

## Exploring and Responding to Increased Burnout among Higher Education Nursing Faculty

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Received: 31 Sep 2024; Accepted: 01 Nov 2024; Published: 09 Nov 2024

**Citation:** McCrory-Churchill S, Abigail Mitchell. Exploring and Responding to Increased Burnout among Higher Education Nursing Faculty. Nur Primary Care. 2024; 8(6): 1-4.

### ABSTRACT

*Faculty in higher education, especially Nursing faculty, are at high risk for stress and burnout. This risk is poised to worsen with the current nursing faculty shortage. According to AACN's report 2022-2023 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing, U.S. nursing schools turned away 78,191 qualified applications from baccalaureate and graduate nursing programs in 2022 due to an insufficient number of faculty, clinical sites, classroom space, clinical preceptors, and budget constraints. Most nursing schools responding to the survey pointed to faculty shortages as a top reason for not accepting all qualified applicants into their programs. Compounding the issue is an increasing shortage of nurses, and a need to fill those positions with qualified and competent new nurses. Programs are being pushed to operate at maximum capacity and nursing faculty are experiencing increasing burnout. The United States' experience with the pandemic has placed the reality of our current nursing shortage, and its widespread implications into the spotlight. While burnout has been addressed in clinical nursing, burnout among nurse faculty has not received as much attention.*

### Keywords

Nursing Faculty, Faculty burn out, Nursing shortage, Nursing Leadership.



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Nursing faculty burnout, directly linked to the nursing shortage, is an issue facing Schools of Nursing across the country, and

internationally. Factors influencing this are many, but a noted factor is the increasing disparity between academic and clinical pay. Median salary across advanced practice registered nurse roles is reported to be \$120,000 while by contrast, the AACN reported in March 2022, that the average salary for a master's-prepared professors in schools of nursing is \$87,325. This disparity, along with a nursing shortage makes it difficult to find and entice clinicians away from their clinical roles and into academia.

Additionally, nursing is facing an aging population both in the clinical arena and in academia. With average ages of doctoral prepared nurse faculty holding the ranks of professor, associate professor, and assistant professor at 62.5, 56.7, and 50.6 years respectively, there is a great need to maintain current faculty members and prevent burnout across both novice and seasoned faculty. Similarly, for master's degree-prepared nurse faculty, the average ages for professors, associate professors, and assistant professors were 55.0, 54.7, and 48.6 years. Of note, there were 2166 FTE faculty positions that went unfilled in 2022. Most of the vacancies (84.9%) were faculty positions requiring or preferring a

doctoral degree. Current nursing leadership must find ways to fill these open positions, but even more so, work with those who are already endeavoring in academia to ensure that they are able to and desire to remain in educational settings long term.

### Problem Statement

Occupational stress and burnout are common among faculty and students at institutions of higher education. The demands and expectations placed on faculty have increased over the years. Increasing demands with additional time constraints, increasing student expectations, more detailed curriculum, research requirements and inadequate salary have created an environment of occupational stress and exhaustion among faculty. The consequences of faculty burnout are vast and have the potential to impact not only job satisfaction, but job performance and student learning [1].

While burnout among nurses has been widely studied and publicized, burnout among nursing faculty has garnered less attention. Though it is not well addressed in the literature, nursing faculty burnout exists, and must be taken seriously. The nursing shortage and the nursing faculty shortage are not mutually exclusive, but nursing faculty are facing different demands that require different intervention. Factors disproportionally influencing burnout among nursing faculty may include clinical and academic salary disparity, need to maintain clinical practice alongside teaching load, increased demands due to the nursing faculty shortage, increased workload and competing time demands.

Nursing faculty often find that they work in silos and lack a feeling of connection to the larger educational institution. This social isolation, an absence of belonging, can be impactful in increasing burnout. Additionally, incidents of bullying and incivility are accruing in academia. Such events often lead to moral and even physical distress, further increasing the risk of burnout and turnover. Burnout among faculty, especially nursing faculty is a serious issue across nations. Promoting resilience and minimizing burnout should be a focus of institutions of higher education, and Schools of Nursing.



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### Nursing Theory

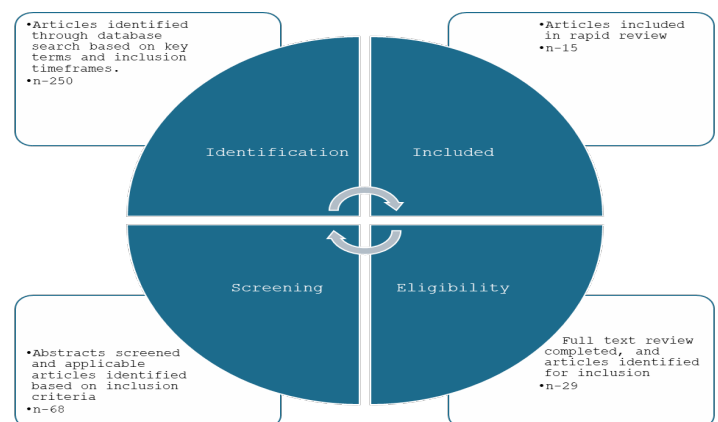
The Health Promotion Model (HPM) focuses on explaining health-promoting behaviors, using a wellness orientation. Health promotion includes activities directed toward developing resources that maintain or enhance a person’s well-being. In

this case, nursing faculty. Nola Pender’s model includes several theoretical aspects that can be utilized to create interventions and understanding of health behaviors. The model also incorporates interpersonal and situational influence on a person’s commitment to health promoting actions. Nursing faculty can utilize the HPM to improve the well-being for themselves, nursing students, and family.



### Literature Review

PubMed, Google Scholar, CINAHL, EBSCO and manual search of references from evaluated studies were used using the following search terms “nursing faculty” AND “nursing faculty burnout, “nursing shortage”, Articles published between 2019 and 2024 were included. Randomized controlled trials, retrospective cohort studies, prospective cohort studies, journals, and quality improvement projects that assessed the issue of nursing faculty shortage and burnout. The literature searches were further broken down by peer-reviewed, English language, full text journals, nursing journals, and North American journals. The 5-year limit was used to ensure current evidence-based literature is reviewed and summarized.



The literature clearly identifies that qualified nursing faculty are needed. We are facing and challenged by the nursing shortage, which is compounded by the decrease of nursing faculty resulting in fewer seats in nursing programs. There are 29 million nurses worldwide, with 3.9 million in the United States [2]. Nursing faculty are distinct professionals, as they are educating our future nurses to provide competent, safe care, assure quality, and improve patient outcomes. The nursing faculty shortage has impacted current and future nursing workforce needs and health

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outcomes [3]. The average age of nursing faculty is between 48.6- and 62.5-year-old, depending on their job title and degree level. It has been reported that one-third of nursing faculty who teach in Bachelor of Science (BSN) or Master of science (MS) nursing programs are planning to retire by 2025. Nursing programs are struggling to find doctorally prepared faculty, find faculty with the right specialty, and they are further challenged by the inability to offer salaries that are competitive with clinical positions [4].

### **Nursing Shortage**

We have been in a state of nursing shortage for many years, with the discussion starting in the early 90's [5]. According to The American Nurses Association (ANA), more registered nurse jobs will be available through 2022 than any other profession in the United States. According to an article in the Nursing Times, The US Bureau of Labor Statistics projects that more than 275,000 additional nurses are needed from 2020 to 2030 [6]. Employment opportunities for nurses are projected to grow at a faster rate (9%) than all other occupations from 2016 through 2026. According to the February 2023 Nursing Shortage study through the National Library of Medicine, the specific shortage of nursing faculty is directly related to the general shortage of nursing professionals worldwide. The AACN points to the significantly higher rates of monetary compensation for practicing clinical nurses, citing statistics that compare a \$120,000 median salary for advanced practice registered nurses (APRN) with an average annual salary of \$87,325 for nursing school professors with a master's degree or higher.

### **Nursing Faculty Burnout**

Nursing faculty are distinct professionals, educating our future nurses to provide competent, safe care, and provide positive patient outcomes. The nursing faculty shortage has impacted both current and future nursing workforce needs as well as health outcomes [3]. While there is not the level of research found on burnout among nurses, burnout has been reported in nursing faculty. They are faced with increasing workloads, lack of resources, salary disparities between academia and clinical roles, and lack of respect. One study identified faculty burnout as the number one reason nurses leave academia, as they felt exhausted, disengaged, and overall just burnt out [7]. A few empirical research studies found identifiable features of burnout in nursing educators: emotional exhaustion, depersonalization, lack of accomplishment, compassion satisfaction, and secondary traumatic stress [8]. Predictors of intent to leave nursing academia are identified and have common themes such as salary, workload, respect, and work life balance. Nursing education is one of the professions requiring long periods of work to achieve constant success and positive student outcomes. Faculty are in daily contact with students and often work in other areas of health care. Being accountable and responsible for educating nursing students, committee work, and other obligations of the university often lead to work environment stressors. Being active in such a work environment, with too many tasks and too little time, reduces job satisfaction and increases stress. Severe and long-term occupational stress causes occupational burnout [9].

### **Nursing Strategies to Improve Faculty Satisfaction**

Different aspects of burnout impact social, emotional and physical wellbeing. The experience of burnout is very personal, and related to several identifiable characteristics. That is to say, not everyone is going to experience burnout in the same way, and a single intervention is not going to be impactful for everyone [9] multiple strategies may need to be employed to have the widest reach and most impact on assisting faculty.

### **Lavender Room**

When working conditions create dissatisfaction in nursing faculty, the psychological status of employees is affected negatively. As a result, they have negative perceptions about themselves and exhibit negative behavior which leads to uncivility. A study completed in 2023 found that lavender oil inhalation reduced work stress and increased job satisfaction among the health professionals. [10]. A few health care organizations including Schools of Nursing are offering the use of a lavender room. This room features a neutral color palette, natural light, peaceful art, comfortable chair with pillow and a blanket. It has been found that nursing faculty who utilize such a room during their day have lower stress levels. This room is a tool to help them relax and remain resilient. It has been found that the use of a mediation room does help with the feeling of the need to decompress.

### **Support Animals**

Psychosocial risks (e.g., work-related stress, emotional demands) pose a significant threat to nurse faculty physical and mental well-being and are a tremendous burden on schools of nursing. Animal support programs positively impact workforce morale, which may in turn aid in improving job satisfaction [11]. This study found that mood, perceptions of feelings such as being calm and relaxed improved. The need to focus on physical and well-being is essential given the impact and disruptions the COVID-19 pandemic has triggered and continues to challenge nursing faculty. With the increasing success of service animals for military veterans, animals are now being trained for other psychosocial disorders including anxiety, panic attacks, and other stressful physical disorders [12].

### **Mentorship**

Mentoring can be a powerful addition to the orientation period and continuous thought out the novice faculty role. One-on-one mentorship can offer personalized support, while comprehensive orientation programs and clear expectations can help new faculty members acclimate to their roles and responsibilities, fostering a sense of belonging and confidence [13]. Mentors should have expertise in their specialty, and in academia. Respect and collegiality of other faculty, team members, and leadership is essential. Deans, and other administrators should ensure mentorship programs, networking opportunities, and ongoing faculty development [14].

### **Conclusion**

Retention and recruitment of qualified nursing faculty is a challenge, made increasingly difficult amidst the nursing shortage. The wellbeing of faculty and promotion of resilience while seeking ways to reduce burnout should be a priority of Higher Education.

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While the literature review highlights few options for increasing engagement and decreasing burnout, these are not universally realistic and additional research is needed. To begin a shift in the right direction, institutions of Higher Education need to address the disparity between clinical and academic roles in nursing as well as overall low compensation across novice and seasoned faculty positions. Attention to the needs of faculty members, increased sense of belonging and manageable workload will assist in maintaining faculty in academia and attracting new faculty members.

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