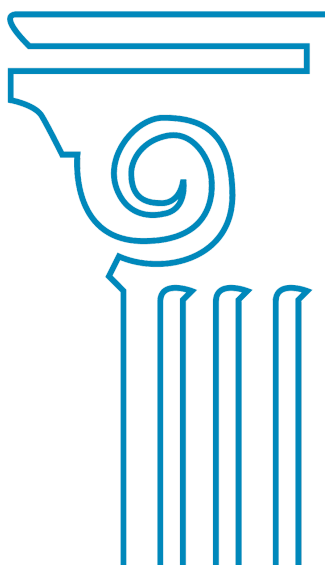


American Association  
of Colleges of Nursing



# **Survey on Vacant Faculty Positions for Academic Year 2026-2027**

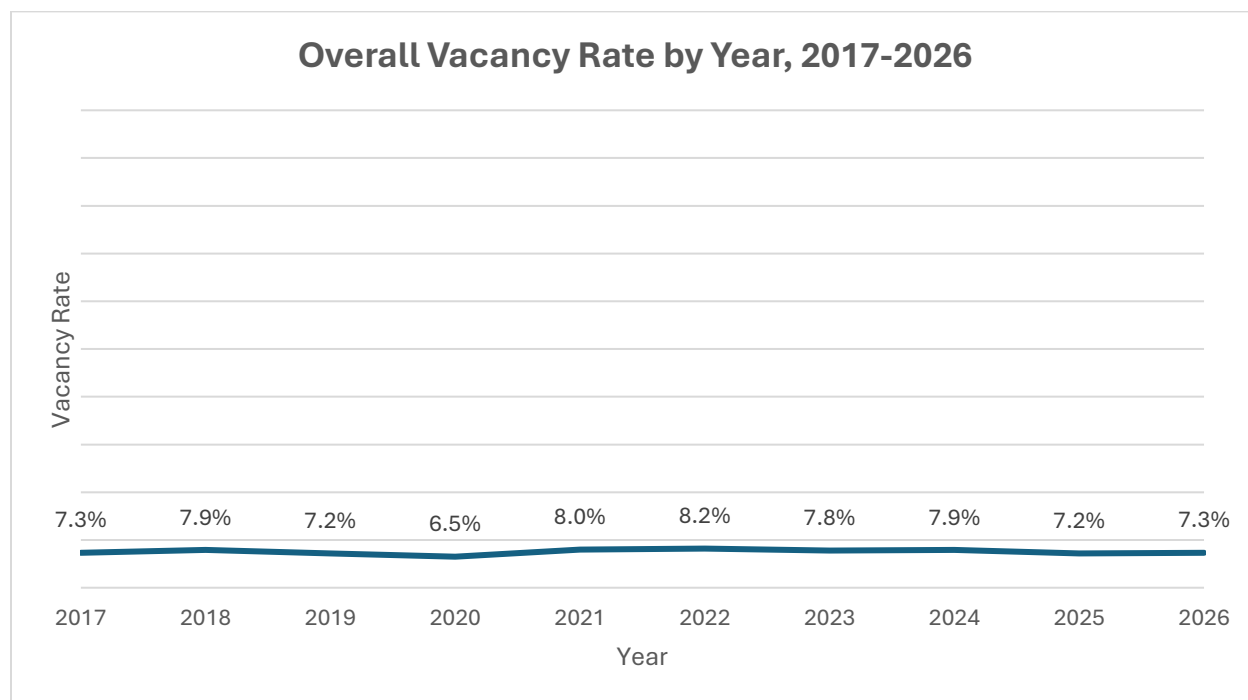
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*The Voice of Academic Nursing*

## Executive Summary

Conducted by the American Association of Colleges of Nursing (AACN), the 2026 Faculty Vacancy Survey provides a national overview of budgeted, unfilled full-time faculty positions at schools of nursing offering baccalaureate and graduate programs. Across 931 responding schools, institutions reported 23,346 budgeted full-time faculty positions and 1,713 vacancies, resulting in an overall vacancy rate of 7.3%. The vacancy rate has remained relatively stable over the past decade, ranging from 6.5% in 2020 to 8.2% in 2022.



Slightly more than half of responding schools, 53%, reported at least one vacant position. Among schools with vacancies, the median was two positions, and 197 schools reported a combined 475 positions that had been vacant for more than one year. The need for faculty extended beyond institutions with formally budgeted vacancies. Among the 437 schools reporting no current vacancies, 183 indicated that they nevertheless needed additional full-time faculty, representing the need for 365 additional positions.

Vacancy rates varied across selected institutional characteristics. Rates were lowest in the Midwest at 4.7% and highest in the West at 8.8%. Public institutions had a somewhat higher vacancy rate than private institutions, while comparatively little variation was found by research designation, academic health center status, or whether the institution was organized as a college or university. Higher vacancy rates were reported among proprietary institutions and Historically Black Colleges and Universities.

The vacant positions reflected a broad range of faculty needs. Nearly half were nontenure-track positions, while approximately one-third were tenure-track. More than one-third required a master's degree with a doctoral degree preferred, and 27% required a doctoral degree. Assistant professor, instructor, and open-rank appointments were the most frequently reported appointment levels. Most vacancies did not require a specific clinical specialty, and baccalaureate education accounted for the largest single instructional-level category.

Schools continue to face substantial recruitment challenges. Similar to previous years, the highest-ranked barriers to filling full-time faculty vacancies were noncompetitive salaries, difficulty finding candidates with the necessary teaching experience, and difficulty finding faculty with the appropriate specialty mix. Among schools that needed additional faculty but did not have budgeted vacancies, administrative hiring constraints and insufficient funding were the most commonly reported barriers.

Faculty vacancies also affected multiple dimensions of institutional capacity. Respondents most frequently identified significant effects on research, administrative and operational responsibilities, committee work and program governance, and clinical instruction or supervision. Reported consequences included greater reliance on adjunct faculty, strain on administration and operations, instructional scheduling challenges, reduced availability of student mentoring, and declines in research productivity. Overall, 95% of respondents with vacancies reported a workforce-related effect, demonstrating that faculty shortages have implications extending beyond the unfilled positions themselves.

Taken together, the findings indicate that the national nursing faculty vacancy rate remains persistent rather than temporary. Although the overall rate has changed relatively little in recent years, long-standing vacancies, unmet need at schools without budgeted openings, and continuing salary, experience, specialty, funding, and administrative barriers constrain schools' ability to build and sustain the faculty workforce. Addressing the shortage will require attention not only to recruitment, but also to institutional resources, hiring flexibility, faculty preparation, and the working conditions needed to retain qualified nursing faculty.

## **Introduction**

Since 2000, AACN has collected data from schools of nursing to assess the current state of the nursing faculty shortage. The annual Faculty Vacancy Survey collects data on budgeted but unfilled full-time faculty positions by rank, tenure, and level of teaching. This year, the survey was sent to 1,163 nursing schools offering baccalaureate and graduate degrees,

931 of which responded. This report contains the aggregate data collected from this survey. It does not contain institution-specific responses such as school names or contact information for the person who responded to the survey. For any institution-specific data or contact information, please contact AACN at [datarequest@aacnnursing.org](mailto:datarequest@aacnnursing.org).

## Findings

### *Total Budgeted Faculty*

Across 931 schools, respondents reported a total of 23,346 full-time faculty positions. This ranged from a minimum of zero full-time positions to a high of 421 positions, with a mean of 25 positions, and a median of 13 positions.

### *Vacant Positions*

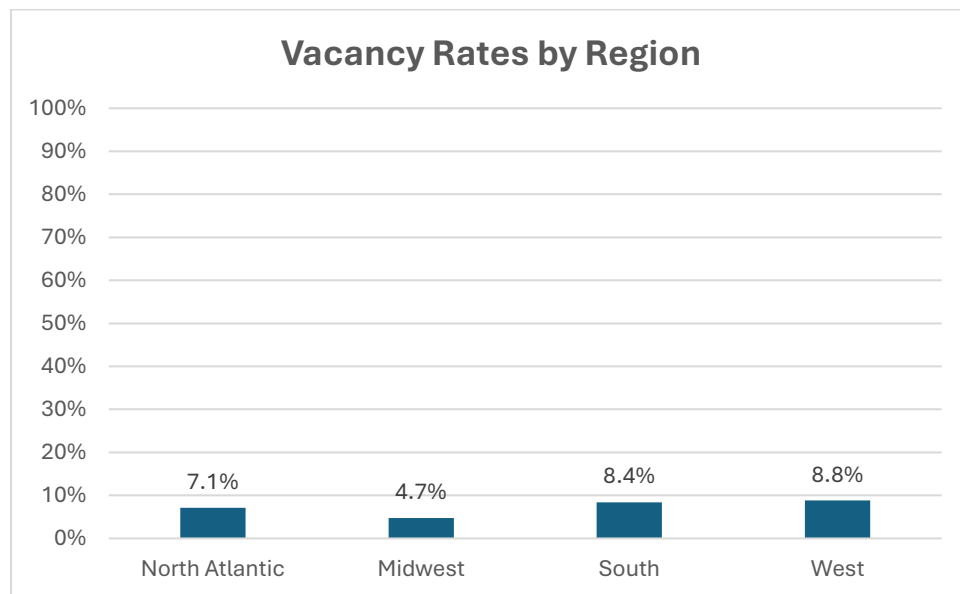
The overall vacancy rate was 7.3%. Slightly more than half of schools, 53%, indicated that they had vacant positions. The total number of vacant positions across all schools was 1,713. The minimum number of vacant positions reported, among schools with vacant positions, was one and the maximum was 47. The mean number of vacant positions was three and a half and the median was two.

One hundred and ninety-seven (197) schools indicated that they had positions that had been vacant for more than a year. The total number of such vacancies was 475, with a minimum of one and a maximum number of 30 positions that had been vacant for more than a year.

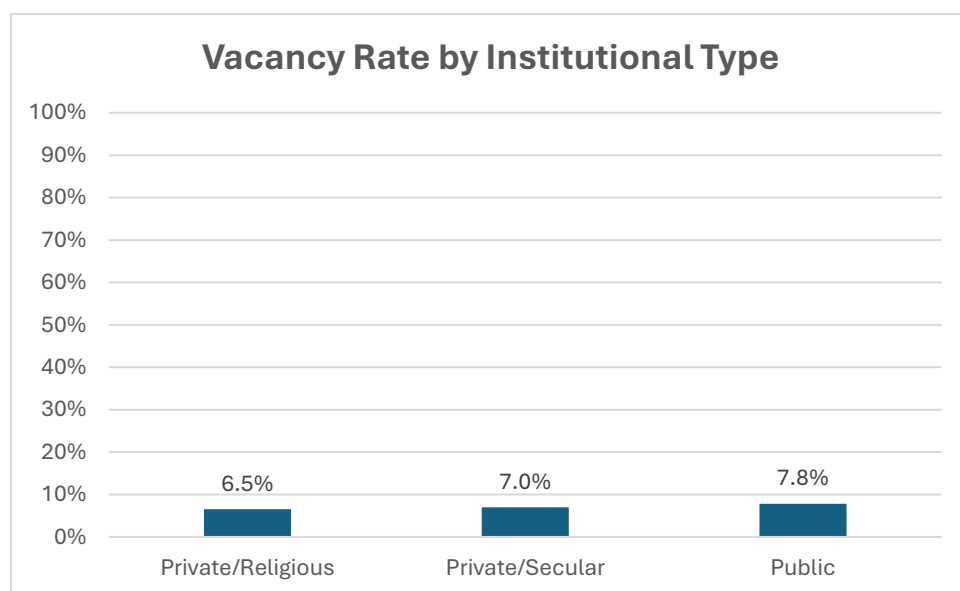
Among the 437 (47%) schools that reported not having vacant positions, 183 schools (42%) that indicated a need for additional faculty. The minimum reported was 1 and the maximum was 10 with a mean and median of two. The total number of additional faculty needed across respondents was 365.

### *Vacancies By Institutional Characteristics*

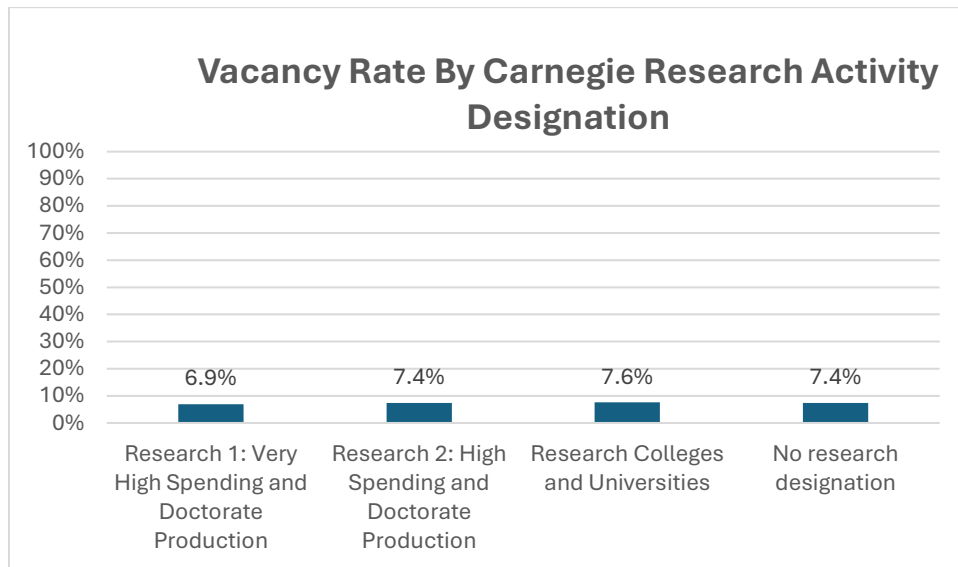
Vacancy rates were lowest in the Midwest and highest in the West, similar to the results over the past several years.



Vacancy rates did not vary much by institutional type. But like last year, public institutions have slightly higher rates than other types.

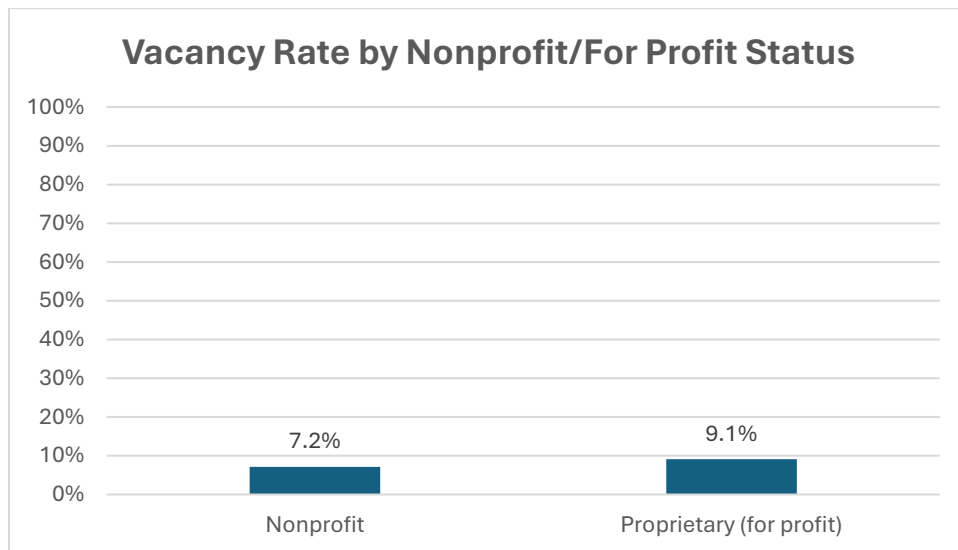


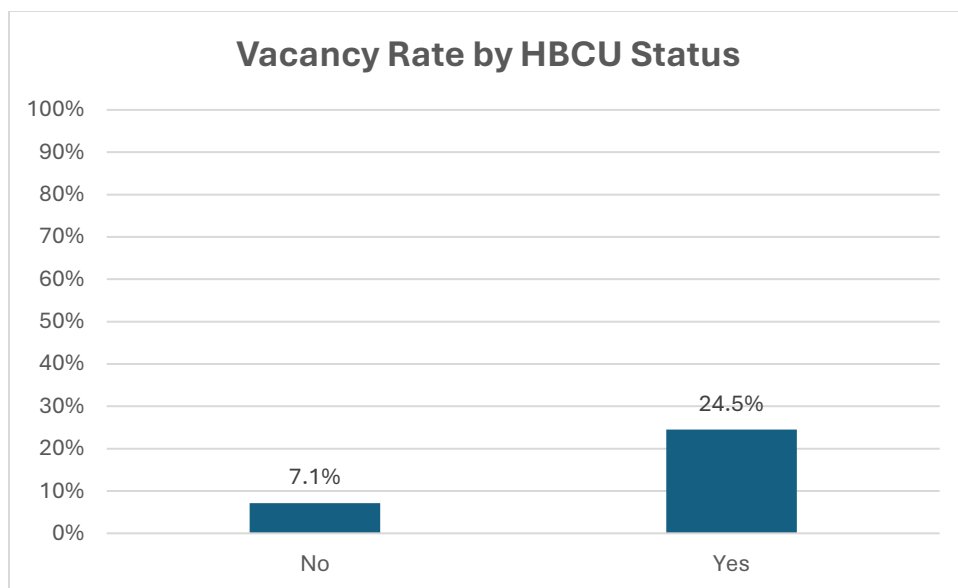
There was very little difference in vacancy rates by research designation.



There was virtually no difference in vacancy rates between academic health centers and other institutions or based on whether an institution was a College or University (not pictured).

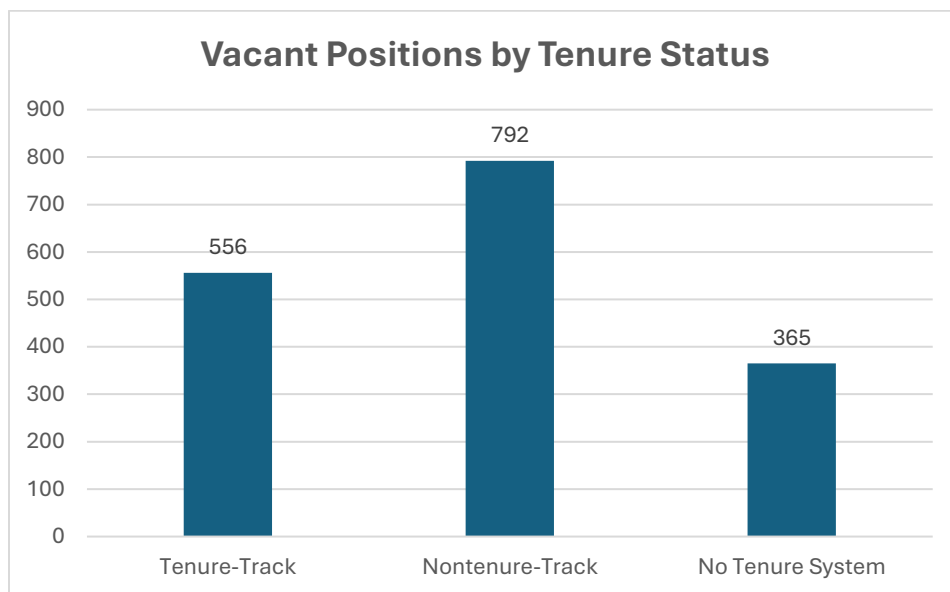
There were differences based on whether a school is nonprofit or proprietary (for-profit) as well as whether a school is an HCBU.



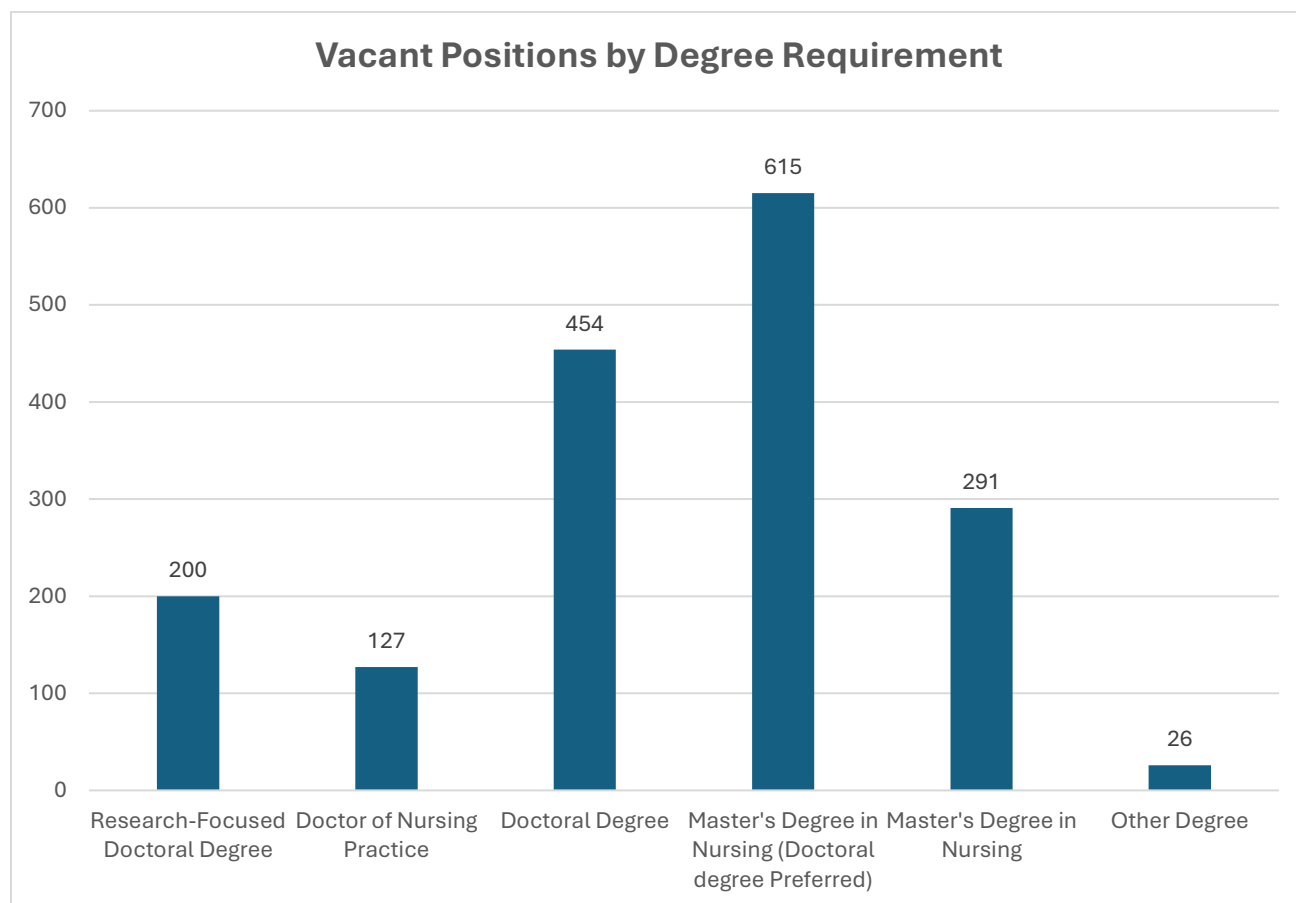


#### *Vacancies By Position Characteristics*

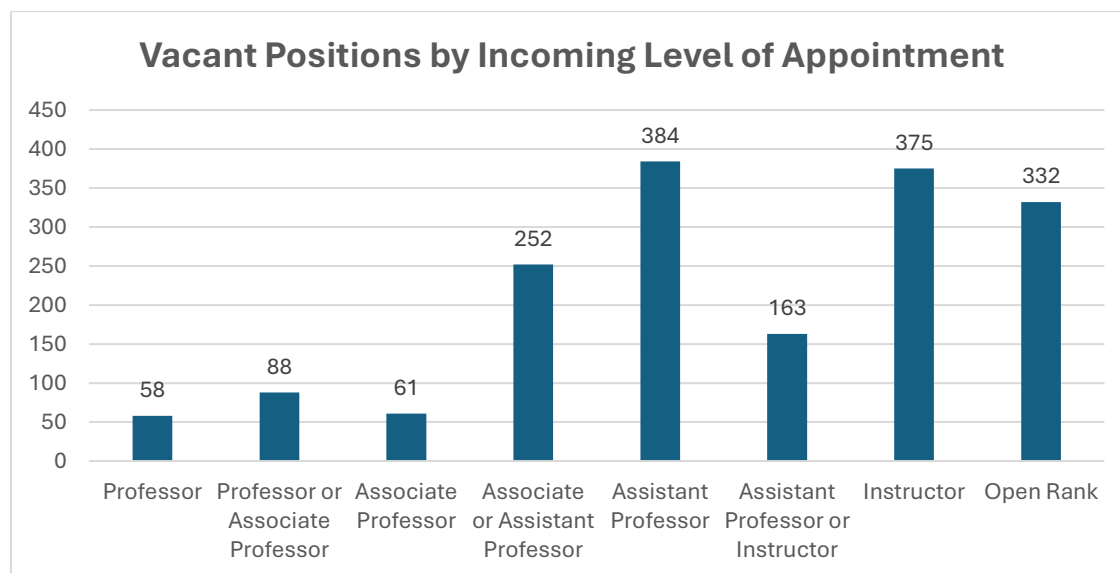
Almost half of the 1,713 vacant positions (46%) were nontenure track positions. Thirty-two percent were tenure track positions, and 21% were positions that were outside of a tenure system.



More than one third (36%) of the 1,713 vacant positions required a Master's degree, but a Doctoral degree was preferred while 27% required a Doctoral degree.



Of the 1,713 vacant positions the most common appointment levels were Assistant Professor (22%), Instructor (22%), and Open Rank (19%), respectively.

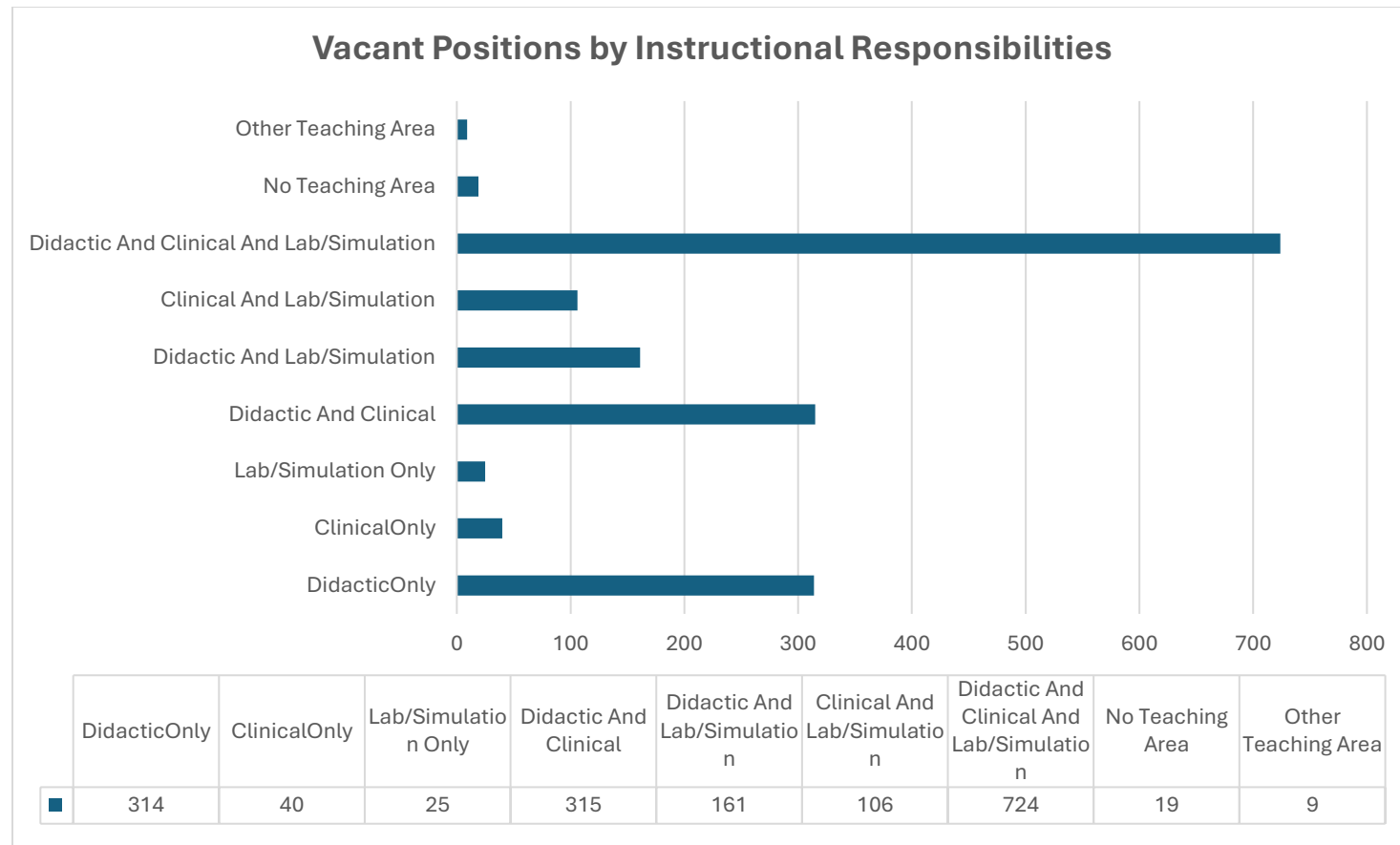


Almost half (44%) of the 1,713 vacant positions were to teach baccalaureate students only.

#### **Vacant Positions by Instructional Level**

|                                | Number of Vacancies | Percentage of Vacancies |
|--------------------------------|---------------------|-------------------------|
| Baccalaureate Only             | 759                 | 44%                     |
| Master's Only                  | 83                  | 5%                      |
| Doctoral (PhD) Only            | 32                  | 2%                      |
| Doctoral (DNP) only            | 74                  | 4%                      |
| Baccalaureate and Master's     | 188                 | 11%                     |
| Baccalaureate and PhD          | 7                   | <1%                     |
| Baccalaureate and DNP          | 30                  | 2%                      |
| Master's and PhD               | 9                   | 1%                      |
| Master's and DNP               | 103                 | 6%                      |
| DNP and PhD                    | 32                  | 2%                      |
| Baccalaureate/Masters/DNP      | 164                 | 10%                     |
| Baccalaureate/Master's/PhD     | 52                  | 3%                      |
| Baccalaureate/Master's/PhD/DNP | 144                 | 8%                      |
| No Teaching Responsibilities   | 11                  | 1%                      |
| Other Teaching Level           | 25                  | 1%                      |

Almost half (42%) of the 1,713 vacant positions included didactic and clinical and lab/simulation responsibilities, followed by didactic and lab/simulation and didactic only, both at 18%.



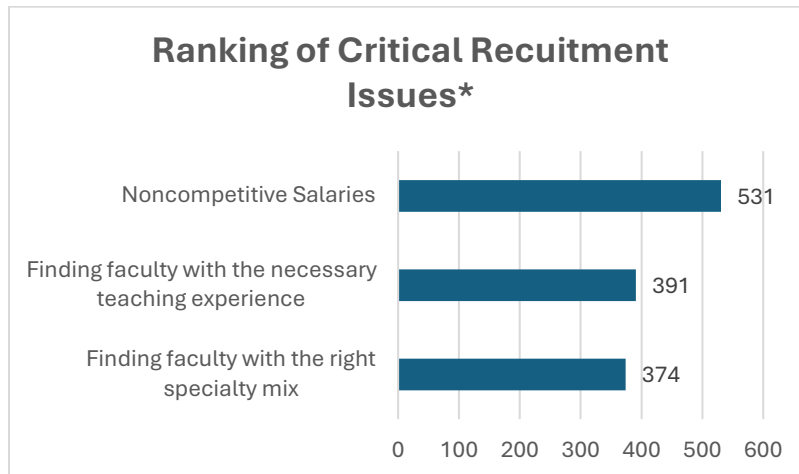
Two thirds (67%) of the 1,713 vacant positions were designated as general positions with no specialty required. Three hundred and thirteen (18%) of vacancies were designated as nurse practitioner specialties.

#### **Vacant Positions by Specialty Type**

|                                   | Number of Vacancies | Percentage of Vacancies |
|-----------------------------------|---------------------|-------------------------|
| General/No specialty              | 1148                | 67%                     |
| Anesthesia                        | 38                  | 2%                      |
| Midwifery                         | 11                  | 1%                      |
| Nurse Practitioner (NP)           | 50                  | 3%                      |
| Family NP                         | 102                 | 6%                      |
| Adult Gerontology Primary Care NP | 15                  | 1%                      |
| Adult Gerontology Acute Care NP   | 19                  | 1%                      |
| Pediatric Primary Care NP         | 22                  | 1%                      |
| Pediatric Acute Care NP           | 8                   | <1%                     |
| Psychiatric and Mental Health NP  | 72                  | 4%                      |
| Neonatal NP                       | 5                   | <1%                     |
| Women's Health NP                 | 20                  | 1%                      |
| Clinical Nurse Specialist (CNS)   | 4                   | <1%                     |
| Other                             | 199                 | 12%                     |

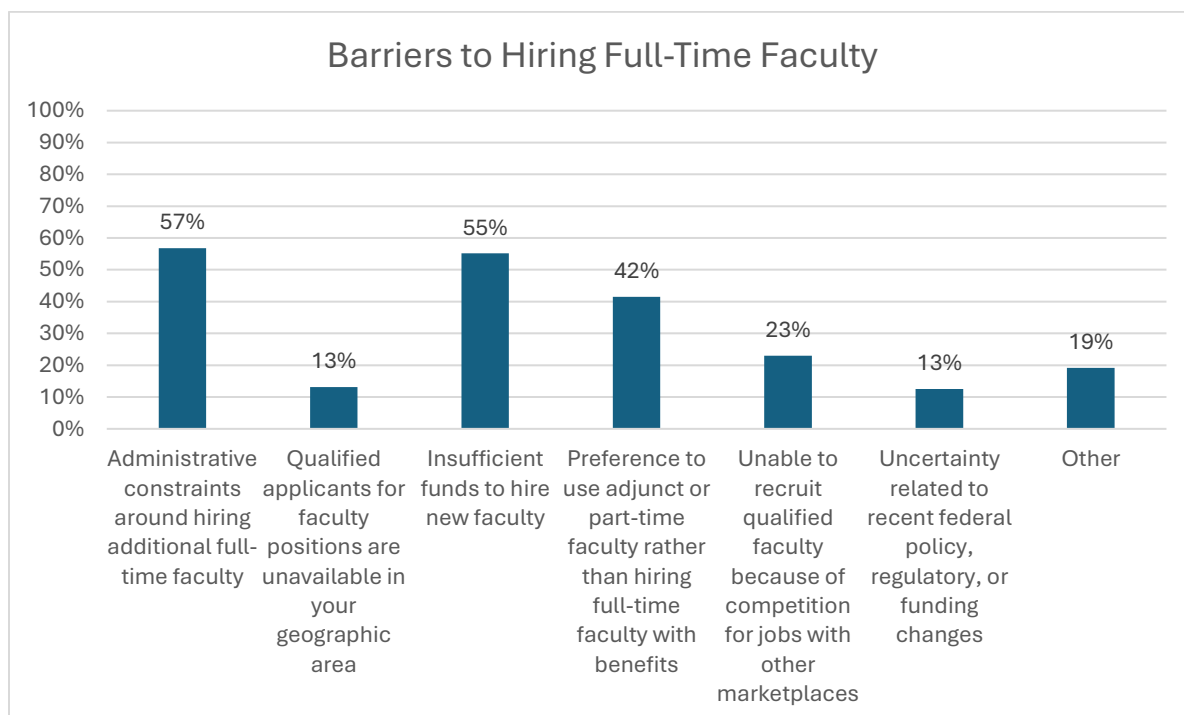
## Barriers to Hiring Full-Time Faculty

The most critical issues related to recruiting faculty to fill full-time vacancies continue to be noncompetitive salaries, finding faculty with the needed teaching experience, and finding faculty with the right specialty mix.



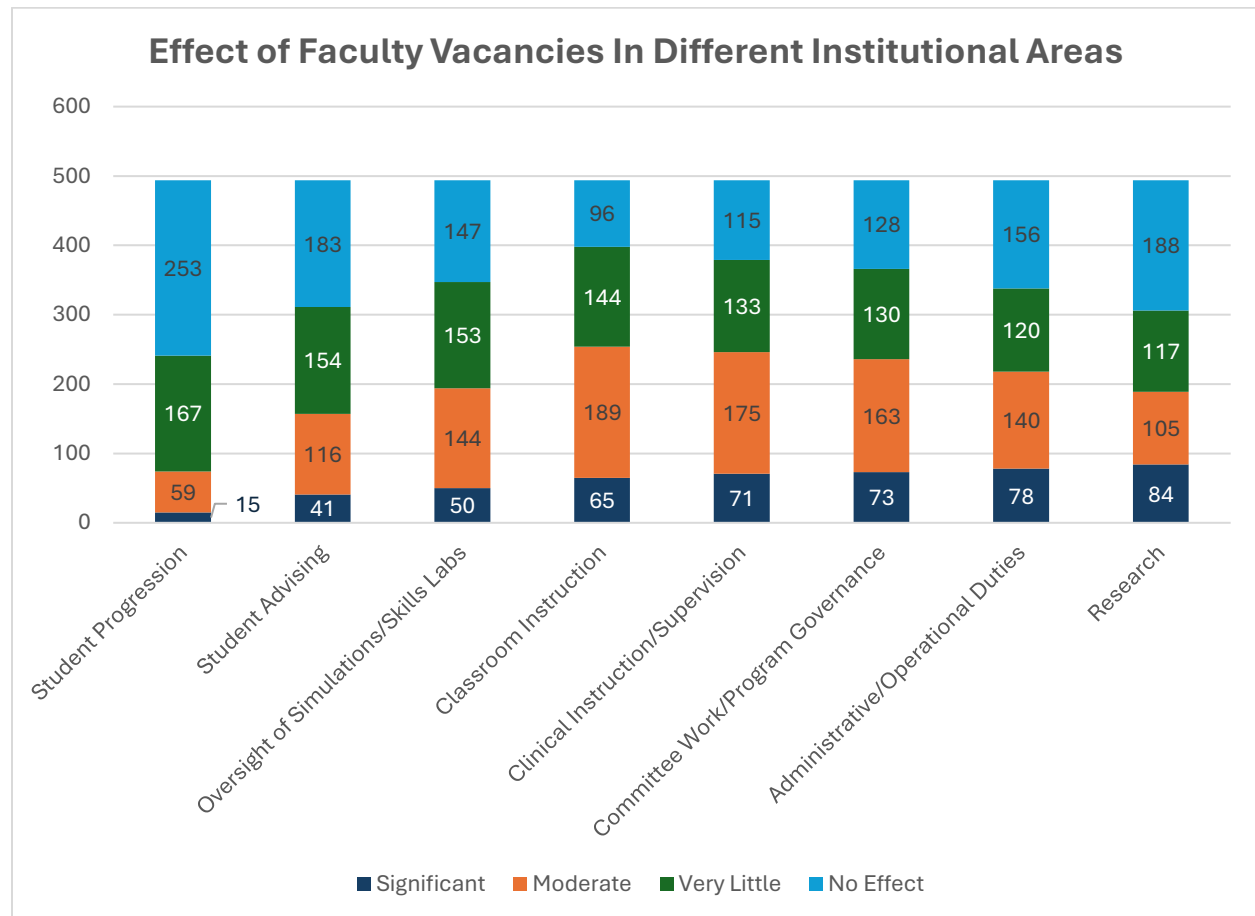
\* Respondents were asked to rank a series of 12 factors. Values were calculated by multiplying the number of responses by rank (1-12), so a rank of one would have a value of 12, of two would have a value of 11, etc. The values were added across respondents.

One hundred and eighty-three (183) respondents indicated that they did not have vacancies but had a need for additional full-time faculty. The most reported barriers to hiring additional faculty were administrative constraints (57%) and insufficient funds (55%).

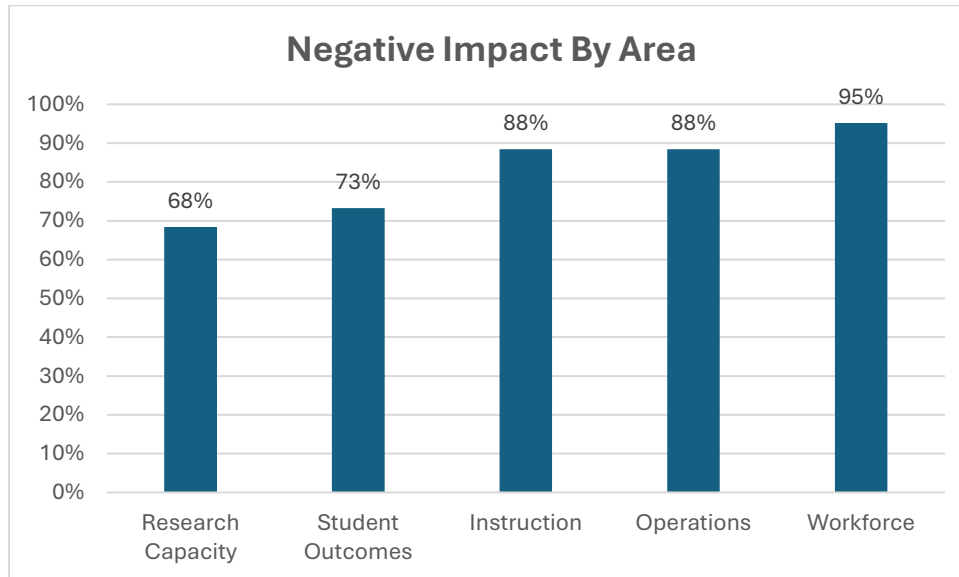


### Impacts of Vacancies

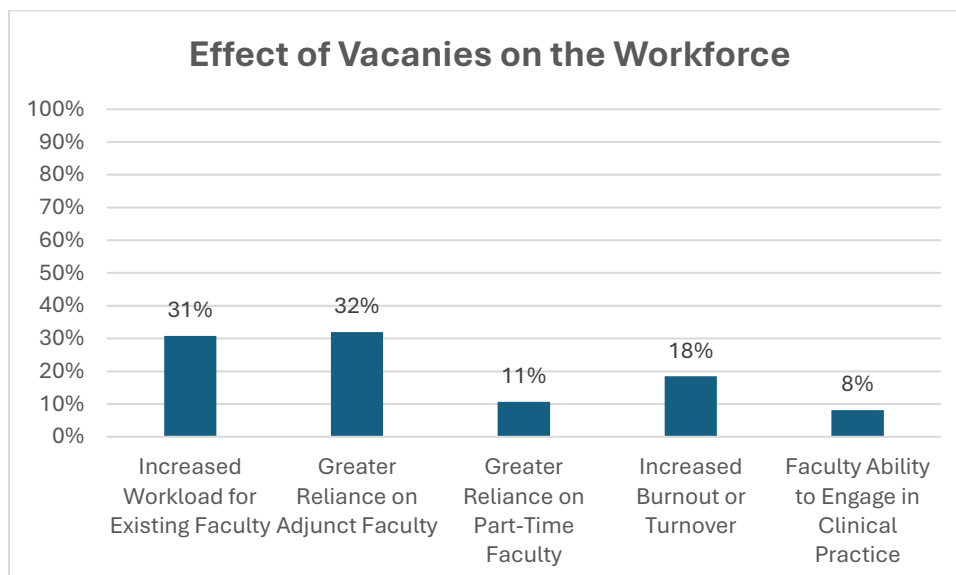
The most common institutional areas rated as significantly affected by vacancies were research, administrative/operational duties, committee work/program governance, and clinical instruction/supervision. When the ratings of significant and moderate effect were combined, the area's most highly rated were classroom instruction and clinical instruction/supervision.



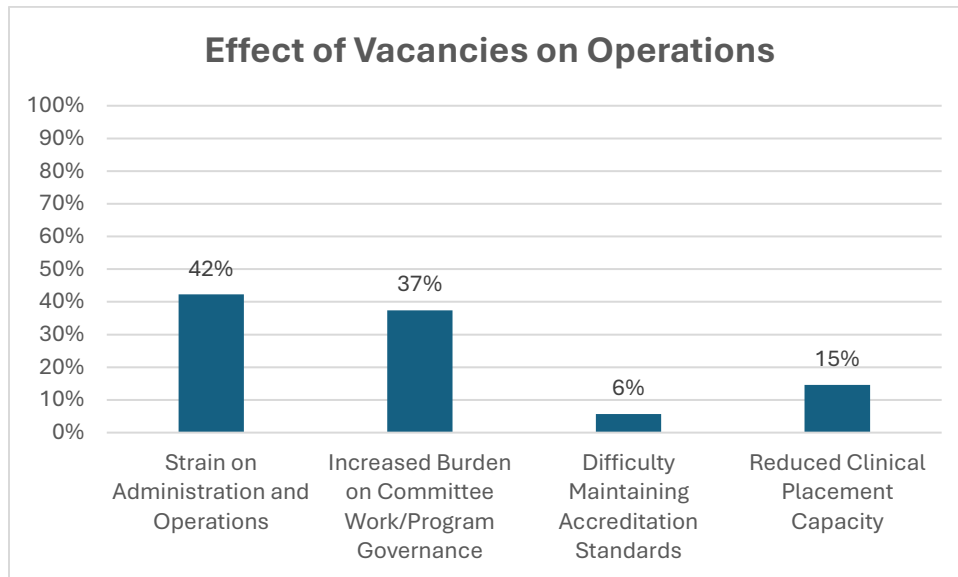
Respondents indicated that the vacancies affected most institutional areas, but almost all respondents (95%) indicated that there were workforce effects.



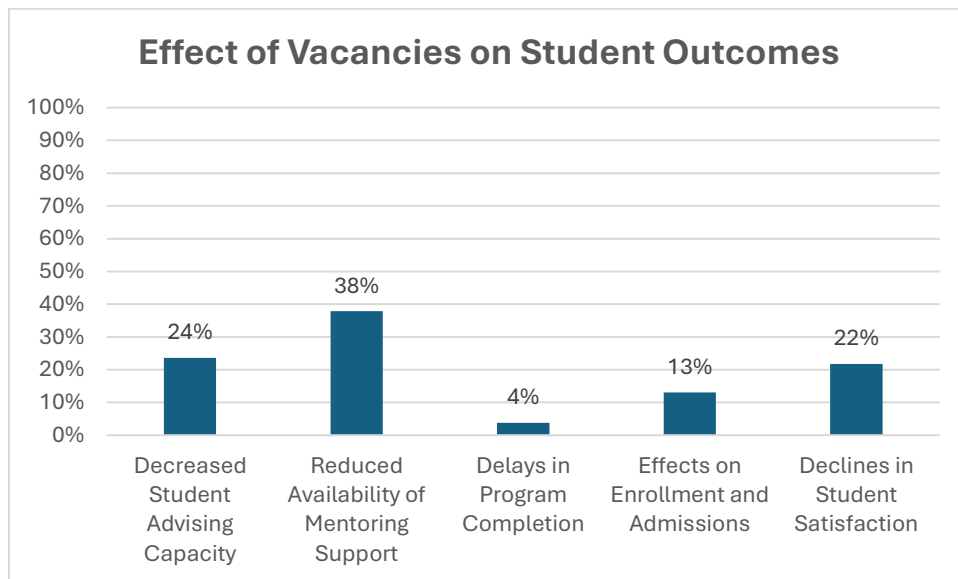
With regard to workforce effects, the most common response was greater reliance on adjunct faculty (32%) followed closely by increased workload for faculty (31%).



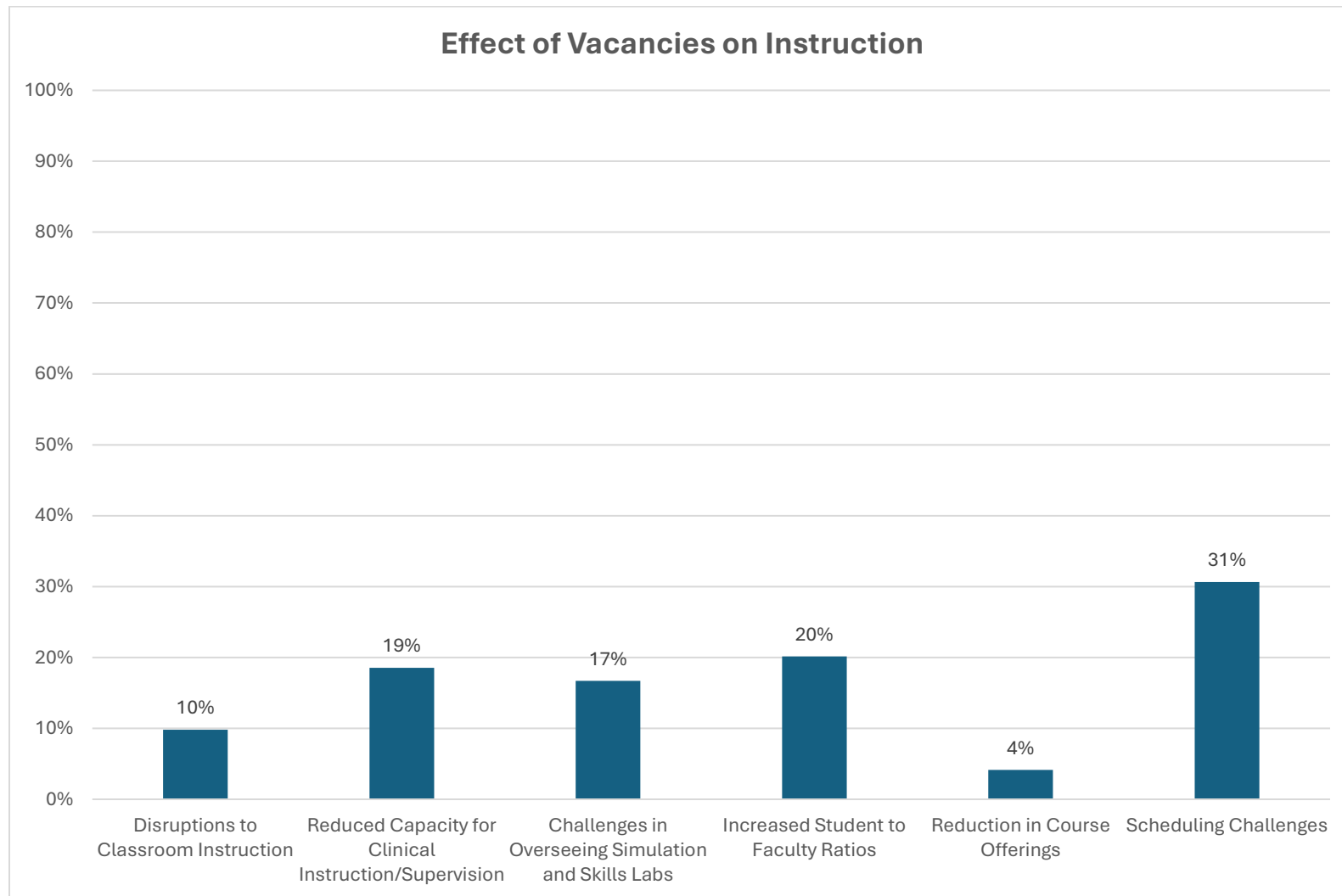
With regard to effects on operations, the most common response was greater strain on administration and operations (42%).



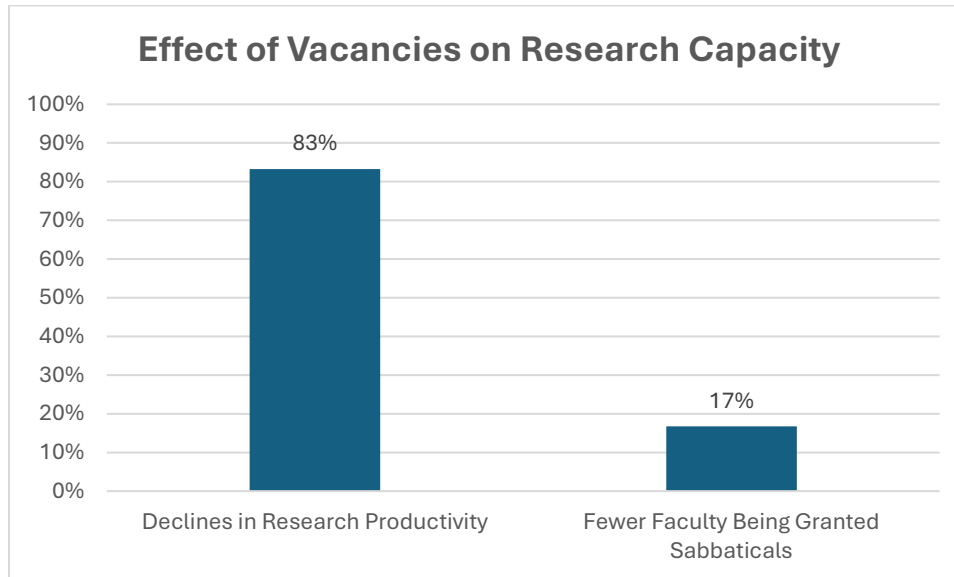
With regard to effects on student outcomes, the most common response was reduced availability of mentoring support (38%).



With regard to instructional effects the most common response was scheduling challenges (31%).



With regard to research capacity effects, the most common response was a decline in research productivity (83%).



## Conclusion

The findings from the 2026 faculty vacancy survey demonstrate that nursing schools continue to face challenges in recruiting and retaining qualified full-time faculty. Although the overall vacancy rate has remained relatively stable over the past 10 years, more than half of responding schools reported vacant positions, and many institutions continue to experience long-standing vacancies or unmet faculty needs even when no budgeted positions are open.

The survey highlights the ongoing influence of noncompetitive salaries, limited pools of qualified candidates, and institutional resource constraints on faculty recruitment efforts. These challenges affect not only workforce capacity but also instruction, operations, research productivity, and student support. As schools work to educate the future nursing workforce, continued attention to faculty recruitment, retention, and investment will be essential to maintaining program quality and expanding educational capacity.