“Nurses today are essential members of our Nation’s health team. The health needs of a growing population cannot be met without their help. Blessed with the gifts of healing and with a wise and understanding heart, nurses perform a vital role in maintaining and strengthening America’s health services and our national well-being. Yet we are critically short of the nurses that we need.”

– President Lyndon B. Johnson

upon signing the Nurse Training Act of 1964
Nursing Workforce Development Programs: Demonstrating 50 Years of Success

This year marks the 50th anniversary of the Nursing Workforce Development programs (Title VIII of the Public Health Service Act [42 U.S.C. 296 et seq.]). Administered by the U.S. Department of Health and Human Services, Health Resources and Services Administration (HRSA), these programs address all aspects of nursing workforce demand, including education, practice, recruitment, and retention. The Title VIII programs bolster nursing education at all levels, from entry-level preparation through graduate study, and also provide support for institutions. Between Fiscal Years (FY) 2006 and 2012 alone, the Title VIII programs supported over 450,000 nurses and nursing students as well as numerous academic nursing institutions and healthcare facilities. Federal investments dedicated to supporting a highly-educated nursing workforce help ensure that patients across the country receive the high-quality, cost-effective nursing services that improve the quality and longevity of their lives.

Why Nurses Make A Difference

On September 4, 1964, President Lyndon B. Johnson signed the Nurse Training Act (P.L. 88-851) into law. This historic legislation recognized nursing education programs under Title VIII of the Public Health Service Act and marked a significant investment in the future of the nursing pipeline. Upon signing, President Johnson declared, “Nurses today are essential members of our Nation’s health team. The health needs of a growing population cannot be met without their help. Blessed with the gifts of healing and with a wise and understanding heart, nurses perform a vital role in maintaining and strengthening America’s health services and our national well-being. Yet we are critically short of the nurses that we need.”

Today, President Johnson’s words could not be more relevant. As integral members of the healthcare team, nurses serve in a wide variety of delivery settings and collaborate with other professionals to improve the quality of America’s healthcare system. Registered Nurses (RNs) comprise the largest group of health professionals with approximately 3.1 million licensed providers. They offer essential care to patients in a variety of settings, including hospitals, long-term care facilities, community or public health areas, schools, workplaces, and home care. RNs also receive graduate degrees that allow them to practice as Advanced Practice Registered Nurses (APRNs), including nurse practitioners (NPs), certified nurse-midwives (CNMs), certified registered nurse anesthetists (CRNAs), and clinical nurse specialists (CNSs), nurse faculty, nurse researchers, nurse administrators, and public health nurses. The services they provide are linked directly to the availability, cost, and quality of healthcare services.

However, meeting the growing demand for nurses and the care they provide remains a challenge. National efforts to expand healthcare coverage, combined with impending retirements in the nursing workforce, as well as barriers inhibiting nursing schools from maximizing enrollment capacity, place significant strain on the nursing profession’s ability to meet the growing gap in the workforce pipeline.

Investments in nursing education, and specifically in the Nursing Workforce Development programs, are critical to strengthening the number of highly-educated nurses to care for America’s patients.


Historical Funding for Title VIII Nursing Workforce Development Programs

1963—The Surgeon General’s report “Toward Quality in Nursing, Needs and Goals” (Congressional Research Service [CRS], 2005) validated the need for additional nurses and recommended that the supply be increased to 850,000 practicing RNs by the year 1970 (CRS). Additional recommendations included increasing the number of nursing school graduates by 75% to meet the goal for nurses by 1970, increasing the number nurses with graduate degrees by 194%, and increasing the number of baccalaureates by 100%.

1964—On September 4, 1964, President Lyndon B. Johnson signed into law the Nurse Training Act (P.L. 88-851), which established Title VIII of the Public Health Service Act. When the legislation was approved it authorized a maximum of $238 million for five programs over five years with an additional $4.6 million for the administration of the programs. They received an appropriation level of $9.921 million. The law was comprised of five basic programs: 1) student loans, 2) professional nurse traineeship, 3) construction grants, 4) project grants, and 5) formula grants to diploma schools (Kalisch & Kalisch, 1982).

The Growing Demand for Nurses

According to the Bureau of Labor Statistics’ (BLS) Occupational Outlook Handbook, it is expected that the number of practicing RNs will grow by 19% between the years 2012 and 2022, stating, “Nurses also will be needed to educate and to care for patients with various chronic conditions, such as arthritis, dementia, diabetes, and obesity. In addition, the number of individuals who have access to healthcare services will increase, as a result of federal health insurance reform. More nurses will be needed to care for these patients.”1 BLS also projects that employment of CRNAs, CNMs, and NPs is expected to grow 31% from 2012 to 2022. “Growth will occur primarily because of the effects of healthcare legislation, an increased emphasis on preventative care, and demand from the large, aging baby-boom population for healthcare services as they live longer and more active lives than previous generations.”2

Yet, the profession faces significant challenges to ensure that an adequate number of qualified RNs will be able to meet these needs. These include an expanded pool of insured patients, an aging nursing workforce, and barriers to enrollment capacity in nursing schools.

It is anticipated that an additional 32 million individuals not previously insured will receive healthcare insurance through health insurance reforms.3 These individuals will seek healthcare services in a multitude of settings, and the care they require necessitates a highly-educated and skilled nursing workforce to deliver both acute and prevention-based care. This influx of newly-insured patients and the demand for a greater number of nurses collides with waves of anticipated nursing retirements over the next decade. Over the next 10 to 15 years, the nearly one million RNs older than age 50—about one-third of the current workforce—will reach retirement age. The retirement decisions of these experienced RNs may be influenced by the pace of economic recovery, and have the potential to create a serious deficit in the nursing pipeline.4

Furthermore, our nation’s nursing schools require strong support to overcome barriers that prevent them from maximizing student enrollment. According to the American Association of Colleges of Nursing’s (AACN) 2013-2014 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing survey, 78,089 qualified applications were turned away from nursing schools in 2013 alone. The primary barriers to accepting all qualified students at nursing colleges and universities continue to be a shortage of faculty, clinical placement sites, and funding.5

Title VIII programs address these factors and others to support the development and sustainability of America’s nursing workforce. They are a viable answer to the call for the recruitment, retention, and advancement of RNs and APRNs.

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1971—President Nixon signs the Nurse Training Act of 1971 (PL. 92-158) into law. For the first time, basic support grants for all types of nursing education programs were authorized through his legislation. These support grants, otherwise known as capitation grants, were the major component of the NTA of 1971. They were “…based on the well-established need to maintain the quality of education in schools of nursing by establishing a firm core of financial support” (Kalisch & Kalisch, 1977, p. 1135).

1975—The Nurse Training Act of 1975 created the Advanced Nurse Training Program that would provide funding for the expansion of master’s and doctoral nursing education.

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What is the Federal Investment in Nursing?

Need for Federal Support
AACN’s 2013-2014 Title VIII Student Recipient Survey showed that federal support for nursing education is critically important. Of the students responding 72.8% of undergraduate students, 58.8% of master’s students, and 54.6% of doctoral students rely on federal loans to pay for their education.¹

Historical Support
Congress has used the Title VIII authorities as a mechanism to address past nursing shortages. When the need for nurses was great, higher funding levels were appropriated. For example, during the nursing shortage in the 1970’s, Congress provided $160.61 million to the Title VIII programs in 1973. Adjusting for inflation to address the 39-year difference, $223,841 million (FY 2014 funding level) in 1973 dollars would be over one billion in current dollars.

Federal Funding for Title VIII programs by state: Fiscal Year 2013

<table>
<thead>
<tr>
<th>State</th>
<th>Total by Program</th>
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<th>Total by Program</th>
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Historical Funding for Title VIII Nursing Workforce Development Programs (continued)

2002—The Nurse Reinvestment Act of 2002 (P.L. 107-205) was passed by Congress and signed into law by President George W. Bush. The law created three new authorities under Title VIII: the Nurse Faculty Loan Program, Comprehensive Geriatric Education Grants, and Public Service Announcements. Additionally, the law extended and revised the Basic Nurse Education and Practice Grants, the Loan Repayment Program, and the Nurse Education, Practice and Retention grants.

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How do Title VIII Recipients Make an Impact?

Results from AACN’s 2013-2014 Title VIII Student Recipient Survey included responses from 850 students who noted that these programs played a critical role in funding their nursing education. The survey showed that for 66.8% of respondents, Title VIII funding impacted their decision to enter nursing school. Moreover, 75.9% of the students receiving Title VIII funding are able to attend school full-time through this federal support. By supporting full-time education, the Title VIII programs are helping to ensure that students enter the workforce without delay.

Home State Advantage
According to the respondents, 62.3% of the respondents reported that after graduation, they plan to work in the state where they were educated. By supporting Title VIII, new nurses stay in the communities where they attended school— a direct state investment.1

Demand for Primary and Specialty Care Providers
Title VIII addresses the current demand for primary care providers. According to AACN data, 88.7% of nurse practitioner students are in master’s programs that prepare them to be primary care providers. Additionally, certified registered nurse anesthetists are often the sole anesthesia providers in nearly all rural hospitals, affording patients access to trauma stabilization, pain care, and surgical services. The Title VIII programs help prepare the advanced practice nursing workforce to meet the needs of our nation.

Demand for Faculty to Educate the Next Generation of Nurses
Faculty vacancy has been repeatedly identified as a primary factor hindering maximum student capacity in our nation’s nursing schools. According to AACN’s Special Survey on Vacant Faculty Positions for Academic Year 2013-2014, nearly two-thirds of responding schools report that they are currently experiencing a shortage of full-time faculty members. Among these schools, the vacancy rate is 8.3%, or a total of 1,358 full-time faculty positions left unfilled.2 Title VIII provides a direct solution to this crisis. In FY 2012, the Nurse Faculty Loan Program supported 2,259 faculty members.

Demand for Care in Rural and Underserved Areas
In FY 2012, the Loan Repayment Program committed to supporting 1,194 nurses working in these facilities. In addition, the Advanced Education in Nursing Traineeship and Nurse Anesthetist Traineeship programs supported 5,545 nursing students during the 2012-2013 academic cycle. Of those who graduated during this academic year, 35% went on to practice in medically underserved areas.

Increasing Access to Care
Nurse-Managed Health Clinics, like the Lewis and Clark Family Health Clinic, are supported through the Nursing Education, Practice, Quality, and Retention Program. The clinic offers both acute and chronic care for all members of the community. The clinic is staffed by board certified nurse practitioners and collaborates with several health-service agencies and school districts to help expand healthcare services and education in rural communities. The Lewis and Clark Family Health Clinic offers family practice basic services within the nursing philosophy, emphasizing health promotion and preventative care.

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2010—On March 23, 2010, President Obama signed into law the Patient Protection and Affordable Care Act (P.L. 111-148). This healthcare reform legislation expanded certain provisions of the Title VIII programs, including increasing aggregate loan levels for the Nursing Student Loan Program from $13,000 to $17,000, and expanding the educational loan repayment amount from $30,000 to $35,500 for the Nurse Faculty Loan Program.

From: Health Resources and Services Administration, Division of Nursing, 2011.
**Title VIII: Supporting Generations of Nurses**

**Recipient of the Nurse Training Act’s Professional Nurse Traineeship**

**Geraldine (Polly) Bednash, PhD, RN, FAAN**  
Chief Executive Officer  
American Association of Colleges of Nursing

“The funding I received early in my career that supported my master’s nursing degree was instrumental in paving the way for a career rich in opportunities to make an impact for the profession. I have dedicated my life’s work at AACN to ensuring the funds I received continue to support future generations of nurses.” Since receiving the Title VIII funds, Dr. Bednash’s robust career has included experience in a multitude of areas. Prior to AACN, she served in the Army Nurse Corps in Vietnam, worked as a nurse practitioner and consultant, served as nurse faculty at George Mason University, and was a Robert Wood Johnson Nurse Faculty Fellow in Primary Care at the University of Maryland. In addition to her current leadership at AACN, Dr. Bednash serves as the chair of the Nursing Alliance for Quality Care, as a member of the Sullivan Alliance to Transform the Health Professions and is a member of the Quality Alliance Steering Committee. Additionally, she has been appointed to the Secretary’s Academic Affiliations Council of the Veteran’s Administration.

**Recipient of the Nurse Faculty Loan Program**

**Timothy Joseph Sowicz**  
PhD Student  
University of Pennsylvania

“The financial support that I receive from the Nurse Faculty Loan Program has allowed me to devote myself full-time to my doctoral education, which is rigorous and requires time both in and out of the classroom. Although direct patient care as a nurse practitioner provides opportunities to identify research questions, the NFLP allows me to devote myself full time to learning how to answer those questions. In doing so, I hope to uncover ways that primary care providers can enhance preventive health services and eliminate health disparities.”

**Recipient of the Nursing Workforce Diversity Program**

**Barbara Wright**  
BSN Student  
Tuskegee University

“The federal financial aid I received through Title VIII is helping me achieve my educational and career goals. I plan on becoming a nurse anesthetist, but getting through college is the first step on the long journey of attaining my dream job. Unfortunately, nothing in life is free and my financial situation causes me great despair when I think of the things I hope to accomplish. My persistence will not allow me to give up until I achieve my dreams. I will continue to look for ways to improve my educational experience and highlight my talents. Receiving this scholarship will make a meaningful, positive difference in my life because it will bring me one step closer to fulfilling my goals. Ultimately, I know I will leave an everlasting impact on my community and my peers, but financial assistance is essential to reaching this type of success. I am glad that I have the opportunity to receive this federal financial aid.”
An Overview of the Title VIII Programs

Advanced Nursing Education (AEN) Grants (Sec. 811) support projects that enhance advanced nursing education and practice in master’s and doctoral programs. The AEN grants help to prepare our nation’s nurse practitioners, clinical nurse specialists, nurse midwives, nurse anesthetists, nurse educators, nurse administrators, public health nurses, and other nurse specialists requiring advanced education. In FY 2012, these grants supported the education of 15,986 students.

AEN Traineeships assist graduate nursing students by providing full or partial reimbursement for the costs of tuition, books, program fees and reasonable living expenses. Funding for the AEN Traineeships supports the education of future nurse practitioners, clinical nurse specialists, nurse midwives, nurse anesthetists, nurse educators, nurse administrators, public health nurses, and other nurse specialists requiring advanced education.

Nurse Anesthetist Traineeships (NAT) support the education of students in nurse anesthetist programs. In some states, certified registered nurse anesthetists are the sole anesthesia providers in almost 100% of rural hospitals. Much like the AEN Traineeships, the NAT provides full or partial support for the costs of tuition, books, program fees, and reasonable living expenses. In FY 2012, the AEN Traineeship and the NAT supported 5,545 nursing students.

Workforce Diversity Grants (Sec. 821) prepare disadvantaged students to become nurses. This program awards grants and contract opportunities to schools of nursing, nurse-managed health centers, academic health centers, state or local governments, and nonprofit entities looking to increase access to nursing education for disadvantaged students, including racial and ethnic minorities under-represented among RNs. In FY 2012, the program supported 12,077 students. The money may be used for educational progression support such as stipends for diploma or associate degree nurses to enter bridge or degree completion programs, scholarship or stipends for accelerated degree programs, pre-entry preparation, advanced education preparation, and retention activities.

Nurse Education, Practice, Quality, and Retention Grants (Sec. 831) help schools of nursing, academic health centers, nurse-managed health centers, state and local governments, and healthcare facilities strengthen programs that provide nursing education. In FY 2012, this program supported 6,269 undergraduate nursing students.

Nursing Student Loan (NSL) Program (Sec. 835), established in 1964, also addresses nursing workforce shortages. The revolving fund provides each accepted nursing student, undergraduate or graduate, a maximum of $17,000 at 5% interest with a preference for those in financial need. The repayment period is 10 years. The NSL program may provide $3,300 in non-taxable loans to nursing students during each of their first two years of study and $5,200 for their last two years. Funds are loaned out to new students as existing loans are repaid. This program has not received additional appropriations since 1983.

NURSE Corps Loan Repayment and Scholarship Programs (Sec. 846) support current students and new graduates and in FY 2012 supported 1,541 nursing students. The Loan Repayment program repays up to 85 percent of nursing student loans in return for at least three years of practice in a designated healthcare facility or teach in an accredited school of nursing. The Scholarship program offers individuals who are enrolled or accepted for enrollment as full-time nursing students the opportunity to apply for scholarship funds. Upon graduation, recipients are required to work in a healthcare facility with a critical shortage of nurses or teach in an accredited school of nursing for at least two years.

Nurse Faculty Loan Program Grants (Sec. 846A) increase the number of qualified nurse faculty by creating a student loan fund within individual schools of nursing and supporting individual students. Students must agree to teach at a school of nursing in exchange for cancellation of up to 85 percent of their educational loans, plus interest, over a four-year period. In FY 2012, these grants supported the education of 2,259 future nurse educators.

Comprehensive Geriatric Education Grants (Sec. 855) are awarded to individuals in geriatrics to better provide healthcare services for the elderly. These grants may be used to educate RNs who will provide direct care to older Americans, develop and disseminate geriatric curriculum, prepare faculty members, and provide continuing education. They may also be used for traineeships for individuals who are preparing for advanced education nursing degrees in geriatric nursing, long-term care, geropsychiatric nursing or other nursing areas that specialize in the care of the elderly population. In FY 2012, there were 11,600 trainees supported by these grants.
The Nursing Community is a forum of 60 national professional nursing associations to build consensus and advocate on a wide spectrum of healthcare and nursing issues, including practice, education, and research. The Nursing Community is committed to improving the health and health care of our nation by collaborating to support the education and practice of Registered Nurses and Advanced Practice Registered Nurses. For more information about the Nursing Community or Title VIII programs, contact Suzanne Miyamoto at SMiyamoto@aacn.nche.edu or at 202-463-6930.

March 2014