

Philanthropic Support for the Nursing Profession

Priorities and Potential for Transforming Nursing and Achieving Health Care Quality and Equity



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About the American Nurses Foundation

The American Nurses Foundation (the Foundation) is the philanthropic arm of the American Nurses Association (ANA) and part of the ANA Enterprise. Our mission is to transform the nation's health through the power of nursing. We achieve this by finding and funding new ways to solve problems, generate new ideas and tools, and lay the framework for advances in research, education, and clinical practice that enhance nurses' health and improve patient care.

The Foundation advances the nursing profession by serving as a thought leader, catalyst for action, convener, and funding conduit. We identify the most pressing issues facing nurses, collaborate with leaders both inside and outside the profession on solutions, and strive to get the financial resources needed to research, test, and amplify these solutions to evolve the practice of nursing and transform health and health care.

The Foundation envisions a world where health care is evidence-informed, predictive, preventive, and personal. Nurses will be equipped with knowledge and enabled by leading-edge tools, environments, and systems to design and deliver exemplary support, guidance, and care. Every person will have access to a competent, capable nurse who connects with them and champions their health and well-being. At its core, this vision seeks to deliver on the most important aspect of nursing: care. Care manifests through access to nursing; through the intellectual expertise of a unique practice profession; through serving as an essential partner to patients and other care providers; and through ensuring the holistic well-being of people.

For more information, visit www.nursingworld.org/foundation.

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Everyone has benefitted from the expert care of nurses, who are essential and indispensable to health care. Nurses make up the largest portion of the health care workforce and are ranked as the most trusted profession year after year.¹ They spend more time with patients and their families than any other health care providers. They are responsive and innovative, and they are uniquely positioned to use their expertise to transform health care.

Transformation of our complex health care system requires vision, innovation, and dedication to long-term change—as well as substantial funding. Philanthropy will be crucial in creating and scaling positive change. That is why the American Nurses Foundation (the Foundation) commissioned this groundbreaking report—to understand the landscape of philanthropic support for the nursing profession. How much is given? By whom? And to what projects?

The findings are astounding: **Just one penny of every dollar of health care philanthropy is directed to the nursing profession.**

As the national charitable organization focused on achieving a healthy world through the power of nursing, we believe this needs to change. If our nation is to attain true health equity and better health, we must change in whom and how we invest philanthropic dollars.

Nurses are the key to more cost-effective, higher-quality, more-equitable health care for all. We must focus our philanthropic resources where they can make the greatest difference—by investing in nursing.

We hope this report prompts action and wise investment. The health of our nation depends on it.



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¹Nurses Retain Top Ethics Rating in U.S., but Below 2020 High ([gallup.com](https://www.gallup.com)).

Executive Summary and Key Findings

Existing models of health care education, regulation, and clinical practice are built on traditional notions of institutional service delivery that are heavily focused on outdated disease-oriented, acute-care practice, resulting in a significant gap in the ability to provide equitable, quality care in today's rapidly evolving health care environment. Health care organizations have devised responses in silos with minimal utilization of nursing knowledge, experience, or leadership. Health care is changing too slowly, and not systematically or at the scale necessary to deliver quality care equitably to all people.

Nurses, as the largest number and most trusted contingent of health care professionals, are a natural catalytic force for accelerating transformation. Realizing a high-quality, equitable health care system will require embracing nurse leadership in both care delivery and innovation, ensuring decisions are informed by the nursing team, and providing all nurses with the proper resources to enable them to equitably deliver the highest-quality patient care. To understand how philanthropy has supported the nursing profession and identify opportunities for innovative investment, the Foundation has created *Philanthropic Support for the Nursing Profession: Priorities and Potential for Transforming Nursing and Achieving Health Care Quality and Equity*.

This report documents, for the first time, overall philanthropic investments in the U.S. nursing profession as well as the specific funding priorities of a subset of leading private, public, and community foundations. It also shares the perspectives of a set of nursing funders and other experts (see Appendix C) on the state of philanthropic support for the nursing profession and concludes with recommendations for funders seeking to unlock the transformative power of nurses. Key findings are summarized below.

Philanthropic investment in nursing provides a unique opportunity to break through historical barriers and partner with nurses to fast-track change that addresses the societal need for greater access, affordability, and health. Through coordinated, robust investment, latent opportunities for innovation will be developed and accelerated, leading to greater utilization and leverage of nursing expertise. This has the potential to disrupt—for the better—long-standing practices that leave nurses under-developed, under-utilized, and not racially diverse. Accelerating the nursing profession's capability to match the future demands of health care can

revolutionize how the profession addresses the needs of vulnerable populations and the social determinants of health, and speed the pace of health care transformation.

Sources of Philanthropic Support for the Nursing Profession

Finding

Despite recent high-profile major gifts for the nursing profession and raised awareness of the nursing crisis during the COVID-19 pandemic, private giving for the nursing profession is just one penny of every dollar given for health care. Overall philanthropic support for nursing totaled an estimated \$573.9 million in 2022 and a combined \$3.2 billion from 2015 through 2022. While these figures represent substantial support for all aspects of nursing—from nursing education to nurse-led practice to associations of nurses—they amount to merely one cent of every dollar in private contributions given for health care during this period.

Private Giving for the Nursing Profession as a Share of Overall Giving for Health Care, 2015–2022



*Source: *Giving USA*, 2023.

Finding

Foundations are an important potential source of catalytic support for the nursing profession. Estimated foundation giving for the nursing profession between 2015 and 2022 totaled \$778.6 million, or about one-quarter of private contributions. While individual donors provide essential funding for the nursing profession, foundations—especially larger, staffed entities—generally have established formal giving priorities and maintain a more consistent focus on these priorities over time. This approach enables them to develop a deep understanding of critical issue areas, remain focused on advancing their strategies, and provide the types of catalytic investments that can transform a field.

Foundation Support for the Nursing Profession

The extent of foundations' support for the nursing profession was assessed by reviewing the related grants made between 2015 and 2019 by a subset of the nation's largest private, public, and community foundations.

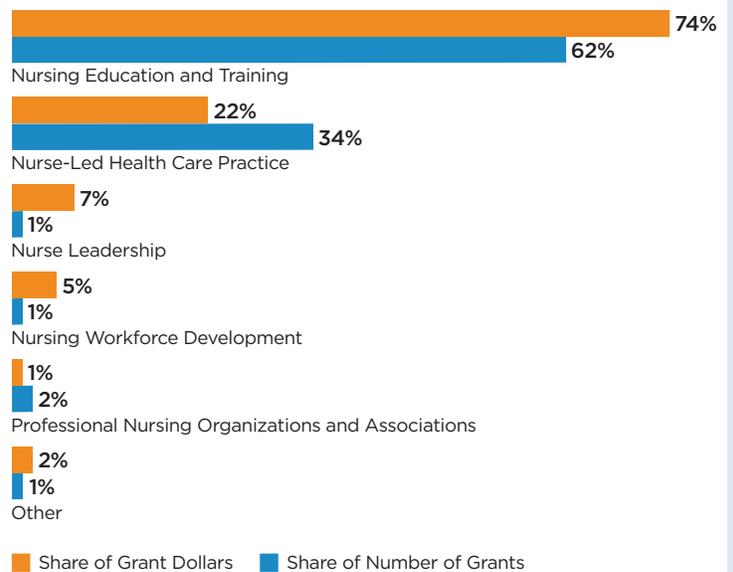
Finding

Foundation giving has prioritized filling the nursing pipeline over addressing the systemic factors that lead to attrition. Between 2015 and 2019, the vast majority of U.S. foundation funding for the nursing profession supported nursing education and training. Within this context, several interviewees expressed strong concern that educating more nurses without addressing the failures of the current system—such as dangerous work environments, disrespect, and work demands that lead to persistent stress—will simply perpetuate the attrition of nurses from the profession.

Finding

Foundations awarded more than three times as much in grant dollars to support nurse-led health care practice than they did to advance nurse leadership in the health care field. The disparity was even greater when comparing the number of grants awarded. One-third of the grants awarded between 2015 and 2019 supported nurse-led health care practice, such as through a visiting nurse association or the Nurse-Family Partnership. By comparison, only about three of every 100 foundation grants for the nursing profession, or just 217 awards out of about 7,100 grants, explicitly focused on building nurse leadership and on nursing as a profession. Despite the many critical roles that

Foundation Giving for the Nursing Profession by Issue Focus, 2015–2019*



*Grants may focus on more than one issue area. Therefore, the total across categories is more than 100 percent.

nurses fill and their vast responsibility for patient outcomes, few foundations seem to view nurses as essential contributors to decision-making in the health care sector.

Finding

Foundation support rarely addresses the need for a nursing workforce culturally connected to those they serve. From 2015 to 2019, only about 1 percent of foundation grant dollars and 1 percent of the number of grants awarded explicitly referenced diversification of the nursing workforce or supported nurses associations or initiatives specifically serving nurses of color, LGBTQ nurses, and/or nurses with disabilities. This relative lack of investment in diversifying the nursing workforce contrasts with the perspectives of key interviewees, many of whom agreed with one who emphasized that the nursing “workforce should mirror the communities they care for.”

Finding

Health equity will only be achieved with nurse leadership. Of the roughly 7,100 grants made between 2015 and 2019 by foundations included in this analysis for the nursing profession, only five directly referenced engaging nurses in ensuring equitable health outcomes for all, regardless of gender, race, ethnicity, class, or geography. By comparison, all the interviewees spoke about the critical role of nurses in achieving health

equity. Among reasons they cited were the primacy of nurses in providing direct patient care—which means that no initiative to advance health equity can succeed without nurse partnership—and the fact that because nurses are highly attuned to patient needs, they understand what does and does not work in improving health outcomes.

Transforming Nursing to Transform Health Care

Nurses are uniquely central to advancing health care quality and equity. Their connection to patients and firsthand knowledge of their needs, broad array of expertise and responsibilities, and direct engagement in ensuring the best possible patient outcomes make them ideal partners for funders seeking to transform the health care system to better serve everyone. Specific ways in which funders can help nurses maximize their potential to transform their profession and the health care system include:

- **Funding grants that help diversify the nursing workforce across all dimensions.** High-quality, equitable health care for everyone will not happen without a nursing workforce that embodies deep cultural knowledge of the communities it serves. Also critical to remember is that diversity is not limited to racial or ethnic identity and includes, among other characteristics, cultural, language, and religious diversity; sexuality and gender identity; and disability status.
- **Supporting nurse-led and -informed research and innovation.** The breadth of nurses' knowledge and responsibilities makes them ideally suited to lead research to advance a health care system that more effectively and equitably serves patients and communities. Funders should also encourage non-nurse health care research grantees to engage nurses as knowledgeable interviewees in research design, insightful interpreters of findings, and valuable interlocutors in identifying ways to build on learnings.
- **Facilitating nurse leadership in advancing health care quality and equity.** Funders should look for every opportunity to support nurses in taking on leadership roles within their institutions, in the broader health care sector, and at all levels of public policy. No health care professionals are better positioned than nurses to identify, implement, and disseminate innovative strategies to advance health care quality and equity.

The Foundation welcomes the opportunity to support all funders seeking to make lasting, positive changes in the health care system in partnership with nurses.

1 The Potential of Nursing

The crisis in the nursing profession is not new.

For decades nurses have been taking on ever-larger roles in directing and delivering patient care as health systems seek to rein in skyrocketing costs. Simultaneously, nurses are mastering and administering ever more sophisticated technologies, procedures, and medications to ensure the best possible outcomes for patients. They are also being asked to do all this in less time, with less support, and often with a patient population that is more physically and behaviorally challenging than in the past. The COVID-19 pandemic exacerbated these challenges for nurses and brought parts of this reality to broader public attention. Yet, this awareness has not resulted in a coordinated effort to address the underlying need for systemic change.

Re-envisioning the role of nurses is critical, as *tinkering* with the current system simply does not solve these issues and—insofar as the results of such tinkering are viewed as progress—actually impedes the transformation that the nursing profession so desperately needs. The sheer size of the nursing workforce—one in five U.S. health care workers is a nurse—alone does not explain the impact such a transformation could have. Nurses are a diverse group of practitioners engaging in myriad roles, from licensed practical nurses providing direct patient care in clinical settings to school nurses overseeing the well-being of learners to nurse practitioners executing many of the duties traditionally associated with physicians. Despite this variety of roles, the common thread is that no other members of the health care workforce—physicians, pharmacists, or technicians—come at all close to the amount of time nurses spend directly observing, listening to, and caring for individuals.

Why does this level of direct engagement matter? Because years of real-world experience have shown that cutting-edge procedures and medications do not guarantee universal, high-quality health outcomes. Abundant research has also clearly demonstrated that health care resources—such as those related to maternal health care and pain management—do not reach those in need equitably. Conversely, the documented success of programs such as the Nurse-Family Partnership² and visiting nurse associations illustrates what properly resourced and empowered nursing professionals can do to advance quality, equitable health care.

Transforming the current system into one that consistently delivers high-quality, equitable health care will require embracing nurse leadership in both care delivery and innovation, ensuring decisions in health care settings are informed by the experience and perspectives of the nursing team, and providing all nurses with the proper resources to enable them to offer thorough, consistent patient care. Conducting more in-service trainings and requiring nurses to implement new top-down policies will not result in better health outcomes; reimagining the current system in a way that elevates the central role and essential insights of nurses will.

The philanthropic sector—foundations, corporations, and individual donors—has been and can be to a far greater extent a vital partner in creating a health care system that empowers nurses to lead advances in quality and equity. This may include ensuring that nursing graduates are practice-ready and equipped with the technical competencies they will need to be successful as well as having meaningful knowledge of the social determinants of health and their role in health outcomes. It may also include advancing technology-enabled nursing practice, supporting direct-reimbursement nursing models, and embracing other opportunities to rethink and restructure the current system of nursing education and practice.

Philanthropic investment in nursing provides a unique opportunity to break through historical barriers and partner with nurses to fast-track change that addresses the societal need for greater access, affordability, and health. Through coordinated, robust investment, latent opportunities for innovation will be developed and accelerated, leading to greater utilization and leverage of nursing expertise. This has the potential to disrupt—for the better—long-standing practices that leave nurses under-developed, under-utilized, and not racially diverse. Accelerating the nursing profession's capability to match the future demands of health care can revolutionize how the profession addresses the needs of vulnerable populations and the social determinants of health, and speed the pace of health care transformation.

² See Nurse-Family Partnership, "Evidence of Effectiveness," available at www.nursefamilypartnership.org/about/proven-results/evidence-of-effectiveness.

Sources of Philanthropic Support for the Nursing Profession

Philanthropic investments by individuals, foundations, and corporations in the health care sector represent a mere fraction of overall spending for health care in the United States. In 2022, private contributions for health care totaled an estimated \$51.1 billion,³ compared with an estimated \$4.4 trillion in overall health care expenditures.⁴

Yet, the flexibility of philanthropic capital, which can be leveraged for purposes ranging from researching novel approaches for disease treatment and rethinking health care delivery to advancing the work of organizations seeking policy solutions to long-standing health care challenges, makes it a powerful potential resource for transforming the current health care system. Maximizing this leveraging power is especially critical for funders interested in helping the nursing profession advance health care quality and equity.

Finding

Despite recent high-profile major gifts to the nursing profession, private contributions for the nursing profession total just one penny of every dollar given for health care.

Major gifts from donors such as Leonard A. Lauder and Bill and Joanne Conway—either directly or through family foundations or other philanthropic vehicles—have drawn public attention to the importance of supporting the nursing profession. Nonetheless, overall philanthropic support for nursing totaled an estimated \$573.9 million in 2022 and a combined \$3.2 billion from 2015 through 2022 (FIGURE 1 and TABLE 1). While these figures represent substantial support for all aspects of nursing—from nursing education to nurse-led practice and associations of nurses—they amount to just 1 percent of every dollar in private contributions given for health care during this period.

Why does nursing account for such a small share of overall philanthropic support for health care? Conversations with nursing funders and other experts point to a combination of factors, including changes in funder approaches. One interviewee noted how over the past decade philanthropy that had traditionally focused

explicitly on nursing moved to a view of “health professionals as members of a team, which makes a lot of sense. But nursing. . . occupies this interesting territory that has these very porous borders, with everything from social work to the work that physicians do. I think a lot of nursing got lost in that.”

Others cited a lack of understanding of the unique role of nurses and their specific needs. “There’s a lot of money out there that goes to a variety of places,” remarked one interviewee. “But it always seems like nursing is not the priority.”

“Part of it is our own fault,” concluded another interviewee. “I don’t think we’ve done a good job of explaining what a nurse is or what a nurse does. There’s just a . . . lack of understanding in general about what. . . supporting nurses [means]. . . . I think that could be different for different people, because nurses do so many things.”

One interviewee suggested the nursing profession could better communicate its value. “I think nursing hasn’t really done a service to ourselves in communicating what we do,” said the interviewee. “If you don’t. . . communicate your worth, your importance, and your worth and your importance have been questioned by the medical hierarchy and by a gendered society, [then] even if you

³ See Appendix B: Methodology for more details.

⁴ See “National Health Expenditure Projections, 2022–31: Growth To Stabilize Once The COVID-19 Public Health Emergency Ends,” *Health Affairs*, 2023, available at www.healthaffairs.org/doi/10.1377/hlthaff.2023.00403#:~:text=National%20health%20expenditures%20are%20projected%20to%20have%20grown%204.3%20percent,to%2017.4%20percent%20in%202022.

garner the trust of the community. . .trust doesn't turn into dollars in any real, meaningful way or. . .into power.”

A fourth interviewee concurred, stating, “Nursing has been low in the hierarchy of medicine and health care for centuries. It is a largely female-dominated field. There are gendered and gender reasons why institutions have not invested in nursing.”

Finding

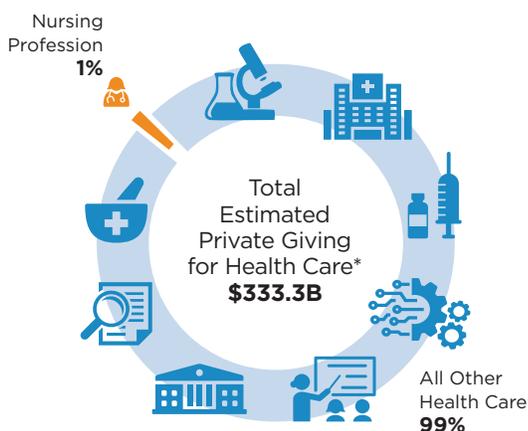
The COVID-19 pandemic raised awareness of the crisis in the nursing profession, resulting in increased private contributions but little change in nursing's overall share of funding.

The COVID-19 pandemic brought much-needed public attention to the crucial role of nurses as frontline responders to crises, along with the toll their job takes on their personal health, well-being, and willingness to continue to serve in the profession.⁵ The current health care system requires nurses to provide exceptional effort while continuing to be under-resourced in their day-to-day work and undervalued in planning and decision-making. Not surprisingly, reports abound of this exceptional stress driving nurses from the profession.

Within this context, estimated private contributions for the nursing profession increased by more than one-quarter (28 percent) between 2019 and 2020, from \$329 million to \$420 million. Support for nursing rose again in 2021 by more than two-fifths (42 percent), to an estimated \$597 million, before dipping slightly to an estimated \$574 million in 2022. Nonetheless, the

Figure 1

Private Giving for the Nursing Profession as a Share of Overall Giving for Health Care, 2015–2022



*Source: *Giving USA*, 2023.

nursing profession's share of all private contributions for health care in 2022 (1.1 percent) matched the share recorded for 2015.

Moreover, most of the major gifts announced during this period focused on filling the nursing pipeline through support for colleges and schools of nursing. (See Appendix A for a list of selected major gifts of \$10 million or more for the nursing profession announced between 2015 and mid-2023.) Notably, none of these exceptionally large gifts explicitly addressed the factors that have caused many nurses to leave the profession, such as understaffing that compromises nurses' ability to provide quality care and a lack of support for nurse leadership in improving health care outcomes. But simply having more nurses to hire isn't adequate to address this chronic understaffing. Nurses must feel they are valued—in the form of sufficient pay, work-life balance, and having a voice in decision-making—to stop attrition so that the overall number of nurses will grow.

Finding

Foundations are an important potential source of catalytic support for the nursing profession.

Estimated foundation giving for the nursing profession between 2015 and 2022 totaled \$778.6 million, or about one-quarter of private contributions (FIGURE 2). While individual donors provide essential funding for

Table 1

Private Giving for the Nursing Profession as a Share of Overall Giving for Health Care by Year, 2015–2022

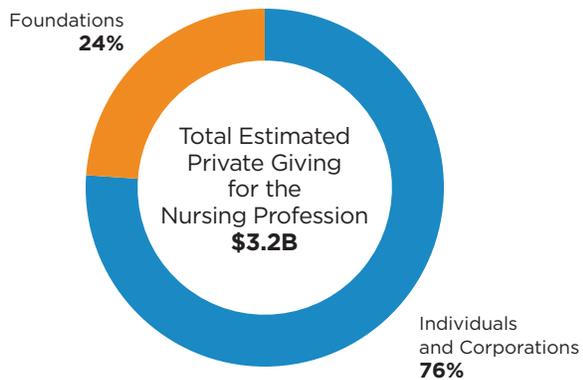
YEAR	ESTIMATED GIVING		NURSING PROFESSION AS A SHARE OF PRIVATE GIVING FOR HEALTH CARE
	NURSING PROFESSION	TOTAL HEALTH CARE*	
2015	\$383M	\$34.3B	1.1%
2016	\$335M	\$37.9B	0.9%
2017	\$315M	\$38.4B	0.8%
2018	\$239M	\$40.9B	0.6%
2019	\$329M	\$39.8B	0.8%
2020	\$420M	\$42.5B	1.0%
2021	\$597M	\$48.6B	1.2%
2022	\$574M	\$51.1B	1.1%
Total	\$3.2B	\$333.3B	1.0%

*Source: *Giving USA*, 2023.

⁵ See American Nurses Foundation, Pulse on the Nation's Nurses Survey Series, at www.nursingworld.org/survey-series-results.

Figure 2

Foundation Giving as a Share of Overall Private Giving for the Nursing Profession, 2015–2022



the nursing profession, foundations—especially larger, staffed entities—generally have established formal giving priorities and maintain a more consistent focus on these priorities over time. This approach enables them to develop a deep understanding of critical issue areas, remain focused on advancing their strategies, and provide the types of catalytic investments that can transform a field.

Finding

Charitable gift funds appear to be a minor source of support for the nursing profession.

Charitable gift funds—established to enable donors to receive immediate tax benefits while maintaining the ability to specify giving over time without the administrative requirements of creating and maintaining

a private foundation—now serve as a conduit for tens of billions of dollars in giving by individual donors annually. Yet, despite the tremendous growth in giving happening through charitable gift funds over the past two decades, an analysis of data on these funds compiled by the Indiana University Lilly Family School of Philanthropy suggests that surprisingly little of this support focuses on the nursing profession. (See Appendix B for more details.)

Based on the Lilly Family School data, between 2016 and 2019 only 115 gifts made through major charitable gift funds could be identified as providing support for the nursing profession.⁶ These funds’ combined giving for nursing totaled just \$26.5 million, most of which was a single \$16.6 million gift made in 2016 via the National Philanthropic Trust to the Nurse-Family Partnership. In comparison, the median amount of all other contributions for nursing from charitable gift funds during this period was only \$12,250.

Of course, charitable gift funds represent only one facet of giving by individuals for the nursing profession. Nonetheless, the median gift amount does suggest that—with the obvious exception of high-profile major gifts—most individual giving for the nursing profession is quite modest in scale and, therefore, unlikely to support the types of transformative change needed in the field.

⁶ This analysis was based on the types of institutions receiving gifts. If more detailed information were available on the purposes of specific gifts, e.g., gifts to institutions of higher education that include support for schools of nursing, these totals would undoubtedly be higher.

3 Foundation Support for the Nursing Profession

U.S. foundations have a long history of funding innovative initiatives that have transformed health care in this country, from standardizing science-based medical education and expanding access to palliative care to advancing the concept of health equity and social determinants of health. Private, public, and community foundations have a similar opportunity now to support catalytic investments that can transform the practice of nursing in ways that strengthen the profession and enable the delivery of high-quality, equitable health care to all Americans.

Some foundations are already making investments that seek to maximize the potential of nurses to lead in transforming the health care system. To understand the ways in which the broader foundation community has been investing in the nursing profession, the Foundation licensed the most recent data available from Candid on domestic-focused giving by the country's foundations. While not comprehensive, these data include most of the largest foundations and account for roughly half of overall U.S. foundation giving. (See Appendix B for more details.)

Overall, grantmaking for the nursing profession—which, under this analysis, includes support for nursing education and training, nurse leadership, nurse-led health care practice, nursing workforce development, and professional nursing organizations and associations—represented less than 1 percent of foundation grant dollars for health care between 2015 and 2019. Nonetheless, roughly one of every eight funders (12 percent) included in Candid's Foundation 1000 data set made at least one grant focused on the nursing profession.⁷ Notwithstanding the limited support to date, this finding suggests the potential for engaging more foundations already experienced in supporting the nursing profession around investing in transformative change.

The extent of foundations' support for the nursing profession was assessed by reviewing the related grants made between 2015 and 2019 by a subset of the nation's largest private, public, and community foundations. This analysis looked at the scope of grants for the nursing profession (focusing on various

issues pertinent to the profession, on diversity and communities of color, on a particular type of nurse or level of nursing education, etc.) and type of support strategy (e.g., scholarships, research grants, public policy) and identified top funders and recipient organizations. The findings suggest that most foundations continue to invest in a traditional model of nursing, rather than the scope and scale of innovation necessary to transform nursing and health care.

Finding

Foundation giving has prioritized filling the nursing pipeline over addressing the systemic factors that lead to attrition.

Between 2015 and 2019, the vast majority of U.S. foundation funding for the nursing profession supported nursing education and training (FIGURE 3 and TABLE 2). Close to three-quarters (74 percent) of grant dollars and more than three-fifths (62 percent) of the number of grants awarded during this period supported the education of nurses. This funding ranged from programmatic and capital support for schools of nursing to grants focused on funding the ongoing training of nursing staff in health care facilities and other settings.

While most foundation funding currently focuses on filling the nursing pipeline, several interviewees expressed strong concern that educating more nurses without addressing the failures of the current system (some of which are noted below) will simply perpetuate the attrition of nurses from the profession. An interviewee who has elected not to fund educational programs that

⁷ This data set includes grants awarded by 1,000 of the largest U.S. foundations by contribution amounts. Support by Foundation 1000 funders for the nursing profession totaled \$248.8 million between 2015 and 2019, or 35 percent of the total \$705.5 million.

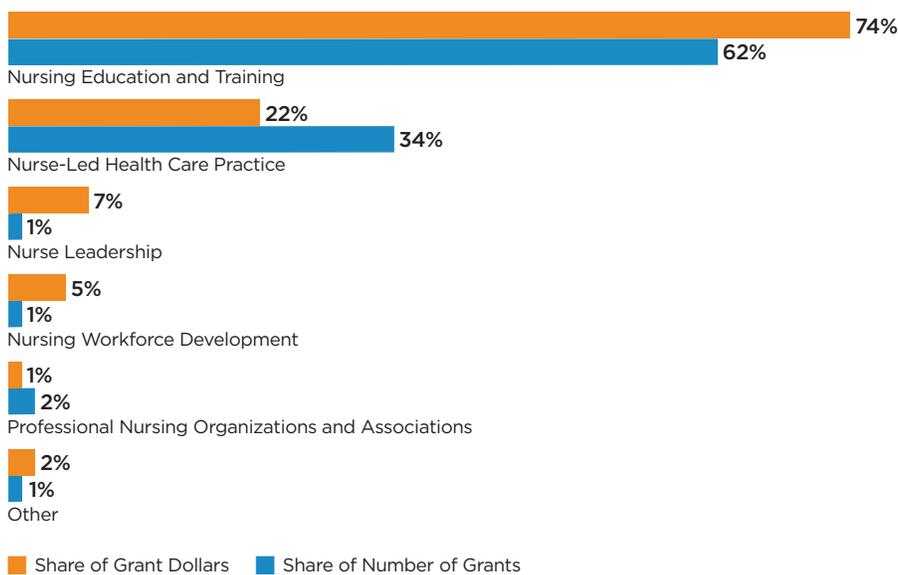
Table 2

Foundation Giving for the Nursing Profession by Issue Focus, 2015–2019

ISSUE FOCUS	DEFINITION	AMOUNT	%	NUMBER OF GRANTS	%
Nursing Education and Training	Includes support for schools of nursing and workplace education and training for nurses.	\$523,583,514	74.2	4,406	61.9
Nurse-Led Health Care Practice	Includes support for health care explicitly provided or led by nurses, as well as the hiring of new nursing staff. Does not include unspecified support for hospitals, skilled nursing facilities, and nursing homes.	152,970,087	21.7	2,422	34.0
Nurse Leadership	Includes support for initiatives and training explicitly focused on cultivating nurse leadership.	50,590,269	7.2	77	1.1
Nursing Workforce Development	Includes support for initiatives focused on expanding and strengthening the nursing workforce.	35,349,681	5.0	84	1.2
Professional Nursing Organizations and Associations	Includes support for nursing membership associations and other organizations serving the nursing profession, (e.g., the Philippine Nurses Association, the American Academy of Nursing).	8,254,781	1.2	140	2.0
Other		11,685,194	1.7	102	1.4
Total		\$705,468,917	100.0	7,123	100.0

Figure 3

Foundation Giving for the Nursing Profession by Issue Focus, 2015–2019*



*Grants may focus on more than one issue area. Therefore, the total across categories is more than 100 percent.

would help fill the nursing pipeline stated, “There are some very big holes in that pipe. . . . If we don’t fix [them], it doesn’t matter how much you put into the pipe—it’s all spilling out the sides.”

Recent research suggests that close to one-third of registered nurses hired by hospitals left their positions in less than a year,⁸ while other research estimates that close to 800,000 nurses plan to leave the profession by 2027.⁹ One interviewee attributed this trend to a lack of “the staff support you need to get things done so you can practice at the top of your license. [Nurses] are taking on more and more patients and can’t give that individualized care. For nurses, that’s very frustrating. People use the word ‘burnout.’ I think it’s more stress—the occupational stress that comes with it. I think the stress has just increased to a really unmanageable level.” Consistent with this observation, another interviewee noted that administrative work has “diluted the experience for the clinicians and diluted the outcomes. I don’t think people get burned out caring for people; they [get] burned out by doing everything else it takes to care for people.”

Another interviewee focused on the resistance among the new generation of nurses to the traditional approach to onboarding. Senior nurses came from a “more militaristic model,” observed this interviewee, and often have the mindset of “we’re going to test you in your first year and weed out the ones who are weak.” Younger nurses, on the other hand, “find that [view] old-fashioned, and they’re not used to that. I think a lot of young nurses see themselves as change agents and are more familiar with the importance of equity and [addressing] implicit bias. I think there’s a real divide in both the academic and clinical spaces between the older generation tasked with teaching the next generation of nurses and the younger generation of nurses who are going to inherit these positions.”

Interviewees suggested several ways of addressing attrition in the nursing profession. For example, one considered as successful those programs that bring in a newly graduated nurse and “don’t assume that she can walk on the ward tomorrow and deliver all the right care at the right time.” Another recommended providing mental health and self-care options, along with a living wage, for nurses with “affinity identities” to the patients they serve, which “would ensure that this is a

career path they can stick with for a long time and one that won’t burn them out.”

Another interviewee, addressing current efforts to combat attrition, remarked, “I think we’ve done a pretty crappy job. . . .in general. We give [them], ‘You want to go to yoga? You want more pizza?’ And people are like, ‘I don’t want that. I want you to pay more. And I want better patient ratios. And I want an environment that’s supportive.’”

Fundamentally, one interviewee concluded, “[There’s a] real opportunity for systems to change how they think about nursing and. . .to be caring employers instead of looking at nursing as sort of a disposable tool.” Another interviewee agreed, adding that what is needed is to “actually [help] improve the system so that nurses can do what they’re wanting to do, which is to care for patients and families who are going through some really challenging times. Most of us in the nursing profession don’t come to it as a job. We come to it as a calling and want to provide that care to people. So having systems that also care for us is, I think, really important for us to elevate.” Getting to the heart of the matter, a third interviewee asked, “How do we make sure that our system supports the health of [nurses] so that they’ll want to both stay and be able to stay without sacrificing their own physical, mental, or emotional health?”

Finding

Foundations awarded more than three times as much in grant dollars to support nurse-led health care practice than they did to advance nurse leadership in the health care field.

Over one-fifth (22 percent) of foundation grant dollars for the nursing profession and one-third (34 percent) of the number of grants awarded between 2015 and 2019 supported nurse-led health care practice. This funding typically supports the hiring of new nurses in hospitals or other health care settings or specific types of nurses (e.g., school nurses) as well as the delivery of health care by nurses explicitly, such as through a visiting nurse association or the Nurse-Family Partnership.

By comparison, only about three of every 100 foundation grants for the nursing profession made between 2015 and 2019, or just 217 awards, explicitly

⁸ See NSI Nursing Solutions Inc., 2023 NSI National Health Care Retention & RN Staffing Report, available at www.nsinursingsolutions.com/Documents/Library/NSI_National_Health_Care_Retention_Report.pdf.

⁹ See Muoio, D., “About 800,000 nurses planning to leave the profession by 2027, data show,” Fierce Healthcare, available at www.fiercehealthcare.com/providers/about-800000-nurses-planning-leave-profession-2027-data-show-0.

Examples of Foundation Funding for the Nursing Profession

Nursing Education and Training

THE BLUE & YOU FOUNDATION FOR A HEALTHIER ARKANSAS'S 2019 grant to the University of Central Arkansas Foundation for the Nabholz Center's Healthcare Simulation Program's purchase of mannequins and a medication dispensary system for the simulation center used to train approximately 300 student nurses.

THE RITA AND ALEX HILLMAN FOUNDATION'S 2018 grant to the American Academy of Nursing to support nursing education.

THE ROBERT WOOD JOHNSON FOUNDATION'S 2018 grant to AARP to identify and disseminate promising partnership models in nursing education and practice that advance population health.

Nurse-Led Health Care Practice

THE ST. LOUIS COUNTY CHILDREN'S SERVICE FUND'S 2016 grant to the St. Louis County Department of Public Health's Nurse-Family Partnership.

THE LETTIE PATE WHITEHEAD FOUNDATION'S 2018 grant to the Visiting Nurse Health System in Atlanta for the care of aged women.

Nurse Leadership

THE LUCILE PACKARD FOUNDATION FOR CHILDREN'S HEALTH'S 2018 grant to the Children's Hospital of Los Angeles for California nurse-led hospital transitions learning collaborative.

THE GORDON AND BETTY MOORE FOUNDATION'S 2015 grant to Visiting Nurse Health Services to support the development of nurse leaders by integrating Lessons in Leadership into the Nebraska Action Coalition's leadership offerings.

Nursing Workforce Development

THE CHICAGO COMMUNITY TRUST'S 2016 grant to Women Employed for the Pathways into Nursing and Allied Health Careers project.

THE METHODIST HEALTHCARE MINISTRY'S 2015 grant to The University of Texas Health Science Center of San Antonio for Strengthening the Advanced Degree Nursing Pipeline in order to address the nursing workforce shortage by bolstering enrollment to graduate more Bachelor of Science in Nursing nurses, provide nurses with associate or bachelor's degrees with the opportunity to achieve higher levels of education, and encourage baccalaureate-prepared nurses to pursue graduate degrees.

Professional Nursing Organizations and Associations

THE ELTON JOHN AIDS FOUNDATION'S 2015 grant to the Association of Nurses in AIDS Care for a project to empower nurses in priority jurisdictions to serve as champions in the efforts to end HIV criminalization.

THE UNITED HEALTH FOUNDATION'S 2018 grant to the American Nurses Foundation for the Jeannine Rivet National Leadership Fund for annual fellowship awards to emerging nurse leaders to foster and integrate nursing health knowledge, leadership development, and expertise in community and business leadership.

focused on building nurse leadership and on nursing as a profession (including supports for professional nursing organizations and associations). At the same time, roughly 8 percent of foundation grant dollars supported nurse leadership and nursing as a profession. Despite the many critical roles that nurses fill and their vast responsibility for patient outcomes, few foundations seem to view nurses as essential contributors to decision-making in the health care sector.

Finding

Foundation support rarely addresses the need for a nursing workforce culturally connected to those they serve.

From 2015 to 2019, only about 1 percent of foundation grant dollars and 1 percent of the number of grants awarded explicitly referenced diversification of the nursing workforce or supported nurses associations or initiatives specifically serving nurses of color, LGBTQ nurses, and/or nurses with disabilities (FIGURE 4).¹⁰ This relative lack of investment in diversifying the nursing workforce contrasts with the perspectives of key interviewees, many of whom agreed with one who emphasized that the nursing “workforce should mirror the communities they care for.” Another concluded, “When you have providers [who] understand communities, [who] look like people from the community, [who] know and have a real understanding of the health needs of those communities, outcomes are going to

be better. People are going to achieve health equity because they have more opportunity to have a better health outcome.”

Yet, graduating more nurses of color from nursing programs is insufficient. “I think that one of the pathways to equity is to make sure that the workforce looks more like the population at large,” said an interviewee. “But then the nursing community has to grapple with how we can include more nurses of color who may not have a baccalaureate degree. How do we either create more pathways to achieve that or enable them to be the best practitioners they can be in whatever setting that is?”

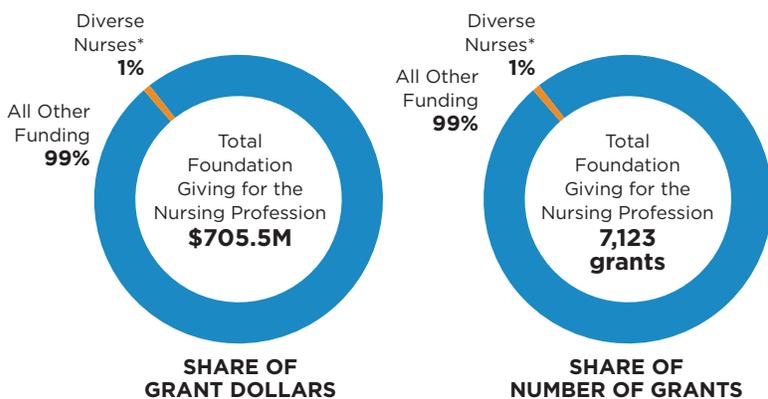
Differences in how diverse nurses are positioned within the nursing profession must also be addressed. “We know nurses, like immigrant nurses, disproportionately work in long-term care facilities where nurses do really important work,” observed an interviewee. “But they’re underpaid, and it’s a less-desirable work setting. So it may be that there are more nurses of color in the workforce. But it may be that they’re still dominating in settings that are considered second rate.”

This concentration of diverse nurses in less-desirable settings undoubtedly reflects in part many nurses’ challenges in accessing additional nursing education. As one interviewee shared, while having more baccalaureate-trained nurses reduces mortality rates, “the economic reality is such that lots of people who want to become nurses can’t afford to pursue a BA or . . . don’t have access to these programs.” Another interviewee noted, “People want to go back and get more training and more credentials. . . . It became apparent to us that there’s a real desire and need but not a lot of programs out there that support upskilling for currently practicing clinicians.”

Critical to addressing all these needs will be simultaneously examining the ways in which the health care system continues to perpetuate structures and attitudes that limit the educational and leadership opportunities available to diverse nurses, particularly nurses of color. One interviewee spoke explicitly about their overall focus on dismantling “structural barriers to health, including racism in the system and other forms of discrimination that make it hard for people to do their work and make it hard for the system to serve the people [whom] they need to serve.”

Figure 4

Foundation Giving for the Nursing Profession by Population Focus, 2015–2019



*Includes grants explicitly focused on diversifying the nursing workforce and/or supporting nurses of color, LGBTQ nurses, and/or disabled nurses.

¹⁰ Although none of the 2015–2019 grants included in this analysis indicated a focus on nurses with disabilities, twenty grants included a focus on supporting nurse-led services for disabled people.

Finally, two interviewees cautioned against assuming that ethnic and cultural similarities automatically lead to better patient outcomes. Social class and other differences between nurses and patients must also be addressed. As one interviewee said, “Background knowledge of different communities may be just as important as, if not more important than, literally the color of your skin in terms of how you’re going to work effectively with different patients from different backgrounds.”

Finding

Health equity will only be achieved with nurse leadership.

The persistence of long-standing inequities in the U.S. health care system has led a growing number of funders to conclude that an explicit focus on health equity will be required for making positive, lasting changes in health outcomes. Within this context, all the interviewees spoke about the critical role of nurses in achieving health equity. Nurses are “fundamental” to health equity, commented one. “I personally see [nursing] as central to any strategy.” Another stated, “Nursing has the capacity to advance health equity more than any other profession in this country.”

What makes nurses uniquely essential in advancing health equity? Certainly, the primacy of nurses in providing direct patient care means that no initiative to advance health equity can succeed without nurse partnership. Because they are deeply attuned to patient needs, nurses are well positioned to speak on what does and does not work in improving health outcomes.

Despite the tremendous potential for nurse leadership in advancing health equity, very little foundation funding has explicitly focused on leveraging the expertise of nurses. Of the roughly 7,100 grants included in this analysis, only five made between 2015 and 2019, totaling \$1.6 million, directly referenced engaging nurses in ensuring equitable health outcomes.¹¹ For example, the Colorado Trust made a grant to the Northwest Colorado Visiting Nurse Association for Health Equity Learning Series viewing parties, and the Robert Wood Johnson Foundation made a grant to the American Academy of Nursing to describe how innovative, nurse-designed care delivery models contribute to a culture of health through multisector partnerships and the promotion of equitable access to high-quality health care as well as disseminating lessons learned.

¹¹ These totals do not include funding for diversifying the nursing workforce, which may also contribute to more equitable health outcomes.

Since early 2020, funder support for advancing health equity has undoubtedly increased in response to national racial awakening, health disparities magnified by the COVID-19 pandemic, and the growing number of initiatives seeking equitable health outcomes. What has yet to be determined is the extent to which funders will invest in the leadership of nurses in challenging structural racism and other forms of discrimination within their profession and the larger health care system to advance health equity.

Finding

Foundation funding to the nursing profession favors financial aid for education over support for research or public policy and advocacy.

From 2015 to 2019, half (50 percent) of grant dollars and more than two-fifths (43 percent) of the number of grants awarded for the nursing profession supported scholarships, fellowships, and other forms of financial assistance for nursing education (FIGURE 5). These shares would undoubtedly be higher if more detailed information were available on grants for nursing education. For example, many grants to schools of nursing do not describe the purpose of the grant and, therefore, are not counted as providing financial assistance. However, it’s likely that at least some part of these awards target financial assistance for student nurses.

Figure 5

Foundation Giving for the Nursing Profession by Type of Support Strategy, 2015–2019*



*Grants may focus on more than one type of support strategy.

By comparison, approximately 2 percent of both grant dollars and number of foundation grants made during this period supported research-related activities.

“People always want to fund doctors and research but not nursing,” concluded one interviewee. Among the 149 grants supporting research between 2015 and 2019 was an award from the Florida Blue Foundation to the University of Miami for The Future of Nursing Science—Encouraging Minority Nurses to Pursue a PhD through a Health Disparities Summer Research Program.

Similarly, only about 1 percent of both grant dollars and number of grants for the nursing profession supported public policy and advocacy either about or led by nurses. Together, these findings suggest that most foundations may not currently view nurses as initiators of innovation and change within the health care system.

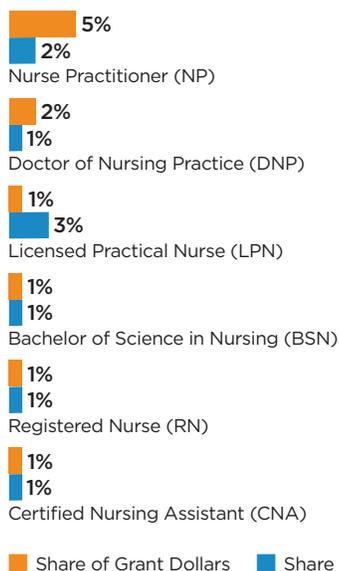
Finding

The vast majority of foundation giving does not specify a focus on a type of nurse and/or level of nursing education.

Based on grant descriptions included in the Candid data set, roughly 10 percent of both grant dollars and number of grants made by foundations between 2015 and 2019 explicitly referenced support for a particular type of nurse (e.g., nurse practitioner, registered nurse)

Figure 6

Foundation Giving for the Nursing Profession by Type of Nurse or Level of Nursing Education, 2015–2019*



*Grants may focus on more than one type of nurse or level of nursing education. Only categories accounting for at least 1 percent of grant dollars or number of grants are included.

Five Largest Foundation Grants for the Nursing Profession, 2015–2019

THE GORDON AND BETTY MOORE

FOUNDATION'S \$37.5 million grant to the University of California in 2019 to support the Betty Irene Moore School of Nursing in developing, implementing, and executing a national fellowship program for nurse leaders and innovators.

THE HELEN K. AND ARTHUR E. JOHNSON

FOUNDATION'S \$8 million grant to the University of Colorado Denver in 2015 for the Beth El College of Nursing.

THE CALIFORNIA ENDOWMENT'S

\$7 million grant to the Office of Statewide Health Planning and Development in 2015 for Phase II of the Song-Brown Healthcare Workforce Training Program in the Healthcare Workforce Development Division to increase the supply of primary care health professionals prepared to practice in underserved communities in California by expanding the capacity and quality of training programs for family practice physicians, nurse practitioners, and physician assistants.

THE CALIFORNIA ENDOWMENT'S

\$7 million grant to the Office of Statewide Health Planning and Development in 2016 for Phase III of the Song-Brown Healthcare Workforce Training Program in the Healthcare Workforce Development Division.

THE GORDON AND BETTY MOORE

FOUNDATION'S \$7 million grant to the University of California in 2017 to support the Betty Irene Moore School of Nursing in launching the Family Caregiving Institute to attend to the health and well-being of persons with chronic and serious illnesses and their families and caregivers.

or level of nursing education (e.g., Doctor of Nursing Practice) (FIGURE 6). This finding undoubtedly reflects the fact that, for example, many grants to schools of nursing are intended to support specific types of credentialing, such as Bachelor of Science in Nursing degrees, without stating this explicitly. At the same time, this lack of specificity does raise a question as to the extent to which some foundations may or may not be distinguishing among the many types of nurses and the range of variations in their roles within the medical field.

Finding

Large funders dominate giving for the nursing profession; most foundations make minimal investments.

The top twenty-five foundations by grant dollars awarded to the nursing profession accounted for half (50 percent) of grantmaking by funders included in the Candid data set between 2015 and 2019 (TABLE 3). The Georgia-based Lettie Pate Whitehead Foundation led, followed by the Gordon and Betty Moore Foundation, the Robert Wood Johnson Foundation, and Bill and Joanne Conway's Bedford Falls Foundation. The Moore Foundation provided the single-largest foundation grant for nursing during this period (see the "Five Largest Foundation Grants for the Nursing Profession, 2015–2019" sidebar). However, it ceased funding the nursing profession in the early 2020s.

Similarly, the top twenty-five funders of the nursing profession by number of grants during this period represented just over one-fifth (22 percent) of the roughly 7,100 grants included in this analysis (TABLE 4). The Lettie Pate Whitehead Foundation again ranked first, with 641 grants, more than six times greater than the 96 grants awarded by the second-ranked Robert Wood Johnson Foundation.

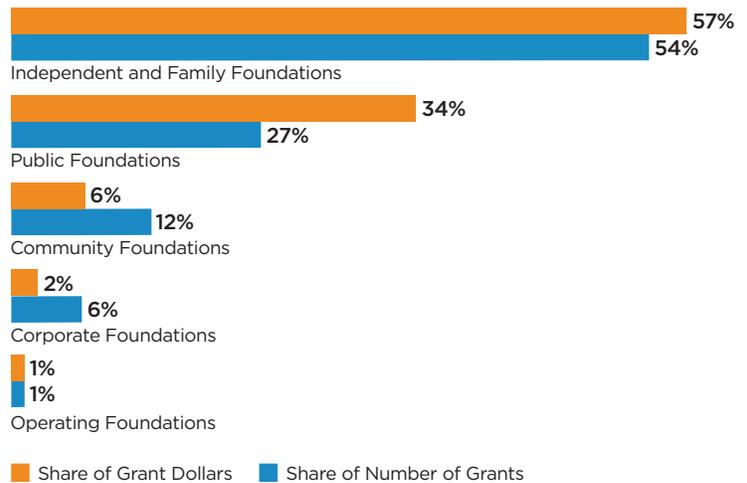
These exceptionally large funders of the nursing profession represent a relative rarity among foundations. Within the set of private and public foundations included in the Candid data set that made any grants for the nursing profession between 2015 and 2019, the median number of grants they awarded over this five-year period was just two, and the median combined value of their grants was \$50,000. This suggests that most foundation funders of the nursing profession are providing support for nursing on an ad hoc basis rather than as part of an explicit programmatic agenda.

Finally, among the types of foundations making grants for the nursing profession between 2015 and 2019 (FIGURE 7), independent and family foundations provided most of the grant dollars (57 percent) and number of grants (54 percent), followed by public foundations (34 and 27 percent, respectively). Examples of leading public foundation funders for the nursing profession are the Methodist Healthcare Ministry, the Jewish Communal Fund, the Robin Hood Foundation, and United Way of the Midlands.

Figure 7

Giving for the Nursing Profession by Foundation Type, 2015–2019

Total Grant Dollars – \$705.5M Total Grants – 7,123



Finding

Most recipients of foundation funding for the nursing profession received very modest support.

The top twenty-five recipients of foundation grant dollars between 2015 and 2019 received a little more than one-third (34.5 percent) of overall funding (TABLE 5). The University of California, Davis Health System ranked first by foundation grant dollars after receiving three grants from the Gordon and Betty Moore Foundation for the Betty Irene Moore School of Nursing.

By comparison, the top twenty-five recipients based on number of grants accounted for a smaller share (19.1 percent) of the roughly 7,100 grants awarded for the nursing profession from 2015 through 2019 (TABLE 6). Most (fifteen) of the top recipients by number of grants for the nursing profession were visiting nurse associations (VNAs). In fact, nearly one out of every eleven recipient organizations overall (9 percent) was a VNA, and VNAs accounted for close to one-quarter (23 percent) of the approximately 7,100 grants for the nursing profession tracked by this analysis from 2015 through 2019.

In contrast, most recipients of foundation support focused on the nursing profession received very little funding. Among the just over 2,000 recipients of foundation giving for the nursing profession between 2015 and 2019, the median number of grants organizations received was just two. The median combined value of these grants was \$67,000.

Table 3
Top Twenty-Five Foundation Funders for the Nursing Profession by Grant Dollars, 2015–2019

	FOUNDATION	GRANT DOLLARS	%	NUMBER OF GRANTS	%
1.	Lettie Pate Whitehead Foundation	\$91,947,402	13.0	641	9.0
2.	Gordon and Betty Moore Foundation	50,573,944	7.2	24	0.3
3.	Robert Wood Johnson Foundation	37,374,860	5.3	96	1.3
4.	Bedford Falls Foundation	32,090,000	4.5	26	0.4
5.	Helene Fuld Health Trust	29,091,874	4.1	67	0.9
6.	California Endowment	14,000,000	2.0	2	0.0
7.	Helen K. and Arthur E. Johnson Foundation	8,165,000	1.2	4	0.1
8.	Methodist Healthcare Ministry	7,555,731	1.1	23	0.3
9.	Blue Meridian Partners	7,500,000	1.1	1	0.0
10.	Jewish Communal Fund	6,848,697	1.0	12	0.2
11.	Martin Luther King Jr. Community Health Foundation	5,962,000	0.8	2	0.0
12.	Healthy Communities Foundation	5,900,000	0.8	4	0.1
13.	Cleveland Foundation	5,827,540	0.8	37	0.5
14.	Hunt Family Foundation	5,450,000	0.8	9	0.1
15.	Louis and Rachel Rudin Foundation	4,745,000	0.7	40	0.6
16.	Robin Hood Foundation	4,600,000	0.7	5	0.1
17.	Josiah Macy Jr. Foundation	4,579,369	0.6	41	0.6
18.	United Way of the Midlands	4,441,779	0.6	8	0.1
19.	California Health Care Foundation	4,439,325	0.6	6	0.1
20.	Colorado Health Foundation	4,425,585	0.6	9	0.1
21.	Chicago Community Trust	4,157,750	0.6	28	0.4
22.	Parkview Health System	4,088,037	0.6	13	0.2
23.	Rita and Alex Hillman Foundation	3,962,710	0.6	28	0.4
24.	Kanarek Family Foundation	3,885,269	0.6	5	0.1
25.	MidMichigan Health Foundation	3,629,983	0.5	9	0.1
	Subtotal	\$355,241,855	50.4	1,140	16.0
	All Other Funders	\$350,227,062	49.6	5,983	84.0
	Total	\$705,468,917	100.0	7,123	100.0

Table 4

Top Twenty-Five Foundation Funders for the Nursing Profession by Number of Grants, 2015–2019

	FOUNDATION	GRANT DOLLARS	%	NUMBER OF GRANTS	%
1.	Lettie Pate Whitehead Foundation	\$91,947,402	13.0	641	9.0
2.	Robert Wood Johnson Foundation	37,374,860	5.3	96	1.3
3.	Helene Fuld Health Trust	29,091,874	4.1	67	0.9
4.	Oregon Community Foundation	2,197,401	0.3	47	0.7
5.	Rhode Island Foundation	1,854,225	0.3	43	0.6
6.	American Nurses Foundation	2,123,743	0.3	42	0.6
7.	Josiah Macy Jr. Foundation	4,579,369	0.6	41	0.6
8.	Louis and Rachel Rudin Foundation	4,745,000	0.7	40	0.6
9.	Blue Cross and Blue Shield of Kansas Foundation	195,000	0.0	39	0.5
10.	Independence Blue Cross Foundation	1,430,019	0.2	38	0.5
11.	Cleveland Foundation	5,827,540	0.8	37	0.5
12.	Maryland Hospital Education and Research Foundation	3,066,400	0.4	36	0.5
	New York Community Trust	1,475,800	0.2	36	0.5
	Florida Blue Foundation	1,406,112	0.2	36	0.5
15.	Communities Foundation of Texas	2,315,513	0.3	34	0.5
	James M. Johnston Trust for Charitable and Educational Purposes	2,034,054	0.3	34	0.5
17.	Gertrude E. Skelly Charitable Foundation	532,000	0.1	32	0.4
18.	Isabel Foundation	965,000	0.1	31	0.4
19.	Chicago Community Trust	4,157,750	0.6	28	0.4
	Rita and Alex Hillman Foundation	3,962,710	0.6	28	0.4
21.	Bedford Falls Foundation	32,090,000	4.5	26	0.4
22.	Gordon and Betty Moore Foundation	50,573,944	7.2	24	0.3
	Brisley Scholarship Loan Fund	400,000	0.1	24	0.3
	New Hampshire Charitable Foundation	303,768	0.0	24	0.3
25.	Methodist Healthcare Ministry	7,555,731	1.1	23	0.3
	Hugoton Foundation	2,076,700	0.3	23	0.3
	Omaha Community Foundation	1,290,742	0.2	23	0.3
	Subtotal	\$295,572,657	41.9	1,593	22.4
	All Other Funders	\$409,896,260	58.1	5,530	77.6
	Total	\$705,468,917	100.0	7,123	100.0

Table 5**Top Twenty-Five Recipients of Foundation Giving for the Nursing Profession by Grant Dollars, 2015–2019**

	RECIPIENT ORGANIZATION	GRANT DOLLARS	%	NUMBER OF GRANTS	%
1.	University of California, Davis Health System	\$44,281,567	6.3	3	0.0
2.	Emory University	15,290,743	2.2	23	0.3
3.	Office of Statewide Health Planning and Development	14,000,000	2.0	2	0.0
4.	Nurse-Family Partnership	12,742,142	1.8	27	0.4
5.	Johns Hopkins University	12,101,130	1.7	24	0.3
6.	Visiting Nurse Association of Texas	11,864,661	1.7	171	2.4
7.	Los Angeles Jewish Health Annenberg School of Nursing	9,591,161	1.4	176	2.5
8.	American Association of Colleges of Nursing	9,404,635	1.3	9	0.1
9.	Visiting Nurse Health Services	9,056,484	1.3	69	1.0
10.	Visiting Nurse Service of New York	9,029,554	1.3	173	2.4
11.	Catholic University of America	9,000,000	1.3	6	0.1
12.	Visiting Nurse Health System	8,950,143	1.3	97	1.4
13.	AARP Foundation	8,799,816	1.2	3	0.0
14.	University of Maryland Baltimore Foundation	8,665,000	1.2	6	0.1
15.	University of Colorado Denver	8,010,000	1.1	2	0.0
16.	Columbia University	7,785,159	1.1	23	0.3
17.	Loyola University Chicago	6,080,000	0.9	8	0.1
18.	University of California, San Francisco	5,551,400	0.8	11	0.2
19.	University of Pennsylvania	5,438,304	0.8	40	0.6
20.	Martin Luther King Jr. Community Hospital	5,262,000	0.7	1	0.0
21.	Texas Tech Foundation	5,000,000	0.7	5	0.1
22.	Colorado Center for Nursing Excellence	4,434,987	0.6	11	0.2
23.	University Hospitals Cleveland Medical Center	4,396,614	0.6	2	0.0
24.	Visiting Nurse Association of Porter County, IN	4,337,307	0.6	15	0.2
25.	Trinity Washington University	4,250,000	0.6	7	0.1
	Subtotal	\$243,322,807	34.5	914	12.8
	All Other Funders	\$462,146,110	65.5	6,209	87.2
	Total	\$705,468,917	100.0	7,123	100.0

Table 6
Top Twenty-Five Recipients of Foundation Giving for the Nursing Profession by Number of Grants, 2015-2019

	RECIPIENT ORGANIZATION	GRANT DOLLARS	%	NUMBER OF GRANTS	%
1.	Los Angeles Jewish Health Annenberg School of Nursing	\$9,591,161	1.4	176	2.5
2.	Visiting Nurse Service of New York	9,029,554	1.3	173	2.4
3.	The Visiting Nurse Association of Texas	11,864,661	1.7	171	2.4
4.	Visiting Nurse Health System	8,950,143	1.3	97	1.4
5.	Visiting Nurse and Hospice Care of Santa Barbara	2,515,916	0.4	70	1.0
6.	Visiting Nurse Health Services	9,056,484	1.3	69	1.0
7.	Nurses for Newborns	1,757,949	0.2	61	0.9
8.	University of Pennsylvania	5,438,304	0.8	40	0.6
	Frontier Nursing University	897,525	0.1	40	0.6
10.	Visiting Nurse Association of Fox Valley	1,442,129	0.2	38	0.5
11.	Community Nursing Services	864,500	0.1	36	0.5
12.	Visiting Nurse Services of Newport and Bristol Counties	793,349	0.1	34	0.5
13.	Visiting Nurse Association of Central Jersey	2,003,199	0.3	32	0.4
	Northwest Colorado Visiting Nurse Association	1,416,503	0.2	32	0.4
15.	Visiting Nurse and Hospice Home	1,020,698	0.1	30	0.4
16.	Ridgefield Visiting Nurse Association	627,400	0.1	29	0.4
17.	Visiting Nurse Association	1,367,840	0.2	28	0.4
	American Academy of Nursing	1,140,119	0.2	28	0.4
	Livingston Memorial Visiting Nurse Association	611,500	0.1	28	0.4
20.	Nurse-Family Partnership	12,742,142	1.8	27	0.4
21.	Colorado Visiting Nurse Association	1,324,929	0.2	26	0.4
22.	Visiting Nurse Association of Cleveland	560,609	0.1	25	0.4
23.	Johns Hopkins University	12,101,130	1.7	24	0.3
	Visiting Nurse Association and Hospice Foundation	756,757	0.1	24	0.3
25.	Emory University	15,290,743	2.2	23	0.3
	Subtotal	\$113,165,244	16.0	1,361	19.1
	All Other Funders	\$592,303,673	84.0	5,762	80.9
	Total	\$705,468,917	100.0	7,123	100.0

4 Transforming Nursing to Transform Health Care

Every foundation, corporation, and individual that provides philanthropic support focused on health care inherently seeks to ensure better outcomes for others. Given the vast complexity of the U.S. health care system, supportive interventions are limitless—from medical trials to care delivery to policy solutions—but all could be significantly strengthened with nurse leadership.

As noted, nursing is unique as a profession, and nurses are uniquely central to advancing health care quality and equity. Their connection to patients and firsthand knowledge of their needs, broad array of expertise and responsibilities, and direct engagement in ensuring the best possible patient outcomes make them ideal

partners for funders seeking to transform the health care system to better serve everyone.

Specific ways in which funders can help nurses maximize their potential to transform their profession and the health care system include:

Specifying the nursing roles and responsibilities that the grant will fund.

While all members of health care teams play important roles impacting patient care and outcomes, nurses will continue to be the primary point of contact and engagement. Given this proximity, nurses have the greatest potential role to play in ensuring quality, equitable health care for everyone. But unless the grant description specifically addresses the roles and responsibilities of the nursing professionals the grant is targeting, nurses may not benefit from the funding in a way that is proportionate to their importance in the health care system.

Funding grants that help diversify the nursing workforce across all dimensions.

High-quality, equitable health care for everyone will not happen without a nursing workforce that embodies deep cultural knowledge of the communities it serves. Achieving this goal will require more than graduating more diverse nurses. Funders will also want to support the upskilling of diverse nurses as well as diversify the nursing workforce across leadership roles and institutional types (e.g., hospitals, nursing homes, schools). Also critical to remember is that diversity is not limited to racial or ethnic identity and includes, among other characteristics, cultural, language, and religious diversity; sexuality and gender identity; and disability status.

Supporting nurse-led and -informed research and innovation.

In popular culture, nurses are thought of primarily as caregivers. In reality, the breadth of nurses' knowledge and responsibilities makes them ideally suited to lead research to advance a health care system that more effectively and equitably serves patients and communities. Whether affiliated with academic institutions or located exclusively in health care settings, nurse-led research has demonstrably improved the health care system. In addition, funders that are targeting health care-related research where nurses are not the principal investigators should encourage potential grantees to engage nurses as knowledgeable interviewees in research design, insightful interpreters of findings, and valuable interlocutors in identifying ways to build on learnings.

Facilitating nurse leadership in advancing health care quality and equity.

All nurses are potential leaders in advancing the well-being of all patients. Funders should look for every opportunity to support nurses in taking on leadership roles within their institutions, in the broader health care sector, and at all levels of public policy. Beyond their firsthand knowledge and expertise, nurses benefit from an exceptionally high degree of trust in their profession and appreciation for the genuine caring they bring to their roles. No health care professionals are better positioned than nurses to identify, implement, and disseminate innovative strategies to advance health care quality and equity.

In reflecting on recent major philanthropic commitments to the nursing profession, an interviewee observed, “There’s an interesting trend in the broader landscape of smart businesspeople who see nursing as an area that is worthy of investment. I feel like these are the same people who, a generation ago, would only look to

physicians if they wanted to do something in the health care space. I think nursing may have reached a different kind of stature.”

The Foundation welcomes the opportunity to support all funders seeking to make lasting positive changes in the health care system in partnership with nurses.

Appendix A

Selected Philanthropic Commitments for the Nursing Profession, 2015–2023

The following table lists gifts of \$10 million or more announced by foundations, corporations, and individual donors in support of the nursing profession from 2015 through the first half of 2023. These commitments were identified primarily through the *Philanthropy News Digest* searchable database made available by Candid as well as *The Chronicle of Philanthropy*.

Selected Commitments of \$10 Million or More for the Nursing Profession, 2015–2023*				
YEAR ANNOUNCED	DONOR	RECIPIENT	AMOUNT	PURPOSE
2015				
	Kadlec Regional Medical Center	Washington State University Tri-Cities	\$18M	For the College of Nursing to create five endowed faculty positions and help recruit world-class faculty to teach in the school’s Doctor of Nursing Practice degree program.
	Jonas Center for Nursing and Veterans Healthcare	Columbia University	\$11.1M	For relocating the Jonas Center for Nursing and Veterans Healthcare to the Columbia University School of Nursing. The center partners with nursing schools in every state to support efforts to prepare the next generation of nurses through the Jonas Nurse Leaders Scholars Program, which seeks to address the shortage of nursing faculty by supporting doctoral candidates and joint faculty appointments; and the Jonas Veterans Healthcare Program, which supports doctoral-level nursing candidates committed to advancing veterans’ health care.
	Leonard A. Lauder	Hunter College	\$10M	For research and scholarships at the Hunter-Bellevue School of Nursing.
	Joel and Dena Gambord	California State University, Monterey Bay	\$10M	To create two endowed professorships in business entrepreneurship and nursing.
2016				
	William and Sue Gross Family Foundation	University of California, Irvine	\$40M	To create the Sue and Bill Gross School of Nursing and fund construction of a new building.
	Howard and Rose-Marie Meyers	New York University	\$30M	For the College of Nursing.
2017				
	David W. Mortara	University of California, San Francisco	\$25M	To establish a new center at the UCSF School of Nursing dedicated to “alarm fatigue” in nurses and other clinicians.
	Robert and Jane Cizik	The University of Texas Health Science Center at Houston	\$25M	For scholarships, faculty, and a new lecture series at its nursing school, renamed the Jane and Robert Cizik School of Nursing at UTHealth.
2018				
	Bill and Joanne Conway	University of Maryland, Baltimore	\$10M	To the School of Nursing for scholarships.
2019				
	Gordon and Betty Moore Foundation	University of California, Davis	\$37.5M	To launch a leadership development program at the Betty Irene Moore School of Nursing.

Selected Commitments of \$10 Million or More for the Nursing Profession, 2015–2023* (continued)

YEAR ANNOUNCED	DONOR	RECIPIENT	AMOUNT	PURPOSE
	Charlene and J. Orin Edson	Arizona State University	\$25M	To support dementia research and to enhance education and training for nurses and caregivers. The gift was split evenly between ASU's College of Nursing and Health Innovation, renamed after the Edsons, and the Biodesign Institute to create the Charlene and J. Orin Edson Initiative for Dementia Care and Solutions.
	Bill and Joanne Conway	Catholic University of America	\$20M	For support of the nursing program.
2020				
	Bob and JoAnn Glick	MetroHealth System	\$21M	To support efforts to address health inequities in the region and boost community health, especially for women and children, by creating the JoAnn and Bob Glick Fund for Healthy Communities and the JoAnn Zlotnick Glick Endowed Fund in Community Health Nursing to recognize and support the role of nurses as community leaders in improving health and health care. The fund also supports a professorship in Case Western Reserve University's Frances Payne Bolton School of Nursing.
	Bill and Joanne Conway	University of Virginia	\$20M	To support the School of Nursing.
	Bill and Joanne Conway	Catholic University of America	\$20M	To support a new nursing and sciences building on its Brookland campus.
	Maggie Kaplen	Englewood Health	\$10M	To establish The Kaplen Institute for Nursing Excellence at Englewood Health to provide access to professional development resources for existing nursing professionals and create a pipeline for new nurses to establish careers at Englewood Health.
2021				
	Mark and Robyn Jones	Montana State University	\$101M	For the College of Nursing to help fund new facilities equipped with modern classrooms and simulation labs at each of the College of Nursing's five campuses; establish five endowed faculty professorships to enable MSU to attract top faculty talent during a nationwide nursing faculty shortage; endow a scholarship fund; and establish a certified nurse midwifery program to prepare doctoral-level nurses to provide specialized maternal health care to rural and remote communities.
	Darren and Terry Jackson	Marquette University	\$31M	To support the College of Nursing in establishing a strategic initiatives fund focused on emerging health care innovations; support the college's efforts to expand enrollment and advance diversity, equity, and inclusion; and address the shortage of nursing faculty with doctorates.
	Ross and Carol Nese	Penn State University	\$27.1M	For the College of Nursing, renamed the Ross and Carol Nese College of Nursing, to support undergraduate and graduate scholarships; support infrastructure and technology, including efforts to expand the college's physical space and acquire high-tech equipment for its classrooms; provide seed funding for new ideas for teaching, research, outreach, and entrepreneurial endeavors; and create a program endowment directed by the dean.
	Elaine Nicpon Marieb Charitable Foundation	University of Massachusetts Amherst	\$21.5M	To support the College of Nursing.
	Bill and Joanne Conway	Catholic University of America	\$20M	Support of scholarships at the Conway School of Nursing.

Selected Commitments of \$10 Million or More for the Nursing Profession, 2015–2023* (continued)

YEAR ANNOUNCED	DONOR	RECIPIENT	AMOUNT	PURPOSE
	LHC Group	University of Louisiana, Lafayette	\$20M	For the College of Nursing and Allied Health Professions.
	Robert J. and Donna Manning	University of Massachusetts	\$15M	To endow the UMass Boston nursing program, renamed the Robert and Donna Manning College of Nursing and Health Sciences, support student diversity, and ensure that the new cohort of nursing professionals are champions of equitable patient care.
	Bill and Joanne Conway	University of Maryland	\$13.83M	For the School of Nursing in support of scholarships and capital improvements.
	Anonymous	Lahey Clinic Medical Center	\$10M	To establish the Jean Cunningham Department of Nursing and Jean Cunningham Chair of Nursing to support career and leadership development for the hospital's nurses.
2022				
	Leonard A. Lauder	University of Pennsylvania	\$125M	To establish the Leonard A. Lauder Community Care Nurse Practitioner Program to recruit and prepare a diverse cadre of expert nurse practitioners to provide primary care to individuals and families in underserved communities across the United States.
	Leonard A. Lauder	Hunter College	\$52M	To establish the Evelyn Lauder Community Care Nurse Practitioner Program.
	Anonymous	Children's Hospital Los Angeles	\$25M	To enhance the education, professional development, and research endeavors of nurses at the hospital.
	Margaret and Peter D'Angelo	St. John's University	\$15M	For a health sciences center that will be the permanent home of the university's BSN program.
	Bill and Joanne Conway	University of Virginia	\$14M	For the School of Nursing to provide at least 175 need- and eligibility-based scholarships to both graduate and undergraduate students to help cover tuition, school fees, room and board, and books.
2023				
	Andy and Barbara Gessner	University of Houston College of Nursing	\$20M	To support nursing education and research, including three endowed professorships as well as scholarships and fellowships for student nurses.

*Sources include Candid's Foundation 1000 data set; Candid's *Philanthropy News Digest* searchable database, available at philanthropynewsdigest.org/; and *The Chronicle of Philanthropy's* Big Charitable Gifts database of these gifts of \$10 million or more from individuals, available at www.philanthropy.com/article/big-charitable-gifts. Information included in both databases represents publicly reported major gifts. Therefore, the information included in this table is not a comprehensive listing of all contributions from individuals, foundations, and corporations of \$10 million or more. The data are incomplete for 2023.

Appendix B

Methodology

Findings presented in *Philanthropic Support for the Nursing Profession* include estimates of overall private giving for the nursing profession along with detailed analyses of actual foundation grantmaking. For the purposes of this analysis, the Foundation defines “philanthropic support for the nursing profession” as including nursing education and training, nurse leadership, nurse-led health care practice, nursing workforce development, and professional nursing organizations and associations. Excluded from this analysis is grantmaking for hospitals, skilled nursing facilities, and nursing homes, unless contributions explicitly reference nurse-led practice, education and training, or other priorities consistent with the project focus.

Private Contributions for the Nursing Profession

Estimates of overall philanthropic support for the nursing profession were developed by the project research consultant and draw on data presented in *Giving USA 2023: The Annual Report of Philanthropy for the Year 2022*, combined with information on private contributions for health care from the Association for Healthcare Philanthropy, private contributions for higher education provided by the Council for Aid to Education, and data on actual foundation grantmaking for the nursing profession provided by Candid.

Foundation Giving for the Nursing Profession

To examine foundation giving for the nursing profession, the Foundation worked with Candid to identify and license U.S.-focused grant-level data consistent with the project’s definition of “philanthropic support for the nursing profession” (noted above). While Candid’s grants data are not comprehensive for all the approximately 100,000 U.S. foundations, its data do include most of the nation’s major private and community foundations and account for roughly half of overall foundation giving. In addition, Candid also tracks data for thousands of public foundations (a.k.a. grantmaking public charities) that raise funds from other donors but also make grants either exclusively or within specific programmatic areas. Examples include United Ways, women’s funds, and the Foundation.

The Foundation licensed from Candid a data set of approximately 11,700 grants of \$5,000 or more awarded from 2015 through 2020 that potentially met the project’s definition of “funding for the U.S. nursing profession.” Data for 2020 were partial, as complete 2020 grants data did not become available from Candid until mid-September 2023. As a result, this analysis focuses on the period 2015 to 2019. Ultimately, the research consultant narrowed the initial Candid data to a set of roughly 7,100 grants awarded by just over 2,000 private, public, and community foundations that met the project criteria. However, because Candid data are not comprehensive, there are undoubtedly more foundations that provided support to the nursing profession than are represented in this analysis.

Finally, excluded from this analysis are grants awarded by foundations included in the Candid data set to other foundations included in the set. These grants were included when preparing the lists of top funders to reflect the full commitments of these foundations but were excluded from aggregate data to avoid double counting grant dollars.

Charitable Gift Fund Support for the Nursing Profession

To examine charitable gift fund support for the nursing profession, the Foundation received data on giving related to nursing from the Indiana University Lilly Family School of Philanthropy’s donor-advised fund database for the period 2016–2019. (The Lilly School did not have comparable data available for 2015.) These data represent 70 percent to 75 percent of all giving through donor-advised funds for 2018 and 2019. The shares are modestly smaller for 2016 and 2017 but nonetheless represent a majority of giving. The project research consultant then reviewed these data to ensure consistency with the project definition of “philanthropic support for the nursing profession.”

Appendix C

Interview Participants

To provide perspectives on current philanthropy for the nursing profession and opportunities for investment going forward, the *Philanthropic Support for the Nursing Profession* research consultant interviewed ten experts on nursing, most of whom are funders of the field. The consultant and the Foundation thank these key interviewees for sharing their insights for this project.

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