



**Testimony Prepared for the U.S. House Appropriations Subcommittee on
Labor, Health and Human Services, Education, and Related Agencies**

U.S. Department of Health and Human Services

Health Resources and Services Administration & National Institutes of Health

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Board Chair, American Association of Colleges of Nursing

Thank you Chairman Cole, Ranking Member DeLauro, and members of the Subcommittee for the opportunity to provide testimony on behalf of the American Association of Colleges of Nursing (AACN). I am Dr. Ann Cary, Chair of the Board of Directors for AACN and Dean and Professor at the School of Nursing and Health Studies at the University of Missouri-Kansas City. On behalf of AACN's 814 member schools across the country— 21 of them distributed among the subcommittee members' districts— I would like to personally thank you for your leadership, which yielded a solid investment in the nursing workforce as well as the body of research that supports our practice in the Fiscal Year (FY) 2018 Consolidated Appropriations Act [P.L. 115-141]. I am honored to have been selected to provide you with the rationale for why this level of commitment delivers a profound impact on our nation's health and wellness, but also the vital economic and societal returns that will occur with a continued increased investment.

Representing over 500,000 nursing students and more than 45,000 nurse faculty, AACN respectfully requests that the subcommittee continue to invest in America's health in FY 2019 by providing **\$266 million for the Health Resources and Services Administration's Nursing**

Workforce Development programs (Title VIII of the Public Health Service Act [42 U.S.C. 296 et seq.]) and **\$170 million for the National Institute of Nursing Research (NINR).**¹

Ensuring Health with Precision and Passion Requires Nurses and Science

America's healthcare system is growing increasingly complex as new technology continues to emerge, cost-containment measures are put into place, and we simultaneously protect access to quality and affordable care. All of this must be navigated as scientific discoveries identify the benefits of personalized care and new models to address population trends as well as public health priorities. One such trend is our aging population, which is reshaping how the healthcare system meets long-term and primary care needs. According to the U.S. Census Bureau, all baby boomers will be over the age of 65 by 2030, meaning that one in every five residents will have reached retirement age.² This is of particular concern due to the rising rates of chronic illness, including heart disease, stroke, cancer, diabetes, and arthritis. Approximately half of all adults across the nation (117 million) have one or more chronic health conditions, and one in four adults have two or more.³

The nation must also be prepared for current and emerging public health crises like the opioid epidemic. The abuse and misuse of opioids that is now sweeping the nation results in approximately 115 opioid overdose deaths every day.⁴ Addressing these issues will require a strong investment in healthcare providers and science. As the largest segment of the healthcare workforce, which includes over four million registered nurses (RNs),⁵ the profession is on the frontlines of meeting the care needs facing individuals, families, and communities. In 2015, the nursing workforce lost 1.7 million years of experience due to nurse retirements and this trend is

expected to continue.⁶ By 2022, it is projected that 70,000 baby boomer registered nurses will retire annually.⁶ This is of concern for AACN's membership as it relates to the ability of the profession to educate a new generation of RNs. According to AACN, U.S. nursing schools turned away 68,922 qualified applicants from baccalaureate and graduate nursing programs in 2017.⁷ The majority of nursing schools responding to the survey cited faculty shortages as a top reason for not accepting all qualified applicants.⁷ In 2017, there were 1,565 faculty vacancies in schools of nursing. These vacancies are due to aging faculty, a spike in retirements within the next 10 years, competition with clinical and private-sector settings, and a diminishing pool of potential nurse educators.⁸ All of this impacts the profession's ability to grow our science in a time of precision health and, in turn, ensure that the future workforce is prepared for the healthcare system of today and tomorrow. This is why AACN members rely so heavily on the tremendous support of both the Title VIII programs and the NINR grants.

The Title VIII Nursing Workforce Development Programs

For the nursing profession, the Title VIII programs have been, and will continue to be, a short- and long-term success story. They are structured to address education, recruitment, retention, and faculty preparation, as well as be nimble when needed to focus on the most pressing concerns of the day. The programs' goals focus on the workforce, one that is diverse, by ensuring nurses are in the most rural and underserved communities where care is in high demand. This is powerful as health professions aim to prepare a workforce that closely matches the population. Currently, one third of all baccalaureate and graduate nursing students are from ethnically or culturally diverse backgrounds.⁹ A key to eliminating health disparities is increasing the number of underrepresented health professionals. Significant ethnic and racial disparities in health care are

the result of cultural differences, little to no access to health care, and high rates of poverty and unemployment. Research shows that health professionals from underrepresented populations are more likely to serve in underrepresented and medically underserved areas.¹⁰ The Title VIII Nursing Workforce Diversity program is critical in this effort. In Academic Year 2015-2016 alone, the program supported 7,337 students and aspiring students while partnering with nearly 600 training sites.¹¹

As mentioned, none of this can occur without faculty. The Title VIII Nurse Faculty Loan Program (NFLP) provides funding to accredited schools of nursing to prepare qualified nurse educators to fill faculty vacancies, allowing schools to increase the number of students entering into the profession. In Academic Year 2015-2016, NFLP supported 2,330 students in 91 schools, 78% of whom were pursuing a doctoral-level nursing degree. Financially supporting graduates with advanced degrees incentivizes them to work in full-time faculty positions, minimizing shortage rates and bolstering the nursing workforce. Overall, the Title VIII programs have a profound impact on the community. While they are critical to offsetting the high cost of education for the individual, many of the grants spur partnerships in the community, benefiting both the economic and societal return on investment.

The National Institute of Nursing Research

As one of the 27 Institutes and Centers at the National Institutes of Health, NINR supports and conducts research, which establishes the scientific foundation for clinical practice to improve healthcare delivery across the entire lifespan. Nurse scientists—often working collaboratively with other health professionals—are generating and translating new findings focused on cutting-

edge innovations in biomedical research, such as big data, data science, precision health, and genomics.¹² As NINR looks to the future of nursing science, investment in multi-disciplinary and innovative approaches will sustain the longevity and success of nursing practice and the impact it will make on health and wellness. An example of an NINR-funded nurse scientist doing unparalleled research to advance health care is Dr. Jacquelyn Taylor. While at Yale University, she received NINR funding on a five-year study that evaluates the effects of genomic and psychological-environmental factors on blood pressure in African American communities. Dr. Taylor's goal is to develop nursing interventions to prevent and reduce gene-environment risks associated with hypertension.¹³

Supporting the Title VIII Nursing Workforce Development Programs and grants from the National Institute of Nursing Research is essential to sustaining a strong nursing workforce able to implement new science and be equipped to address the economic, societal, and healthcare changes that are upon us now and which we will face continuously in the future. Thank you for your continued support of America's health and wellness through nursing care.

¹ The Ad Hoc Group for Medical Research, of which AACN is a member, requests \$39.3 billion in funding for NIH. The request level of \$170 million for NINR denotes the same percentage increase for NIH applied to NINR. The request of \$266 million for Title VIII and \$170 million for NINR is supported by 56 organizations within the [Nursing Community Coalition](#).

² U.S. Census Bureau. (2018). *2017 National Population Projections*. Retrieved from: <https://www.census.gov/programs-surveys/popproj.html>.

³ Centers for Disease Control and Prevention. (2016). *Chronic Diseases: The Leading Causes of Death and Disability in the United States*. Retrieved from: <https://www.cdc.gov/chronicdisease/overview/>.

⁴ National Institute on Drug Abuse. (2018). *Opioid Overdose Crisis*. Retrieved from <https://www.drugabuse.gov/drugs-abuse/opioids/opioid-overdose-crisis>.

⁵ National Council of State Boards of Nursing. *A Profile of Nursing Licensure in the U.S.* Retrieved from: <https://www.ncsbn.org/6161.htm>.

⁶ Buerhaus, Peter I. Skinner, Lucy E. Auerbach, David I. Staiger, Douglas O. et al. 2017. Four Challenges Facing the Nursing Workforce in the United States. *Journal of Nursing Regulation*, Volume 8, Issue 2, 40 – 46.

⁷ American Association of Colleges of Nursing. (2017). *2016-2017 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing*. Washington, D.C.

⁸ American Association of Colleges of Nursing. *Nursing Faculty Shortage as of April 26, 2017*. Retrieved from: <http://www.aacnnursing.org/News-Information/Fact-Sheets/NursingFaculty-Shortage>.

⁹ American Association of Colleges of Nursing. (2018). *2017-2018 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing*. Washington, D.C.

¹⁰ The Sullivan Commission. (2004). *Missing persons: Minorities in the health professions. A report of the Sullivan Committee on diversity in the healthcare workforce*. Retrieved from: <http://www.aacnnursing.org/Portals/42/Diversity/SullivanReport.pdf>.

¹¹ Health Resources and Services Administration. (2018) *Justification of estimates for appropriations committees*. Retrieved from: <https://www.hrsa.gov/sites/default/files/hrsa/about/budget/budget-justification-2018.pdf>.

¹² Department of Health and Human Services National Institutes of Health, National Institute of Nursing Research (NINR). FY 2018 Budget. <https://www.ninr.nih.gov/sites/default/files/NINR-CJ-508c.pdf>.

¹³ National Institute of Nursing Research. (2017, January 24). *Nurse Scientist Receives Presidential Early Career Award*. Retrieved from: <https://www.ninr.nih.gov/newsandinformation/newsandnotes/taylor-pecase>.