Registered nurse workforce trends for new entrants age 23-26: Hope for the psychiatric nursing workforce shortage

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Registered Nurse Workforce Trends for New Entrants Age 23–26: Hope for the Psychiatric Nursing Workforce Shortage

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There are not enough adequately educated psychiatric/mental health registered nurses for the inpatient and community care needs of persons with mental illness (Hanrahan, 2009). Recruiting and retaining a psychiatric nursing workforce has been the subject of much concern in the US and elsewhere (Hanrahan, 2009; Hanrahan & Gerolamo, 2004; Happell, 2008; Robinson, Murrells, & Smith, 2005). A shortage of psychiatric/mental health nurses (PMHN) – a critical nursing shortage of all registered nurses – has existed since the 1980s.

According to the nursing workforce trends in the 1980s and 1990s, there was expected to be a shortfall of 20% of needed registered nurses by the year 2020 (Buerhaus, Staiger, & Auerbach, 2000), mainly due to a sharp decrease in young women choosing nursing as a career. The average age of registered nurses at that time was approximately 42 and if the number of younger entrants into nursing (younger than 30) did not increase, the effect on the nursing workforce would be dramatic – there would not be enough registered nurses to replace the registered nurses who were retiring.

The shortage of RNs also meant a shortage of psychiatric/mental health nurses although few studies of the PMHN workforce in the US could be found (Hanrahan, 2009; Hanrahan & Gerolamo, 2004). In a recent study, Hanrahan (2009) used the 2004 National Survey Sample of Registered Nurses (Miller Steiger, Bausch, Johnson, & Peterson, 2006) to describe the sociodemographic and educational profiles, employment characteristics, retention and turnover rates, and geographical distribution of the PMHN in the workforce in the US. Hanrahan (2009) found that PMHNs were older than non-PMHNs – the average age of PMHNs was 50.3 and the average age of non-psychiatric nurses was 46.7. When examining age cohorts in both PMHN and non-PMHN groups, Hanrahan (2009) found that there were fewer PMHN in the “under the age of 30” group (4.2%) than in the same age range in the non-PMHN group (9%). Hanrahan (2009) also found that 59% of the PMHN workforce was over age 50 compared to 41% in the non-PMHN workforce. Therefore, younger new entrants into nursing were choosing to work in clinical areas other than psychiatric/mental health settings; fewer younger nurses were entering the workforce (Buerhaus, et al, 2000), and those PMHN who were already in the workforce were older.

Recently published registered nursing workforce trends (Auerbach, Buerhaus, & Staiger, 2011) may provide hope for the shortage of psychiatric/mental health nurses. Auerbach, et al., (2011) used data from the Current Population Survey (N = 68,611) and the American Community Survey (N = 206,247) to examine nursing workforce trends from 1973-2009 and found a significant increase in younger nurses entering the profession. The number of registered nurses age 23-26 increased by 62% between 2002 and 2009 (Auerbach, et al., 2011). This increase in numbers of young entrants into nursing will likely have a dramatic lasting impact on the nursing workforce. According to Auerbach, et al., (2011), “recent cohorts who supplied more full-time-equivalent registered nurses at young ages continued to supply more RNs as these cohorts aged” (p. 2287) and “because of the sharp turnaround in the number of young people becoming nurses, the nurse workforce is projected to grow faster over the next two decades than previously anticipated” (p. 2290).

The new RN workforce trends for new entrants age 23-26 are good news for psychiatric/mental health nursing. A larger number of RNs entering the labor pool raises the prospect of invigorating the psychiatric nursing workforce. There are three actions we can take right now to capitalize on this opportunity. First, since psychiatric hospitals may have grown accustomed to the RN shortage, if you are an inpatient psychiatric nursing advocate, create an email group of the nurse leaders from your...
local hospitals and send them this article. Secondly, if you are an RN working in a psychiatric facility that has an inadequate RN/patient ratio, encourage your administrators to create RN positions and advertise these new employment opportunities. And thirdly, if you are a nurse educator, help hospitals willing to hire new graduates by sharing and building curricula for RNs entering psychiatric nursing. With a strong workforce base, together—consumers, psychiatric nurses, educators, administrators and researchers, we can create the momentum to energize and innovate inpatient psychiatric treatment.

REFERENCES


