average school nurse works simultaneously across three schools and funding sometimes must be pieced together. One in four schools in the United States does not employ a

### About the Report

For too long, the United States has overinvested in treating illness and underinvested in promoting health and well-being and preventing disease. Even before COVID-19 illuminated disparities and exacerbated inequities in the United States, nurses were advocating for better care and access for individuals, families, and communities. At the request of the Robert Wood Johnson Foundation, a National Academy of Medicine committee conducted a study aimed at charting a path forward for the nursing profession to help ensure that all people have what they need to live their healthiest lives. The report was published in May 2021 and builds on progress nurses have made over the past decade.<sup>1</sup>

### Why Nurses?

Promoting health and well-being has long been an essential role of nurses—they are bridge builders and collaborators who engage and connect with people, communities, and organizations to ensure people from all backgrounds have what they need to be healthy and well. But they need ongoing support from the systems that educate, train, employ, and enable them to fully deploy their expertise and training so they can help advance health equity for all.

<sup>1</sup> <https://www.nap.edu/catalog/12956/the-future-of-nursing-leading-change-advancing-health>

school nurse at all. Schools with more students from families with low incomes are also less likely to have access to a school nurse. Since 2014, all states have been able to bill Medicaid for school nurse services but only a handful have taken advantage of this, in part due to the complicated billing process.

Public health nurses are embedded in communities and work across settings—from shelters to government agencies to community-based centers to vaccine distribution sites. They manage public health programs, educate the public, craft policies, build coalitions, and more. During the pandemic, public health nurses collaborated with their colleagues working in hospitals to contain and limit infection while caring for people sick with the virus.

As members of the communities they serve, public health nurses build trust and relationships with individuals and local leaders. They also develop a strong understanding of people's experiences, backgrounds, and the social factors that influence health, helping them to practice cultural humility with empathetic care.

Strengths of community and public health nurses—team-based care, a holistic approach, community-centered care, advocacy, and more—are skills that will be key to ensuring everyone has what they need to be healthy and well. Investments that expand, strengthen, and diversify the community and public health nursing workforce will go a long way in advancing health equity for all.

School nurses are a lifeline for

# 56 Million

students, particularly children from low-income families

## The Solution

**The committee recommends that by 2023, state and federal government agencies, health care and public health organizations, payers, and foundations initiate substantive actions to enable the nursing workforce to address social determinants of health and health equity more comprehensively, regardless of practice setting.**

Community and public health nurses have been pivotal in advancing health equity for years. To expand their reach and impact in communities nationwide, actions need to be taken, including:

- **Investing significant resources and funding to increase the number of community and public health nurses**, particularly those serving communities of color, those with low incomes, rural communities, the LGBTQ community, and others with more complex health needs.
- **Establishing a national nursing workforce commission** or something similar that would track progress on and develop further recommendations for preparing nurses to address the social determinants of health and advance health equity.

Prior to the pandemic, about



one third of student health visits to school nurses were related to mental health



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# Unleashing the **POWER OF THE NURSE** to Achieve Health Equity

1

We will never thrive as a country unless we all have what we need to live a healthy life, no matter who we are or where we live.

2

Nurses are catalysts for this change. They are trusted bridge builders who collaborate with people, communities and organizations to promote good health and well-being no matter one's background.

3

For our country to advance health equity for all, the systems that educate, pay, employ, and enable nurses need to permanently remove practice barriers, value their contributions, prepare them to understand and tackle the social factors that affect health, and diversify the workforce.