



Strengthening America's Healthcare Workforce: Burnout, Shortages, and Development

Center Forward Basics

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Overview

The U.S. healthcare workforce comprises an array of professionals, including physicians, nurses, healthcare support staff, and more, totaling more than eighteen million workers. This workforce represents a significant portion of the labor market and includes private and government-employed individuals. Approximately 10% of these individuals work in public healthcare systems or federally funded roles, such as the Department of Veterans Affairs and the Centers for Medicare and Medicaid Services (CMS).

Healthcare careers are divided across various sectors, including hospital care, ambulatory services, and life sciences. However, recent years have shown declining workforce levels in several critical areas, notably **primary care**, **pediatric specialty care**, and mental health, especially in rural communities. Key reasons include early retirements, **burnout**, insufficient workforce pipelines, burdensome administrative responsibilities, and payment disincentives.

Burnout, Mental Health, and the Pandemic

Burnout is a severe issue affecting healthcare workers, with more than 45% of behavioral health providers and nearly 60% of nurses reporting burnout as of 2022. Contributing factors include excessive workloads, administrative demands, workplace safety concerns, and lack of mental health support to help address increasing levels of stress. For instance, in 2022, Cigna reported 20% of healthcare workers have been diagnosed with depression or anxiety, approximately three out of five report feeling lonely, and more than half state their personal lives suffer due to work-related stress.

The COVID-19 pandemic exacerbated historical stressors for healthcare providers and their workload. A survey of 2,300 psychologists found that 45% of respondents were unable to meet treatment demand, 60% had no capacity for new patients, and 42% maintained waitlists of ten or more patients. Existing pediatric workforce shortages were made worse by a surge in children experiencing mental health challenges that placed an extraordinary burden on frontline pediatric providers. As a result, the Children's Hospital Association, American Academy of Pediatrics, and the American Academy of Child and Adolescent Psychiatry declared a national crisis in children's mental health.

On the other hand, the pandemic's unprecedented strain on healthcare staff led to increased awareness and temporary measures to mitigate this part of the

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Center Forward brings together members of Congress, not-for-profits, academic experts, trade associations, corporations and unions to find common ground. Our mission: to give centrist allies the information they need to craft common sense solutions, and provide those allies the support they need to turn those ideas into results.

In order to meet our challenges we need to put aside the partisan bickering gridlocking Washington and come together to find common sense solutions.

For more information, please visit www.center-forward.org

Key Definitions:

- **Primary Care:** The first point of contact for patients within the healthcare system
- **Pediatric Specialty Care:** Care for individuals requiring treatment by healthcare professionals with advanced training and expertise in specific areas of medicine
- **Burnout:** A state of physical, emotional, and mental exhaustion caused by prolonged exposure to stress, particularly in work settings

workforce's burden. For example, temporary expansions of telehealth services allowed healthcare workers to manage patient caseloads remotely, alleviating some physical strain and facilitating better access to care in rural and underserved areas. Additionally, the [Dr. Lorna Breen Health Care Provider Protection Act](#) (H.R.1667), signed into law in 2022, provided forty-five organizations with over \$100 million in grants to serve the mental health needs of healthcare workers.

Geographic Disparities and Workforce Shortages

The U.S. faces significant healthcare workforce shortages, particularly in rural areas with limited access to primary and specialty care. Rural communities have 5.3 primary care physicians per 10,000 residents (7.9 in urban centers), and those residents are more likely to experience longer wait times and travel longer distances on average for healthcare services. More than half of rural counties lack hospital-based obstetric services, which creates significant barriers to accessing essential maternal healthcare. This shortage leads to critical gaps in prenatal, perinatal, and postnatal care, directly impacting maternal and child health outcomes and increasing the likelihood of complications during childbirth. Compounding the care shortage and an urban to rural divide is the lack of racial and ethnic diversity amongst providers. Studies show improved health outcomes for patients whose providers are culturally, racially, and ethnically compatible.

In addition to geographic disparities, the degree of attrition in this workforce segment varies by position and specialty. According to the Association of American Medical Colleges (AAMC), the U.S. could face a shortfall of up to 124,000 physicians by 2034, with primary care expected to be particularly affected, accounting for up to 48,000 of those needed. Similar trends exist in nursing, with the American Nurses Association estimating over one million registered nurses will retire by 2030, further widening the gap in a field already under strain. The projections are worse in the mental health space. The Health Resources and Service Administration (HRSA) predicts a 60% increase in demand for mental health counselors by 2036, while supply is expected to decrease by 1%, highlighting severe future shortages. The trend continues in pediatric care with a decline in providers pursuing a career in pediatrics at the rate of 12% since 2019.

Educational Pipeline and Workforce Development Programs

Addressing workforce shortages requires a strong focus on education and training pathways, from pre-college through advanced medical programs. Initiatives encouraging students to pursue healthcare careers, especially in underserved areas, start with **pre-college and early education**. These programs introduce high school students to healthcare careers and can help broaden the applicant pool for medical and nursing schools. Scholarships targeting rural students and those from underrepresented backgrounds are

- **Pre-College and Early Education:** Initiatives designed to introduce high school students and young learners to healthcare careers
- **Nursing and Allied-Health Programs:** Educational tracks critical to filling various roles in the healthcare system. For example, techs, nurses, therapists, etc.
- **Nurse Corps:** A Federal program providing financial assistance to nursing students in exchange for work in underserved areas
- **Medical School and Residency:** Educational pathways for becoming a licensed physician
- **Life Sciences Sector:** industries involved in researching, developing, and producing products related to living organisms. Ex. biotech, medical devices, diagnostics, etc.
- **Doulas:** Trained professionals providing emotional, physical, or informational support during the process of childbirth

Key Statistics:

- The U.S. healthcare workforce totals over 18 million people
- Healthcare is one of the top three employers in rural communities
- A single rural primary care physician can generate \$1.4 million in wages and 26.3 jobs
- From 2005 - 2022, 186 rural hospitals closed
- By 2034, the U.S. will have a shortfall of 124,000 physicians
- Over 1 million nurses are expected to retire by 2030
- 44% of nurses reported being

essential to bolster workforce diversity and meet the needs of varied communities. **Nursing and allied health programs** are a second kind of workforce solution. Expanding nursing school capacities, including by increasing the number of nurse educators both in the classroom and the clinical setting, and offering incentives like loan forgiveness can address anticipated nursing shortages. Loan repayment programs like **Nurse Corps** are key to encouraging graduates to work in high-need regions. Finally, **residency and medical student programs** are the most advanced of the United States' healthcare workforce pipelines. As of 2024, Medicare-supported training positions at this level have been frozen since 1997. Medical residency expansion programs will be pivotal in years to come. In addition to these pipelines, non-clinical personnel such as counselors and peer supports are crucial in alleviating burdens on clinical professionals, particularly in supporting mental health needs.

subject to physical violence

- Female nurses are 8.5X more likely to die by suicide
- Lifetime earning potentials for adult providers are 25% higher than that for pediatricians
- Nearly 35 million children have had at least one traumatic experience
- More than 46 million Americans reported a substance abuse disorder in 2021

Life Sciences Workforce - High Skill, High Wage Impact

The **life sciences** sector represents an integral component of the healthcare workforce by offering high-skill, high-wage job opportunities. This sector's role includes researchers, lab technicians, and pharmaceutical professionals who contribute significantly to economic output and healthcare innovation. The median income for life science professionals often exceeds the national average, reflecting the specialized skills and extensive education required. The sector's growth can be critical in addressing healthcare shortages by creating pathways for entry-level positions in healthcare-related fields and potentially offsetting shortages in clinical roles by providing diagnostic services and innovative preventative therapeutics. States with strong life science industries, like California, Utah, Massachusetts, and North Carolina, have reported a high economic impact and income potential. Some argue the life sciences sector's workforce growth should be considered part of a broader strategy to bolster healthcare infrastructure and economic resilience.

Proposals for Improvement and Conclusion

Bipartisan efforts are underway in Congress to mitigate healthcare workforce challenges. These include increased funding for healthcare education, expanded residency programs, bedside training, loan forgiveness, and provider resiliency and safety programs. Additionally, efforts supporting technological solutions to diminish administrative functions, allowing peer support specialists to participate in the delivery of behavioral health services, and examining practice and physician oversight rules to allow providers to practice at the top of their license are growing. To combat rural healthcare challenges, some thought leaders propose integrating **doulas**, community health workers (CHWs), and other auxiliary personnel into healthcare models. Proponents of empowering these personnel would argue for including Medicaid coverage and funding of certified doula services and funding for CHWs. These healthcare workers can promote diversity within the workforce to better represent specialized populations and their unique healthcare needs.

Specific bipartisan initiatives aiming to address healthcare workforce challenges include:

- **[Healthcare Workforce Resilience Act](#)** (H.R.6205/S.3211): This bipartisan legislation addresses physician and nursing shortages by allocating unused visas for qualified international healthcare professionals.
- **[Conrad State 30 and Physician Access Reauthorization Act](#)** (H.R.4942/S.665): This legislation is designed to extend and expand the Conrad 30 program, which offers J-1 visa waivers to international medical graduates who wish to practice in underserved U.S. communities.
- **[SAVE Act](#)** (H.R.2584, S.2768): This act provides protections from assault for hospital workers, like those in federal statutes applying to aircraft and airport workers.
- **HRSA Title VII Workforce Development Programs**: Funded through annual federal appropriations for the Department

of Health and Human Services, these programs provide financial relief for future healthcare professionals from underrepresented minority, rural, and disadvantaged backgrounds through scholarship, loan repayment, and mentorship programs.

- **Children’s Hospital Graduate Medical Education (CHGME) program:** CHGME is the only federal program focused exclusively on the training of pediatricians and pediatric specialists at 59 children’s hospitals across the country.
- **Pediatric Specialty Loan Repayment Program (PSLRP):** The PSLRP is the only federal loan repayment program specifically for pediatric specialty providers.
- **Interstate Medical Licensure Compact (IMLC):** The IMLC facilitates faster licensure for physicians who wish to practice in multiple states, helping to alleviate shortages in rural and remote areas. Expanding licensure flexibility could be crucial for filling gaps in underserved locations, especially for mental health services where provider shortages are particularly acute. In recent years, Congress has provided funding to help states implement and participate in IMLC.
- **Federal Loans and Loan Forgiveness Programs:** Administered through the Department of Education, the Direct Unsubsidized and GradPlus loans cover the full cost of attendance to help students access financing. Additional federal recruitment programs, such as the Public Service Loan Forgiveness, the National Health Service Corps, and the federal Nurse Corps provide student loan relief in exchange for serving in Health Professional Shortage Areas, nonprofits, or government facilities.

The U.S. healthcare workforce faces numerous challenges, from burnout and provider mental health issues to critical labor shortages in rural and specialty care areas. While temporary measures during COVID-19 provided some relief, these efforts highlight the need for permanent and expanding solutions. Supporting workforce development through targeted education programs, international talent integration, and flexible licensure initiatives will be essential to ensure healthcare access and quality care for all Americans. Collaborative efforts between Congress, healthcare providers, educational institutions, and other health care experts will be pivotal in crafting a sustainable path forward for the healthcare workforce in the years to come.

Link to Additional Resources

- Association of American Medical Colleges: [Workforce Policies and Priorities](#)
- Association of American Medical Colleges: [Workforce Data and Reports](#)
- American Psychological Association: [Practitioners are Overworked and Burned Out](#)
- Bureau of Labor Statistics: [Healthcare Support Occupations](#)
- Centers for Medicare & Medicaid: [Telehealth](#)
- Children’s Hospital Association: [Pediatric Workforce Shortages Persists in 2024](#)
- Cigna: [Building Partnerships to the Health and Vitality of Healthcare Workers](#)
- Human Resources and Service Administration: [Nurse Corps](#)
- Kaiser Family Foundation: [State Health Facts](#)
- World Health Organization: [Burnout](#)
- National Institutes of Health: [Primary Care Overview](#)