



EDITORIAL

The student perspective on the appeal of nursing and boosting recruitment

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First established as a professional and respectable career by Florence Nightingale in the mid-1800s, nursing has since continued to advance its evidence-based practice, navigating innovative technology and ever complex health conditions (Cherry and Jacob, 2016), whilst consistently ranking as the most trusted profession (Milton, 2018). Despite said merits, a 26% fall in the number of applicants to study nursing in England in the two years since 2022 has been reported by the University and Colleges Admissions Services (UCAS; Royal College of Nursing, 2024). The fall is occurring against a backdrop of 10.3% nursing vacancy rate across the NHS in England.

Why a nursing shortage exists is an enduring debate, with income level as a missing pull factor commonly proposed, amongst a myriad of other considerations, such as the level of autonomy and individual interests (Drennan and Ross, 2019). Remarkably, there is a scarcity of research which aims to unpick the decision-making of students who pursued nursing (Wilkes et al., 2015). Yet, research can provide insight into planning effective methods to boost the appeal of nursing for prospective students and prevent attrition (Messineo et al., 2019). Importantly, the global gap between the supply and demand of nurses is ever-growing, owing to the socio-demographic changes as result of an ageing population and low birth rates (Marć et al., 2019). Thus, concentrated efforts to understand how to enhance the attractiveness of the profession are paramount if the risk of widespread unmet health needs and burnout for existing nurses is to be minimised. Considering this need, this editorial intends to explore what constitutes the appeal of nursing, or lack thereof from a student perspective and the resultant implications. We discuss recommendations to tackle the existing recruitment deficit.

Anyone who has ever interviewed nursing students, or prepared for an interview themselves will know that wanting to help others as the answer to “why do you want to be a nurse?” is an often-heard cliché. Yet, it is not so common an answer without reason. Indeed, nursing has traditionally been deemed a vocation or calling for those with altruistic motives and it offers the chance to support patients at their most vulnerable, which can be incredibly fulfilling and a privilege (Carter, 2014). The authors themselves consider this characteristic fulfillment to have been a crucial motivating factor. However, this may be insufficient to

attract enough new nursing applicants in the modern-day reality, where growing demands on the NHS produce unsustainable pressures on already short-staffed and burnt-out nurses. Further, such a notion of nursing as an altruistic vocation could in fact be inadvertently harmful. According to interviewed Finnish registered nurses, the depiction of nurses within society as self-sacrificing yet immensely resilient has been used to excuse poor working conditions and prevent improvement (Kallio et al., 2022). In reference to other stereotypical perceptions of nurses, like that nurses are doers rather than thinkers, or female rather than male, van der Cingel and Brouwer (2021) note that such over-generalisations not only prevent the flourishing of the profession as aforesaid, but also ignore the uniqueness of every nurse. Consequently, applicants who do not seem to 'fit in' are discouraged. Perhaps then, whilst the pursuit of nursing as an altruistic calling will continue to appeal to, and attract some, the perceptions of who can be a nurse and why, require transformation if a diverse workforce, equipped for present demands and improved working conditions are to be obtained.

Still, should one deem themselves called to nursing, the financial burden of education can prove a key deterrent for prospective nursing students. The reintroduction of tuition fees in 2017 resulted in a 32% decline in applications, worsening the workforce shortage (House of Commons Library, 2020). Although the NHS Learning Support Fund, introduced in 2020, offers maintenance grants to ease pressures, the rising cost of living and perceived undervaluation of nursing salaries continue to dissuade many (Department of Health and Social Care, 2024). Early-career nurses earn significantly less than peers in comparable professions, which raises concerns about nursing's financial viability as a long-term career.

Further, the working conditions that nurses face may diminish the perceived return on said financial investment. High workloads, administrative burdens, and chronic staff shortages have left many nurses physically exhausted and emotionally burnt out (Health and Social Care Committee, 2021). Paired with low pay, these conditions paint a picture of an unsustainable career path which discourages applicants. Studies show that low remuneration, coupled with workplace violence and unsafe conditions, directly contributes to dissatisfaction, burnout, and turnover (Labrague et al., 2020).

For existing nursing students like the authors themselves, the psychological toll of clinical placements further compounds the aforesaid concerns related to their career path. While placements are essential for skill development, they are often marked by distressing experiences, overwhelming workloads, and a lack of confidence in high-pressure settings (Lavoie-Tremblay et al., 2022). Placement stress can lead to anxiety, reduced self-assurance, and even programme attrition (Henderson et al., 2012; Aryuwat et al., 2024). Observing staff burnout firsthand reinforces negative perceptions of nursing as a demanding and undervalued profession.

Workplace aggression further exacerbates these challenges, affecting both qualified nurses and students. Kim, Mayer, and Jones (2021) highlight how exposure to violence increases anxiety and diminishes enthusiasm for nursing careers. While support systems like mentorship, mental health services, and debriefing programs exist to help students process these experiences constructively (Cambridge et al., 2023; Zhang et al., 2022), their implementation remains inconsistent. Edge and Gladstone (2022) note that disparities in access to such support leave some students feeling unsupported, undermining their resilience and commitment to the profession.

Critically, the current strategy to address nursing shortages in England has demonstrated how short-sighted approaches can counterproductively contribute to dampening the appeal of nursing. Between 2022 and 2023, 52,148 new nurses joined the Nursing and Midwifery Council (NMC) register, with 25,006 being internationally educated, a 6.8% increase from the previous year (NMC, 2023). International nurses

bring diverse skills and cultural competence, enhancing the NHS's ability to provide inclusive care for its increasingly diverse communities (Nashwan, 2024). Their role in alleviating staffing gaps remains critical, particularly as the healthcare system faces an ageing population and rising rates of chronic illness. However, critics argue that an over-reliance on international recruitment places undue strain on domestic education pipelines. Newly qualified UK nurses face difficulties securing employment, despite workforce shortages, leading to disillusionment and a decline in nursing's appeal (Stacey, 2024). Ethical concerns further complicate this approach, particularly when recruiting from red list countries like Nigeria and Bangladesh, which face severe healthcare workforce deficits themselves (Migration Advisory Committee, 2023).

The present-day appeal of nursing is evidently shaped by interconnected structural, financial, and ethical factors with a myriad of implications and resulting recommendations emerging from this discussion. Recommended change requires collaboration from different stakeholders, including educational institutions, policymakers, healthcare providers and the National Health Service.

While international recruitment is a necessary short-term measure, it cannot be the sole solution. A balanced strategy must include targeted investment in domestic nursing education and retention. This means offering better career progression opportunities, supporting newly qualified nurses, and enhancing the student experience to attract and retain homegrown talent.

To improve financial attractiveness, the Royal College of Nursing (2024) advocates increasing starting salaries by £7,400 which would position nursing as a more competitive profession. However, salary increases alone are unlikely to resolve the issue. Alternative solutions, such as loan forgiveness programs proposed by the Nuffield Trust (2023), could provide long-term relief for nursing graduates, particularly those committing to NHS service for a defined period. Combining competitive salaries with innovative financial incentives would demonstrate that the value of nursing aligns with its demands, helping to restore its appeal as a career choice. Still, (Martin et al 2020) argue that although financial incentives are essential within nursing, they alone are not a sufficient motivator.

The Royal College of Nursing (2024) highlights that creating safer working conditions and investing in the services worked by nursing staff can make nursing a 'more attractive' career choice. Addressing poor working conditions requires systemic reforms that prioritise student and staff wellbeing. Improving the consistency and accessibility of mentorship, structured debriefing, and mental health resources during placements is critical. Combined with better pay, measures to make working environments safer could reshape nursing into a sustainable and rewarding career choice.

If the challenges relating to the nursing profession remain unresolved, Nursing shortages risk further decline within the UK; of which there are already 43,339 unfilled positions (Royal College of Nursing, 2023) (RCN). This could include increased burnout and poor job satisfaction (RCN, 2024). This increased pressure on under-resourced teams risks continuously deterring applicants from joining the profession (Care Quality Commission, 2022), creating a negative cycle. Furthermore, staffing shortages are linked with increased medical errors (Nantsupawat et al, 2021); a risk which further discourages students from joining the career due to fear of losing their professional registration (Musunur et al, 2020). If these changes are not made, the NHS may continue to become reliant on international nurses, which is not only costly for recruitment but unethical for those countries that also require these nurses (Church, 2024).

Touching upon the personal experience of the authors, for many aspiring nurses, the current working conditions within the profession can be discouraging. When morale among qualified staff is visibly affected, it is understandable that prospective entrants, or current students like the authors themselves, may experience hesitations about committing to this career. While nursing remains a highly rewarding

and meaningful vocation, concerns about worsening staff shortages and their broader implications are impossible to ignore.

Particularly troubling is the potential impact on patient care. The prospect of entering a workforce already under significant strain leads us to question whether we will be able to provide the high standards of care that patients deserve. Without meaningful reform and investment in the nursing profession, the ability to maintain safe, effective, and compassionate care for future patients is at risk, leaving a profession we are passionate about in an increasingly precarious position.

Action is required to address the stated concerns, helping to ensure that future nurses are entering a role where they feel supported, starting from their finances to their safety at work.

In conclusion, the concerns highlighted regarding individuals considering a nursing career are both genuine and understandable. It is imperative that relevant stakeholders collaborate to implement the necessary reforms to address these issues. Without decisive action, the ongoing decline in nursing applicants is likely to persist, worsening staffing shortages and ultimately compromising the quality of patient care.

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