

Roll Call



We can't fight the coronavirus pandemic with a nursing shortage

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As the enormity of the global coronavirus pandemic comes into frightening focus for ordinary Americans, the media has begun worrying that our already fragile health care system won't have enough stuff — such as personal protective gear, beds and respirators — to weather this storm.

These are essential, valid concerns. But questions about equipment miss the system's most obvious structural problem: Even before the very first novel coronavirus infection last year, the United States didn't have enough nurses to treat the patients we already have.

Economists at Georgetown University have projected that some 200,000 nursing positions will go unstaffed across the country this year. All told, it's as many as 1 in 8 nursing jobs that hospitals won't be able to fill.

As emergency rooms overflow and the system begins to buckle under the strain of the pandemic, hospital administrators will be forced to increase nurses' patient workload to help meet rising demand.

But a nurse's workload isn't some silly, parochial concern or labor union gripe. Quite the opposite, it has a material, negative relationship with patient mortality. According to the National Institutes of Health, increasing a nurse's workload by just one patient increases patient mortality by 7 percent.

Complicating clinician staffing further, the experiences of other countries show that our health care workers are disproportionately vulnerable to this contagion and require isolation from patients and their own families.

In Italy's Lombardy region, the epicenter of the pandemic in Europe, 10 percent of all doctors and nurses were infected and quarantined, according to a tally by The Associated Press. China, where the outbreak began in December, similarly reported huge cases of health care worker infections.

To believe the United States will somehow prove immune is both foolish and dangerous.

We know that we already don't have adequate levels of nurses, and we're reasonably confident that a share of those too-few workers will be unable to treat patients when they become infected themselves. The only answer is to get more nurses — quick, fast and in a hurry.

For the last seventy years, hospitals have bridged domestic labor shortages by recruiting and hiring significant numbers of foreign-educated nurses. Researchers at Harvard recently estimated that 16 percent of all registered nurses in the country are immigrants.

Still, more are needed.

At this moment, there are thousands of qualified foreign nurses who have been approved for green cards but cannot yet emigrate because of a so-called visa retrogression, a complicated bureaucratic algorithm to control the flow of immigration.

In the case of the Philippines, which has produced roughly one-third of all foreign-educated nurses in the U.S., nurses must wait four years for a visa appointment because of this visa retrogression. We can't wait four years to get these nurses to patients.

Since 1921, Congress has allocated 25.3 million immigrant visas under numerically limited green card categories such as workers in information technology, health care and finance. In all but 26 of the previous 98 years, successive administrations issued fewer green cards than were made available by Congress.

In total, the government only issued 20.6 million green cards in that period, leaving a 4.5 million surplus of apportioned but unused visas, according to an analysis by the Cato Institute.

In response to a widening nursing shortage that contributed to the nation's inability to care for those impacted by the global war on terror, Congress granted in 2005 a one-time allotment of 50,000 unused visas for registered nurses.

If the United States stands any hope of containing this virus and treating the millions who will likely become infected, Congress must do the same thing now.

Hospitals were already in a dangerous state of emergency before the coronavirus. Now, with the number of infections in our own backyards spiraling, our government says America is on a war footing. But how can the nation go to war without soldiers?